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## LIST OF ILLUSTRATIONS.

## SPECIAL PLATES.

	PAGE
Deficiency Disease (R. McCarrison) ... facing	823
Detection of Suture Material Embedded in Tissues (M. J. Stewart) ... facing	663
Fraser, Sir Thomas ... facing	100
Heart Disease: The Passive Mechanical Factor in (A. Blackhall-Morison) ... facing	822
Horsley, Sir Victor ... facing	260
Nutrition of Articular Cartilage (T. S. P. Strangeways) ... facing	662
Osler, Sir William ... facing	30

## ILLUSTRATIONS IN THE TEXT.

Actinomycosis: Simple Method of Cultivating the Micro-Organism of (M. H. Gordon) ...	435
Ankylosis of the Mandible (Gilbert Chubb) ...	257
Appendicectomy by a New Route (R. H. Anglin Whitelocke) ...	211
Banks, George ...	127
Caius, Johannes ...	370
Cambridge, Views of ... 17, 125, 505, 651, 772,	845
Dietaries, Deficient, Effects of on Monkeys (Lieut.-Col. Robert McCarrison) ...	249
Facial Trophoneurosis with Deformity of the Hand (I. H. Lloyd) ...	735
Flail Joints and their Treatment (Sir Robert Jones) ...	177
Gall Stones (R. P. Rowlands) ...	665
Gastric and Duodenal Ulcer (Arthur F. Hurst) ...	559

	PAGE
Harvey, William ...	371
Head Lamp ...	472
Health Services, Diagram of an Area ...	741
Heat Hyperpyrexia (W. H. Willcox) ...	393
Herpes Zoster and Greyness of Hair (Sir G. Lenthal Cheate) ...	219
Maternity Homes and Hospitals ...	299
Needle for Artificial Pneumothorax, a New (Frederic C. Coley) ...	433
Newton, Sir Isaac ...	505
Oxygen in Pulmonary Lesions, Value of (Jonathan C. Meakins) ...	325
Penetrating Wound of Chest, Thoracotomy, Suture of Pericardium (J. B. Haycraft) ...	184
Physiological Cost of Muscular Work (A. D. Waller) ...	537
Poison of the Spiny Dog-fish (H. Muir Evans) ...	287
Public Health <i>versus</i> the State (Bertram G. M. Baskett) ...	41
Rhinoplasty and Cheiloplasty (Rushton Parker) ...	12
Rock Tombs or Caves in Palestine ...	97
Sedimentary Cell for Microscopical Examination of Cerebro-spinal and other Fluids ...	708
Soldier's Heart and War Neurosis (Sir James Mackenzie) ...	491, 530
Tonsil Bayonet ...	472
Tuberculosis, Epidemiology of (William Gordon) ...	595
Tumours Complicating Pregnancy, Labour, and the Puerperium (Herbert R. Spencer) ...	179, 320
Turner, Sir William ...	439
Urethroscopic Tube ...	771
Young, Thomas ...	774

# INDEX TO VOLUME I FOR 1920.

READERS in search of a particular subject will find it useful to bear in mind that the references are in several cases distributed under two or more separate but nearly synonymous headings—such, for instance, as Brain and Cerebral; Heart and Cardiac; Liver and Hepatic; Renal and Kidney; Cancer and Carcinoma, Epithelioma, Malignant Disease, New Growth, Sarcoma, etc.; Child and Infant; Bronchocele, Goitre, and Thyroid; Diabetes, Glycosuria and Sugar; Light, Roentgen, Radium, X Rays; Status Lymphaticus and Thymus; Eye, Ophthalmia and Vision; Bicycle and Cycle; Motor and Automobile; Association, Institution, and Society; Paris, France; Berlin, Prussia, Germany; Vienna, Austria, etc. Subjects dealt with under various main headings in the JOURNAL have been set out in alphabetical order under their respective headings—for example, "Correspondence," "Leading Articles," "Reviews," etc. Original Articles are indicated by the letter (O).

## A.

ABBOTT, Charles C., "herbal specialist," legal proceedings against, 659  
Abdominal cases, three acute: polypus of stomach, large haemorrhage into wall of caecum, large ovarian cyst (J. Lionel Stretton), 80. (O)  
Abdominal emergencies (Rutherford Morison), 425. (O)  
Abdominal tuberculosis. See Tuberculosis  
ABERCROMBIE, R. W.: Physiopathic paralysis of the hand and its causation, 764. (O)  
Aberdeen, proposed institute of research in animal nutrition at, 438  
Abortifacients, sale and advertisement of (leading article), 192—Correspondence on, 242  
Abortion, attempted, sudden death at, 624  
Abortion, cervical (Gladys J. C. Russell), 363  
Abortion, etiological factors in (Daniel Dougal and J. W. Bride), 632. (O)  
Abortion, factors in (Drs. Dougal and Bride), 540  
Abortions sentenced (Devi Dayal Sasun), 589, 754  
ABT, Isaac A.: *The Baby's Food*, rev., 368  
Académie de Médecine, centenary of, 161—Election of members and corresponding members, 589  
Academy, Royal, 645  
ACADEMY, ROYAL, OF MEDICINE, IN IRELAND: *Section of Medicine*.—Exhibition of cases, 736—Dr. Spears: Mixed functional and organic palsy, 736  
*Section of Obstetrics*.—Bethel Solomons: Uterine cancer, 48—Dr. Ashe: Ovarian insufficiency, 48—Sir W. Smyly: Schultz's forcipers, 48—Hastings Tweedy: Tubal sterility, 604—Spencer Sheiell: Circumcision as an ancient rite and as a surgical procedure, 768  
*Section of Surgery*.—Cases and specimens, 519—A. E. Boyd: Oil ether colonic anaesthesia, 768—Sir W. I. de C. Wheeler: Arthroplasty of the knee-joint, 768—Seton Fringle: Early symptoms of cancer of colon, 768  
Acari from lungs of *Macacus rhesus* (F. Martin Duncan), 276  
Accidents, rare, presumed due to negligence, 554  
ACHARD: Lethargic encephalitis, 193, 241  
Achilleion palace at Corfu now known as the Tribondeau hospital, 458  
Acidosis in certain nervous disorders (B. H. Shaw), 695. (O)  
Aene vulgaris, x-ray treatment of (H. C. Semon), 700. (O)  
Acoustic tumour. See Tumour  
*Acta Societatis Medicorum Fennicae Duodecim*, 312  
Actinomyces, simple method of cultivating the micro organism of, 435  
ADAMI, J. G.: The diphtheroid group, 14—Elected honorary Fellow of Christ's College, Cambridge, 785  
ADAMS, John: Ante-natal and post-natal syphilis, 603  
ADAMSON, James, obituary notice of, 313  
ADDISON, Right Hon. Christopher: Appreciation of Sir Robert Morant, 455  
Addison and Harley on the colour of a cat, 72  
Adenoids, nasal drill in treatment of (Gertrude H. Hickling), 147. (O)—Correspondence on, 238, 310, 349, 487  
Adenomyoma of recto-vaginal septum (M. H. Phillips), 224  
Adjusting the matter, 278  
Adrenalin mydriasis (Loewi's) as a sign of pancreatic insufficiency (W. L. Cockcroft), 669. (O)  
Advertisements for medical officers. See Medical  
Advertising's artful aid, 558  
Aeroplane in medical investigation, 230—Aerial expedition to make journey from Cairo to the Cape, 230. See also Mitchell, Chalmers  
Aesculapian Club, Toronto, election of officers, 725  
AFFLECK, Sir James O.: Appreciation of Sir Thomas Fraser, 101  
Afghanistan dispatch, 422  
Africa, East, Indian medical practitioners in (parliamentary question), 482, 650

Africa, sleeping sickness in (Captain Basil Spence), 205  
Africa, West, the white man in, 411  
"After care," 650. See also Sanatorium treatment  
Air Ministry: *The Medical Examination of Civilian Pilots, Navigators, and Engineers*, 608  
Air raid claims (parliamentary question), 808  
Air-way infections (T. H. C. Benians), 668. (O)—Correspondence on, 812  
AITKEN, Captain C. J. H.: Night blindness in scurvy, 526  
ALBERT WEIL, E.: *Éléments de Radiologie*, rev., 770  
ALCOCK, A.: *Entomology for Medical Officers*, rev., 707  
Alcohol, supply of to doctors in America, 623  
Alcohol as a therapeutic agent (Dr. Dale), 294—Discussion, 295  
Alcohol for power and traction purposes: Investigation officer appointed, 112  
Alcoholism, acute, in man, toxicological investigation of, 411  
ALDERSON, Reginald: Severe angio-neurotic oedema, 828  
Alien enemy practitioners (New South Wales), 233  
Alimentary canal, needle in (Haywood Smith), 81—(W. M. Feldman), 206—Pin in (H. B. Pope), 242—(A. B. Roberts), 424  
ALLBUTT, Sir Clifford: Appreciation of Sir William Osler, 64—Appreciation of Charles Louis Taylor, 101—Medical literature for Vienna, 484—Elected an honorary member of the Association of American Physicians, 779—Presentation portraits of, 876—Writes a preface to *Industrial Colonies and Village Settlements for Consumptives*, 885  
Alopecia, 138, 173  
ALSTROM, Hedda: Mechano-therapy, 366  
AMARD, L.: *Physiologie normale et pathologique des reins*, rev., 606  
Ambassadors to the United States, medical, 410  
Ambulance Service, the Home, 716  
Ambulances, 1st and 2nd South Midland Field, dinner, 687  
Ambulances for civil work in the United Kingdom, 434—Correspondence on, 784  
Amenorrhoea, pregnancy during, 278  
America. See United States  
American Frohse life-size anatomical charts, 16  
Ambiasine for dysentery, 190  
Amicis prize, 691  
Ammonia coefficient, high (Lady Barrett), 603  
ANROSS: Portal for acute poliomyelitis, 343  
Anaesthesia, colonic ether (A. E. Boyd), 768  
Anaesthesia in epileptics, 526, 558, 624  
Anaesthesia in throat operations (Felix Rood), 295  
Anaesthesia for thyroid operations (Mrs. Dickinson Berry), 635  
Anaesthetics, administration of (parliamentary question), 583  
Anaesthetics, discussion at Sheffield Medical-Chirurgical Society, 539  
Analgesia, visceral, in tabs, 480  
Anaphylaxis, severe recovery, 72  
Anatomy inspector for Scotland, appointment of, 617  
Anatomy, review of books on, 367  
ANDERSON, Daniel E.: *Epidemics of Mauritius*, rev., 298—Letter on, 383  
ANDERSON, Ford: Rupture of uterus, 829  
ANDERSON, Dr. Garrett: Surgery at the Endell Street Hospital, 605  
ANDERSON, Kenneth: Acute oedema of lungs, 571  
ANDERSON, R.: Small-pox in Scotland, 785  
ANDREWS, Captain H. J., obituary notice of, 137  
Angio-neurotic oedema. See Oedema  
Ankle amputation, artificial appliance for, 590  
Ankle, fracture dislocations of, 62  
Ankylosis of mandible and its operative treatment (Gilbert Chubb), 256. (O)  
ANSON, G. E.: Haematoporphyrinuria, 634  
Ante-natal respiratory movements, 877  
Anthrax infection by brushes, 25, 53, 276  
Anthrax Prevention Act, 276  
Antianaphylaxis in treatment of chronic disorders (leading article), 839

Antimony intravenously in filariasis (Lieut. Col. Sir Leonard Rogers), 596. (O)  
Antipyretic drugs and cold water, 206  
Antiscorbutic lemon juice tablets, 624  
Antispiritualistic vaccine, 726  
Antistreptococcal serum in puerperal fever (O. Hilton), 185  
Antistreptococcal serum in quinsy (Noel C. Forsyth), 361. (O)  
Antityphoid inoculation (parliamentary question), 482  
Antivermin paste, 472  
Anzacs, prophylaxis and venereal disease amongst, 202. See also Venereal  
Aortic endocarditis and aortitis, association of (J. E. MacIlwaine), 428. (O)—Correspondence on, 586, 656, 688, 754  
Apoplexy, utero-placental. See Haemorrhage, accidental  
Apothecaries' Society of London: Pass lists, 204, 690, 814—Awards Gillson scholarship, 277  
Apothecary poet's house (Keats), 526  
Apparatus for man without arms, 20  
Appendectomy by a new route (R. H. Anglin Whitelocke), 211, 223. (O)—(H. Stewart Brander), 293—Correspondence on, 416  
Appendicitis without protective stiffening of the abdominal wall (John D. Malcolm), 432. (O)  
Appendicular concretions (G. G. Shattock), 635  
Appendix dyspepsia. See Dyspepsia  
Appendix, intussusception of (Archibald Young), 365  
ARAUJO, Heracles Cesar de Souza: *A Prophylaxia Rural no Estado do Paraná*, rev., 738  
ARKWRIGHT, Dr.: Rickettsia bodies in trench fever and typhus, 709—Bacterial variation, 709  
ARMAND-DELLIE, P. (and Ph. WAPPEL): *L'Ecole de Plein air et L'Ecole au Soleil*, rev., 154  
Armless man, apparatus for, 20  
ARMSTRONG, Henry Edward, Honorary Fellowship of Society of Medical Officers of Health conferred upon, 305  
ARMSTRONG, Richard B.: Cervical caries simulating cerebellar tumour, 499. (O)  
ARMSTRONG-JONES, Sir Robert: Forgetting, psychological repression, 98, 236  
ARMY, BRITISH, MEDICAL SERVICE OF: Appointments to new territorial army, 489  
Army Medical Service in the war (leading article), 840  
Army pay of civilian medical practitioners, 172  
Auxiliary R.A.M.C. funds, 35  
Commissions R.A.M.C., 724  
Estimates, 269  
Memorial to officers and men of the R.A.M.C. who fell in the war, 307, 385  
Military medical services in 1919, 134  
Nurses, 269  
Officers' gratuity, 855  
Parliamentary questions, 269, 345, 449, 720, 879  
R.A.M.C.: As a career, 29—Memorial to officers and men who fell in the war, 307, 385—War Office memorandum on strength and arrangements for the future, 312—Special Reserve, 489—R.A.M.C. pay in India, 525—R.A.M.C. officers detailed for foreign service, 720—R.A.M.C. commissions, War Office announcement, 724—R.A.M.C. officers' gratuity, 855  
Services of (dinner), 807, 831, 840—Leading article on, 840  
Special Reserve R.A.M.C., 489, 590, 624  
T.F. and S.R. See Territorial army  
Territorial army, 192, 307, 350, 383, 417, 489, 590, 624, 879—Appointments to the new Territorial army, 489—Conditions of service, 879  
Territorial general hospital staffs, 238  
Territorial and Special Reserve officers, R.A.M.C., in Mesopotamia, 345  
War memorial, 307, 385  
Army Council instruction, army fees for civilian doctors, 814  
Army fees for civilian doctors, 814  
Army, French, medical school of, 55

Army, Indian, medical service of: Temporary commissions, 35, 93, 96, 168, 200, 383, 417—Is it worth while? 307—B.A.M.C., pay in, 525—Correspondence on, 554—Pensions for widows, children, and dependants of deceased officers (parliamentary question), 650—Assistance for invalided officers (parliamentary question), 650—Cost of increases of pay (parliamentary question), 751—Revised rates of pension, 813—Annual dinner, 814—Recruiting for, 849

Army masseuses. *See* Masseuses

Army Medical Department, services of, 807, 831

Army mental hospitals. *See* Hospitals

Army nurses (parliamentary question), 269

Army officers in India. *See* India

Army, United States, medical museum of, 163

ARNOLD, F. S.: Erysipelas, 277, 316—A correction, 316

Arsenic in lethargic encephalitis, 655

Arsenic, permeability of the meninges to, 785

Arsenuretted hydrogen gas, poisoning by (Thomas H. Wignall), 826 (O)

Arseno-benzol compounds, in syphilis: comparison of two methods of administering (H. E. Gibson), 114 (O)

Arseno-benzol compounds used in treatment of syphilis: poisoning by (Alexander G. R. Foulerton), 864 (O)

Arseno-benzol preparations, toxic effects of (leading article), 51

Arterial embolism, operation for, 85

Artery, subclavian, subcutaneous rupture of (Cecil Rowntree), 326

Arthritis, suppurative, and peritonitis after acute bronchopneumonia (A. Lloyd Davies), 501

Arthroplasty of knee-joint (Sir W. I. de C. Wheeler), 768

ARTHUR, Maurice: *La Physiologie*, rev., 540

Articular cartilage, nutrition of (T. S. P. Strangeways), 661 (O)

Artificial appliance for amputation below ankle, 590

Artificial limbs, provision of (parliamentary question), 583

Artificial limbs, provisional, 423

Artificial pneumothorax, note on, with description of a new needle (Frederic C. Coley), 432 (O)—Correspondence on, 522

ASKE, Dr.: Ovarian insufficiency, 48

ASKE, S. G.: Mode of quinine administration, 61

Asphyxia neonatorum, cardiac massage in (E. Ward), 257

Asphyxia from inhalation of tobacco smoke, 692

Association, British, Cardiff meeting, 880

Association, British Dental, new head quarters opened, 173

Association, British Medical: Annual Meeting at Cambridge, 1920, 17, 125, 369, 410, 505, 511, 551, 579, 612, 645, 651, 681, 714, 772, 840, 843, 845—Evolution of the Cambridge medical school, 369, 505, 651—Note on, 511—Pathological museum, 579—Sections, 645, 681, 714—Annual dinner, 645—Present Cambridge medical school, 772—Honorary degrees at, 840—Picturesque Cambridge, 845

ASSOCIATION, BRITISH MEDICAL:  
Bromley Division.—Golf tournament, 785  
East Riding Division.—E. Harrison: Early diagnosis of syphilis, 364  
Edinburgh Branch.—Clinical meeting, 234, 348  
Hampstead Division.—Meeting and exhibition of cases, 438  
New South Wales Branch.—Resolution re. alien enemy practitioners, 233  
Portsmouth Division.—Clinical demonstration, 14

Association, British Medical, proposed new Branch in China, 619

Association, British Medical, machinery of, 63

Association, British Medical, President-elect, 551

Association, British Medical, South African Congress of, 514

Association, British Medical, Stewart Prize, 748

Association, British Orthopaedic, 687

Association of Certifying Factory Surgeons, report, 335

Association, London, of the Medical Women's Federation: Discussion on infant welfare centres, 153—Hedda Alstrom: Mechanotherapy, 366—Helen Boyle: Early nervous and borderline cases, 438—Dr. Garrett Anderson: Surgery at the Endell Street Hospital, 605—Sibyl I. Welsh: The nervous system and the endocrine glands, 769

Association, Medical Museums. *See* Medical Association, Medico-Psychological.—R. Hunter Steen: Chronic hallucinatory psychosis, 363—Report on treatment of incipient mental disease, 515

Association, Mental After-Care, annual meeting, 423

Association, National, for Prevention of Tuberculosis, appeal, 423

Association of Public Vaccinators, annual meeting, 368

Association, Scottish Poor Law Medical Officers', annual report, 166

Association of Surgeons of Great Britain and Ireland: Leading article on, 90—Formal constitution of, 90—First annual meeting, 445—First meeting in London, 714

Association, Women's Medical, of New York City: Mary Putnam Jacobi fellowship, 173, 205

Association, Women Sanitary Inspectors and Health Visitors', advocate equal pay for both sexes, 815

Asthma, results of peptone treatment of (A. G. Auld), 567 (O)

Asylum Medical Service, improvements in, 550, 686

Asylums as military hospitals (parliamentary question), 551

Atropine in acute suffocative catarrh (Wm. Verner Furlong), 219

Atropine in pylorospasm and pyloric hypertrophy, 551

Atropine in sea-sickness, 23

AULD, A. G.: Mitral stenosis in soldiers, 13—Intravenous protein therapy, 380—Results of peptone treatment of asthma, 567 (O)

AUSTEN, Major E. E.: *The House-fly, its Life-history and Practical Measures for its Suppression*, rev., 607

Australasian Medical Congress, 206

Australia: Deaths from diphtheria in, 632—Friendly societies and nursing benefits, 881—Federal control of the public health, 881

Australia, South: Medico-political, 27—University and medical school, 27—Verco, Sir Joseph, 27

Australia, West: Number of cases of gonorrhoea and syphilis notified, 724

Austrian destitute orphans, hospitality for (parliamentary question), 346

Aviators, civilian, medical examination of, 608

Aviators, experienced, labyrinthine reactions of (David Ranken), 860 (O)

## B.

Babies, review of books on, 368

Baby week, 849

BACOT, Mr.: Rickettsia bodies in trench fever and typhus, 709

B. influenzae. *See* Influenza bacillus

Bacteria, review of books on, 297

Baden and Prussia decide to create a doctorate in dentistry, 589

Bahr. *See* Manson-Bahr

RAILLIERE, Emile J. B., death of, 567

BAIRD, Captain H. C.: *Service Handbook*, 385

BALFOUR, Andrew: Ticks and relapsing fever, 97, 235

BALFOUR, Major Thomas Henry, obituary notice of, 556

BALL, E. J.: Our opportunity, 520

BALL, Captain Robert Gordon, obituary notice of, 690

BALLANCE, Sir Charles A. (and Charles David GREEN): *Essays in the Surgery of the Temporal Bone*, rev., 798

BALLANTYNE, J. W.: Colour in pregnancy, 438

BALMAIN, Captain Augustus R.: Treatment of malaria, 381

BANA, F.: Acute attack of asthmatic dyspnoea caused by filarial embryos, 796

BANKS, George, diamond jubilee of, 127

BANNING, Robert J., obituary notice of, 351

BARBER, Hugh: Case of tuberculous meningitis with complete recovery, 601 (O)

BARBER, Margaret H.: *British Nurse in Bolshevik Russia*, rev., 799

BARBER, Maurice C.: Case of encephalitis lethargica, 500

BARCROFT, J.: Oxygen therapy, 150

BARDSWELL, Noel Dean: *Advice to Consumptives, Home Treatment, After-care, and Prevention*, rev., 708

BARENDT, Frank H.: Remarks on scleroderma, 44 (O)

BARFORD, A. M.: Anaesthesia in epileptics, 558

BARKER, Arthur, the drugless healer, sentence on, 314

BARKER, J. C.: Treatment of septic peritonitis, 656

BARLING, Colonel Seymour (and Major J. T. MORRISON): *Manual of War Surgery*, rev., 469

BARNES, John A.: New lamps for old in obstetrics, 59

BARR, Sir James: Measurement of emotion, 381

BARRETT, Lady: High ammonia coefficient, 603

BARTER, Brigade Surgeon Joseph Francis, obituary notice of, 855

BARTON, H. T.: A record tramp, 726

BARWISE, Sidney: Public health versus the State, 96

BASKETT, Bertram G. M.: Public health versus the State, 40 (O)—Letters on, 167, 308, 417, 520, 656

Batavia, third centenary of the foundation of, 315

Baths of old London, 807

BAYLIS, W. M.: Is haemolyzed blood toxic? 351

BAYLY, H. Wansey: Prevention of venereal disease, 61—Prophylaxis and venereal disease, amongst the Anzacs, 202—Prevention of venereal disease, 623—*Veneral Disease: its Prevention, Symptoms and Treatment*, rev., 639—Early diagnosis of syphilis, 753

BAZELY, Minnie W.: Incision in Caesarean section, 602

BEADNELL, Surgeon Captain C. Marsh: *The Reality or Unreality of Spiritualistic Phenomena*, 77

Beard case, House of Lords judgement in, 383

BEATTIE, J. Martin (and F. C. Lewis): Sterilization of milk by electricity, 682, 722

BEATTIE, Thomas: Early diagnosis of pulmonary tuberculosis, 111 (O)

Belfast: Tuberculosis sanatorium, objections to proposed site for, 617, 783—Graymount hospital, Sir H. Gauvain's report, 655, 688

BELL, W. Blair: Diverticulum of bladder, 224—Transfusion of blood in eclampsia, 625 (O)—Correlation of function, 787 (O)—Treatment of cancer of cervix uteri, 850

BELLHOUSE, Gerald: "Safety first," 848

BENIANS, T. H. C.: Air-way infections, 668 (O)

Bequests to hospitals and medical charities, 46, 71, 81, 149, 165, 173, 226, 277, 315, 525, 815

BERGEL: Biology of the lymphocyte, 123

Bergonié chair, description of, 365

Beri-beri and carbohydrate excess (K. Simpson), 735

Beri-beri, early manifestations of (H. H. Hepburn), 466 (O)

Beri-beri, prevention of, 72

Beri-beri, treatment of (W. H. Willcox), 73 (O)

Beri-beri, value of legumes in, 816

BERKELEY, Comyns (and Victor BONNEY): *Textbook of Gynaecological Surgery*, rev., 708—(and Victor BONNEY) *Guide to Gynaecology in General Practice*, rev., 770—*Gynaecology for Nurses and Gynaecological Nursing*, rev., 870

BERNARD, Léon, elected a member of the Académie de Médecine, 221

BERNHARD-SMITH, A.: Thyroid administration in hibernating dormice, 424

Berraut Prize awarded, 457

BERRY, Mrs. Dickinson: Anaesthesia for thyroid operations, 635

BERRY, Richard J. A.: A plea for the tonsils, 199

BIER, August, and abolition of compulsory military service, 289

BILLINGTON, William: St. Chad's Hospital, Birmingham, 263—Future provision of medical services: provision of private wards in health centres, 783

Biochemistry at the universities, 841

BIRK, Walter: *Schlagingskrankheiten*, rev., 771

Birmingham: Difficulty in dealing with orthopaedic cases (parliamentary question), 650—1st and 2nd South Midland Field Ambulances, dinner, 687

Birmingham scheme for the mentally defective (W. A. Potts), 472. *See also* Mentally defective

Birthday honours, 805

Birth rate, the declining (leading article), 611

Births in England and Wales, Registrar-General's quarterly return, 457, 752, 775, 802, 836, 874. *See also* Vital statistics

Births, illegitimate, and ophthalmia neonatorum (Grace H. Giffen Dundas), 436

BISHOP, Ernest S.: *Narcotic Drug Problem*, rev., 573

Biting insects and children (Sir A. Shipley), 659

BLACKER, G.: Rockefeller Foundation gifts, 883

BLACKHALL-MORISON, Alexander: Future provision of medical services, 812—The passive mechanical factor in heart disease, 817 (O)

Bladder, diverticulum of (W. Blair Bell), 224

Bladder, rifle bullet in (Major F. R. Brown), 220

BLAIR, Alexander: New lamps for old in obstetrics, 60

BLAKE: Experimental production of influenza, 267—Experimental pneumonia, 875

BLAKER, Nathaniel Paine: *Sussex in Bygone Days*, rev., 226

BLAKER, Thos. Fredk. I.: Coelum non animus, 278

BLAND-SUTTON, Sir John: Diverticulitis, 84—Retirement of, 780

BLAXLAND, A. J.: Carcinoma of thyroid, 454

Blind Committees, local Advisory (parliamentary question), 650

Blind, deaf, and crippled students, training of, Board of Education draft statutory rules, 584

Blind Persons Bill, 751

Blind, training of (parliamentary question), 345, 413

Blind masseurs, 232, 624

Blind, pensions for (parliamentary question), 615

Blind soldiers, numbers of (parliamentary question), 615

Blind, welfare of, Joint Committee appointed by Ministry of Health, 276—Parliamentary question, 879

Blindness, night. *See* Hemeralopia

BLOMFELD, James E.: Nephritis, abdominal haemorrhage, death, 400



Blood-cell suspension in complement fixation tests (F. C. Lewis), 637  
 Blood, haemolyzed, is it toxic? (W. M. Bayliss), 351  
 Blood, parental, in haemorrhage of the newborn (Montague Dixon), 539  
 Blood, pericranial effusion of, 206  
 Blood pressure, review of books on, 503  
 Blood serum of the patient injected in meningitis (Rupert Waterhouse), 45. (O)  
 Blood transfusion in eclampsia (W. Blair Bell), 625. (O)  
 Blood transfusion in nephritis (Jeffrey Ramsay), 766. (O)  
 Blood transfusion before operation (Herbert Williamson), 603  
 Blood transfusion, use of immunized blood donors in (Captain H. J. B. Fry), 290. (O)  
 Board, Central Midwives, 58, 515, 483, 616, 752  
 Board, Central Midwives (Scotland), 379  
 Board of Education: Issues a new edition of the *Syllabus of Physical Training*, 77—Makes it compulsory that local authorities should provide for medical inspection of all their schools, 241—Draft regulations re medical inspection and treatment of school children, 481—Draft statutory rules re training of blind, deaf, and crippled students, 584—Issues list of schools and institutions for physically and mentally defective, 809—Draft statutory regulations re medical inspection of secondary schools, 241, 581, 855  
 Board, Local Government, forty-eighth and last annual report of, 56, 164, 622—Note on, 52—Public health in 1918-19, 164—Section dealing with the work of inspectors of food (A. W. J. Macfadden) now published separately, 622  
 Board, Local Government (Ireland), influenza vaccine, 271  
 Board of Trade: Sale, prices, and supply of quinine, 124, 173—Report on price of petrol, 352—Issues licence to Scottish Shale Oil Scientific and Industrial Research Association for industrial research, 557  
 Boarding out of children. See Children  
 Bohemia, small-pox in, 725  
 Bolton, small-pox at (parliamentary question), 650  
 BOLTON, Alethia J.: Dried eggs, 856  
 BOLTON, Charles (and Wilfred TROTTER): Jejuno-colic fistula following gastro-jejunostomy, 757. (O)  
 BONNEY, Victor: "New lamps for old" in obstetrics, 97—(and Comyns BERKELEY): *Textbook of Gynaecological Surgery*, rev., 708—(and Comyns BERKELEY): *Guide to Gynaecology in General Practice*, rev., 770  
 BONNEY, William Augustus, obituary notice of, 421  
 Boots, Messrs., copper alanine in inoperable cancer, 174  
 Borderland cases (Helen Boyle), 438  
 BORRADAILE, L. A. (and J. Stanley GARDINER): *The Cambridge Note Book for Practical Biology (Zoology)*, rev., 154  
 BOSE, Sir Jagadis: Plant response, 412  
 BOSE, Major Satish, obituary notice of, 690  
 BOSSAN: Experimental production of pulmonary tuberculosis, 162  
 Boston, deaths from tuberculosis in 1919, 213  
 BOUCHÉ, G.: Two typical cases of lethargic encephalitis, 601  
 BOURNE, Aleck W.: Toxaemias of pregnancy, 727. (O)  
 BOURNE, A. W.: Spontaneous rupture of uterus following pituitrin, 829  
 BOUSFIELD, Paul: Forgetting, psychological repression, 237  
 BOVERI, Piero: Myoclonic form of epidemic encephalitis, 570. (O)  
 BOWLEY, Sir Anthony: Gunshot fracture of the femur, 1. (O)—War methods in civil practice, 86  
 BOX, Charles R.: Some points in connexion with renal disease, 356. (O)—*Post-mortem Manual*, rev., 470  
 BOYD, A. E.: Colonic ether anaesthesia, 768  
 BOYD, John Alexander, obituary notice of, 314  
 BOYLE, Helen: Nervous and borderland cases, 438  
 BRACKENBURY, H. B.: Appreciation of Sir Robert Morant, 421—Presentation to, 847  
 BRADLEY, Major Richard James, obituary notice of, 70  
 Brain workers, federations of, 229  
 BRANDER, H. Stewart: Appendicectomy, 293  
 Bread (parliamentary question), 615  
 BREND, W. A.: Presentation to, 379  
 BRERETON, Lieut.-Col. F. S.: *The Great War and the R.A.M.C.*, rev., 48  
 BREWERTON, E. (and Harold B. GRIMSDALE): *Textbook of Ophthalmic Operations*, rev., 606  
 BRIDE, Dr.: Factors in abortion, 540  
 BRIDE, J. W.: Results of hysterectomy for fibroids, 14—(and Daniel DOUGAL): Etiological factors in abortion, 632. (O)  
 BRISCOE, J. F.: Forgetting, psychological repression, 274  
 BRISTOWE, Hubert C.: Pneumonic haemorrhagic effusion into pleura, 500  
 British Dental Association. See Association  
 British Federation of Medical and Allied Societies: Tuberculosis Society decides not to affiliate with, 241  
*British Journal of Experimental Pathology*, first number, 351

*British Journal Photographic Almanac*, rev., 331  
 British Medical Association. See Association  
 British Science Guild, 195  
 British soldiers in France and Germany (parliamentary question), 720  
 Bronchiectasis (A. J. Jex-Blake), 591. (O)—(Ivor J. Davies), 767  
 Bronchiectasis, spirochaetes in (E. E. Glynn), 14  
 Bronchopneumonia, acute, followed by suppurative arthritis and peritonitis (A. Lloyd Davies), 501  
 Bronchus, left, foreign body in (W. R. Cammock), 602—(Thomas Guthrie), 735  
 BROWDY, M. W.: Prevention of venereal disease, 274  
 Brown Brothers, motor accessories, 526  
 BROWN, F. Leonard: Prevention of venereal disease, 99  
 BROWN, Major F. R.: Rifle bullet in bladder, 220  
 BROWN, Herbert H.: Acute oedema of lungs, 435  
 BROWN, John: Acute pulmonary oedema, 726  
 BROWN, Orville H.: *Asthma*, rev., 869  
 BROWN, William: Psychopathology and dissociation, 139. (O)  
 BROWN, W. H.: Plea for the early recognition of syphilis, 501  
 BROWN, W. Herbert (and Charles F. WHITE): *Atlas of the Primary and Cutaneous Lesions of Acquired Syphilis in the Male*, rev., 541  
 BROWN, W. Langdon: *Physiological Principles in Treatment*, rev., 188  
 BROWNE, F. J.: Hydatidiform mole, 152  
 BROWNLEE, John: Epidemiology of phthisis, 444 478—Public health administration in epidemics of measles, 534. (O)  
 BRUGSCH, Th.: *Ergebnisse der gesamten Medizin*, rev., 639  
 BRYAN, Frank: Commissions, I.M.S., 200  
 BRYANS, A.: Early diagnosis of syphilis, 416, 620  
 Budget (leading article), 577, 610—Parliamentary questions, 582, 686—The new taxes, 609, 677, 686  
 BUIST, H. Massac: Motor notes for medical men, 517, 543—Taxation of motor cars, 574  
 Bullet in bladder (Major F. R. Brown), 220  
 BURDETT, Sir Henry Charles: *Burdett's Hospitals and Charities, 1919: being the Year Book of Philanthropy and the Hospital Annual*, rev., 49—Obituary notice of, 657  
 BURKE, E. T.: *The Venereal Problem*, rev., 190  
 BURNETT, Sir E. Napier: Report of hospital survey, 684, 710  
 BURNHAM, Colonel Fred. E.: A record tramp? 692  
 Burns, paraffin wax for first-aid treatment in (J. R. Garrood), 539  
 BURROWS, Arthur: Radium therapy in advanced cancer of cervix, 806, 829  
 BUSHE, Surgeon Commander C. K.: Naval Medical Memorial Fund, 457  
 BUTCHER, W. Herbert: Prevention of venereal disease, 28  
 BUTTAR, Charles: The Territorial Force, 350—Public health versus the State, 382  
 BUTTER, John Kerr, obituary notice of, 690  
 Butter, cocoa, 446  
 BUTTERS, Geo.: "Acute suffocative catarrh," 150  
 BUXTON, P. A.: House-fly as a carrier of *E. histolytica*, 142. (O)  
 BYERS, Sir John, dinner to, 167

## C.

CABOT, Hugh (editor), *Modern Urology*, rev., 470  
 Caecum, large haemorrhage into wall of (J. Lionel Stretton), 80. (O)  
 Caecum, volvulus of, double obstruction (R. Eccles Smith), 289. (O)  
 Caesarean section for dystocia (D. Dougal), 224  
 Caesarean section, the incision in (Minnie W. Bazely), 602  
 Caesarean section for placenta praevia with concealed haemorrhage (R. Douglas Laurie), 220  
 Caesarean section scar (Eardley Holland), 705  
 Calcium chloride as a haemostatic (W. R. Grove), 47  
 Calcium lactate, value of, 726  
 Calcutta: School of Tropical Medicine, 550—Small-pox in, 618  
 CALEY, Guthrie Neville, obituary notice of, 588  
 Calf lymph, preparation of (H. S. Fremlin), 368  
 CALVERT, James: Appreciation of Samuel West, 386  
 CAMAC, James: Case of encephalitis, lethargy and myoclonus, 704  
 Cambridge: Annual meeting of the Association at, 17, 125, 369, 505, 772, 843, 845 (see also Association, annual meeting)—Evolution of the medical school at, 369, 505, 772  
 Cambridge Natural Science Club, 163  
 CAMMOCK, W. R.: Foreign body in left bronchus, 602  
 Camphor oil, subcutaneous injections of, 388, 424, 828—(Captain A. D. GORMAN), 828

CAMPBELL, Thomas: Mode of infection in pulmonary infection, 185  
 CAMPBELL, W.: Diagnosis of syphilis, 469  
 Canada: Aesculapian Club, Toronto, 725—Prescriptions for liquor in Ontario, 725  
 Cancer of cervix, advanced, rendered operable by radium therapy, 806, 829, 850  
 Cancer of colon, early symptoms of (Seton Pringle), 768  
 Cancer, experimental induction of (leading article), 680—Correspondence on, 722, 850  
 Cancer, helminths in (leading article), 777  
 Cancer, inoperable, copper alanine in, 104, 174  
 Cancer operations, use of x rays as immunity-raising agents before and after (Francis Herniman-Johnson), 793. (O)  
 Cancer, radium in, 483, 745  
 Cancer, tar, and chronic ulceration, Home Office Order, 122  
 Cancer of thyroid gland, papilliferous (Basil Hughes), 362. (O)—Correspondence on, 454, 586  
 Cancer of uterus (Bethel Solomons), 48  
 Cancer of uterus, radiotherapy in, 480  
 Cancer of uterus, treatment of, 416, 452, 521, 554, 585. See also Tumours  
 CANNON, Walter B.: *Bodily Changes in Pain, Hunger, Fear, and Rage*, rev., 440  
 Capetown, annual report of M.O.H., 241  
 Carbohydrate excess and beri-beri (K. Simpson), 735  
 Cardiac disease, analysis of 100 consecutive cases (W. Black Jones), 145. (O)  
 Cardiac massage in asphyxia neonatorum (E. Ward), 257  
 Cardiff, hospitals and clinics at, 307—Early care of mental cases in, 348  
 CARLESS, Albert: *Manual of Surgery* (Rose and Carless), rev., 769  
 Carlisle experiment in liquor control, annual report, 653  
 CARMALT-JONES, D. W., appointed to chair of systematic medicine in the University of Otago, 35  
 Carmarthen, medical dinner at, 166  
 CARNOT: Retrograde absorption by the kidney, 878  
 Carolina, South, bill passed requiring all "chiropractors, osteopaths, and other healers" to submit to State medical examination, 623  
 CARRUTHERS, Major V. T.: Instinct and hysteria, 792. (O)  
 CARTER, F. Bolton: Gastric ulcer after gastro-jejunostomy, 13  
 CARTER, Herbert S.: Diet lists of the Presbyterian Hospital, New York City, rev., 16  
 CARTER, Captain H. S.: Case of dermatographism, 149  
 CARVER, Alfred: Forgetting, psychological repression, 46. (O)—Letter on, 170  
 CARVER, G. E.: Alopecia, 173  
 Catarrh, acute suffocative (W. Duncan Lawrie), 115—(Geo. Butters), 150—(Henry Yellowless), 257—(J. A. Smyth), 670. (O)  
 Catarrh, acute suffocative, atropine in (Wm. Verner Furlong), 219  
 CATHCART, E. P., elected Fellow Royal Society, 344  
 CATTLE, C. H.: Soldier's heart, 188  
 Cavell monument in London, 148, 413—Unveiling of, 413  
 CAZAMIAN: Atropine in sea-sickness, 23  
 CEOL: Experimental production of influenza, 267—Experimental pneumonia, 875  
 Census bill, 305, 879  
 Census, the next, 842  
 Census, physical, of the male population, report on, 331—Leading article, 339  
 Cerebro-cranial injuries, review of books on, 830  
 Cerebro-spinal fever. See Fever  
 Cerebro-spinal and other fluids, sedimentary cell for microscopical examination of, 708  
 Cervical fistula. See Fistula  
 Cervical caries simulating cerebellar tumour (Richard R. Armstrong), 499. (O)  
 Cervical vagus and sympathetic: a correction, 138  
 Chadwick prizes, 355  
 CHALMERS, Albert J., death of, 514—Obituary notice of, 657  
 CHAMBERLAIN, James Thomas, obituary notice of, 137  
 CHAMBERS, E. R.: Prolonged retention of a foreign body in the cornea, 365  
 CHANDLER, Asa C.: *Animal Parasites and Human Disease*, rev., 118  
 CHAPLIN, Arnold: Appreciation of Sir William Osler, 66  
*Charaka Club: Proceedings*, vol. v., rev., 16  
 Charing Cross improvements, 104  
*Chavasse's Advice to a Mother*, rev., 368  
 CHEATLE, G. Lenthal: Herpes zoster and greyness of hair, 219  
 Cheltenham and district, reunion dinner, 103  
 Cheshire: County health administration, 58  
 Chest wound, penetrating: thoracotomy: suture of pericardium (J. B. Haycraft), 184. (O)  
 Chest wounds, penetrating (leading article), 91  
 Chest surgery (Sir Charters Symonds), 401  
 CHEVERS, Martin J.: Cutaneous manifestations in a case of cervical fistula, 424  
 Chicago: Increase of medical fees in, 725  
 CHICK, Harriette, awarded Stewart prize, 748  
 Chicken-pox and shingles (A. Ingram Cooke), 468—Correspondence on, 487

- Child labour, restriction of (parliamentary question), 414
- Children, boarding out of, Ministry of Health circular on, 782
- Children, crippled. *See* Crippled
- Children, defective. *See* Defective
- China: Proposed new branch of the Association, 619—Joint Conference of English and Chinese doctors, 619—Red Cross Society of, 755
- Chinese Medical Missionary Society and National Medical Association, joint conference, 619
- Chinese medicine, the founder of, 72
- Chiropractors to submit to State medical examination in South Carolina, 623
- Chloroform, intratracheal (Clarence Mott), 13
- CHRISTIE, Captain J. M. (and Major R. W. SUTHERLAND): Military orthopaedics, 762. (O)
- Chrome ulceration, Home Office order, 122
- Chrysophanic acid and x rays in tinea (C. J. Glasson), 219. (O)
- CHUBB, Gilbert: Ankylosis of mandible and its operative treatment, 256. (O)—A head lamp, 472
- CHURCH, Archibald (and Frederick PETERSON): *Nervous and Mental Diseases*, rev., 471
- Circumcision, a barbarous and unnecessary mutilation (G. S. Thompson), 436—Correspondence on, 620.
- Circumcision, for and against (Spencer Sheill), 768
- Circumlocution office to-day, 513
- Civil motor ambulance. *See* Ambulance
- Civil practice, war methods in (Sir Anthony Bowlby), 86
- Civilian practitioners, army pay of, 172
- CLARK, John M., obituary notice of, 524
- CLARK, Somerset: Asphyxia from inhalation of tobacco smoke, 692
- CLARK, Colonel S. F.: Intramuscular injection of quinine, 99
- CLARKE, Astley: University College for Leicester, 715
- CLARKE, Lillian: *The Country Cousin at Cambridge*, rev., 869
- CLEGHORN, Surgeon-Major-General James, obituary notice of, 884
- CLELAND, J. B., appointed to Chair of Pathology at Adelaide University, 526
- CLERY, Surgeon-General James Albert, obituary notice of, 314
- Clinical centres, 520
- Clinical research (Sir James Mackenzie), 105. (O)—Leading article on, 119—Correspondence on, 311
- Clinical teaching "elements" at work, 161. *See also* University units
- Clinical units in medical schools, 775 *See also* Medical schools
- CLIPPINGDALE, S. D.: *Wilksiana*, 104
- CLODD EDWARD: Oculism, 771
- Clothing for tuberculous patients (parliamentary question), 482
- Club: East of Scotland Overseas Medical, 196—North of England Edinburgh University, annual dinner, 584
- Club, Royal Naval Medical, dinner, 814
- Coal gas for motors, 205
- Coal for invalids (parliamentary question), 720
- COATES, Stanley B., presentation to, 818
- COBB, Geikie, his book *Organs of Internal Secretion* translated into Spanish and Italian, 71
- COBB, Lieut.-Col. R.: Rats and plague, 816
- COCKCROFT, W. L.: Loewi's adrenalin mydriasis as a sign of pancreatic insufficiency, 669. (O)
- Cocoa butter, 446
- COOD, John Alfred, obituary notice of, 556
- Coelum non animum, 278
- COHEN, H. M.: Anaesthesia in epileptics, 526
- COHEN, S. Solis: Mode of quinine administration, 756
- COHN, I.: *Urologisches praktikum*, rev., 831
- COLEY, Frederic C.: Artificial pneumothorax, with description of a new needle, 432. (O)
- Colitis, ulcerative, operative treatment of (P. Lockhart-Mummery), 497. (O)
- College, Epsom: Change of address of London offices, 71—Fees raised, 623
- College, King's, London, Old Students' Association, 315, 557
- College, Royal, of Physicians of Edinburgh: Degrees and pass lists, 240—Fellows, 240, 785—Licences, 240—Lister Fellowship, 785—Members, 240—Parkin prize, 785—Quarterly meeting, 240, 785—Supplementary royal charter, 240—Suspension of member, 240
- COLLEGE, ROYAL, OF PHYSICIANS OF LONDON: Comitia, 203, 488, 658, 724
- Council, 204
- Degrees, 203
- Diploma in ophthalmic medicine and surgery, 659; in psychological medicine, 658; in tropical medicine, 204
- Diplomas, 204, 658, 724
- Elections, 488
- Fellows, 658, 724
- Lectures, 204
- Licences, 488
- Members admitted, 203, 658
- Mitchell lecture on tuberculosis, 204
- Obituaries, 488
- University of London, 658
- College, Royal, of Surgeons, of Edinburgh: Degrees and pass lists, 422, 755—Memorial Prizes awarded, 755—Women to be admitted to Fellowship, 351
- COLLEGE, ROYAL, OF SURGEONS OF ENGLAND: Appointment of representatives, 275
- Bradshaw Lecturer, 275
- Chamberlens and the Midwifery Forceps presented to library in memory of C. Louis Taylor, 346
- Council election, 275, 489, 587
- Council meeting, 102, 587, 755
- Court of examiners, 102, 275
- Diploma in tropical medicine, 275
- Diplomas in psychological medicine and ophthalmic medicine and surgery, 755
- Diplomas, 275, 755, 854
- Donations, 587
- Examination results, 854
- Examiners, election of, 854
- Historical surgical instrument cases, 54
- Honorary Fellows, 275, 854
- Hunterian Oration, 102
- Representation of members, 102
- Vote of condolence, 587
- College, Royal, of Surgeons, in Ireland: Mary Louisa Prentice Montgomery lectureship in ophthalmology, 241, 588
- College, Trinity, Dublin: Degrees and pass lists, 34, 525
- College, University, for Leicester, 715
- College, University, London: Election of Fellows, 384—Report, 488—Biometric and eugenic laboratories at, 799—Rockefeller Foundation gifts to, 799, 834, 838
- College, West London Post-Graduate, 126
- Colleges, Royal, of Physicians and Surgeons, Ireland: Pass lists, 423
- COLLETT, J. Wallace: Treatment of malaria, 273, 453
- Colliery Surgeons' Committee (Scotland), 27
- Colon, pelvic, adhesions of, causing obstruction (Donald M. MacLeod), 867
- Colonial Office issues a set of returns concerning the white man in West Africa, 411
- Combe, Charles, note on, 205
- Complement fixation test in syphilis, report on, 877
- Complement fixation tests, standardization of blood cell suspension in (F. C. Lewis), 637
- Condensed milk. *See* Milk
- Conference of delegates of the Metropolitan Medical Schools, 885
- Congress, Australasian Medical, 659
- Congress of Dermatology and Syphiligraphy, Rome, founds a Tommaso de Amicis prize, 691
- Congress, French Medical, 423, 691
- Congress of French speaking members of the medical profession, 296
- Congress, annual, of the Ophthalmological Society of the United Kingdom, 582
- Congress, Oxford Ophthalmological, 351
- Congress, Pan-Hellenic, 1921, 853
- Congress of physicians and surgeons, proposed world, 241
- Congress of physiology, Paris, July, 1920, 514, 659
- Congress for public health, Dutch, 438
- Congress of Royal Institute of Public Health, Brussels, 691, 743—Medicine and the State (Lord Dawson), 743
- Congress of Royal Sanitary Institute. *See* Royal
- Congress, Swiss medical, 543
- Conjoint Board in England: Pass lists, 275
- Conjoint Board in Ireland: Pass lists, 423
- Conjoint Board of Scientific Societies: Annual report, 725
- Conjoint Board in Scotland: Pass lists, 172, 588, 690, 755
- Consultative Council. *See* Health Ministry
- Consulting surgeon and house-surgeon, 518, 616
- Consumption. *See* Tuberculosis
- Contraction and retraction rings, 61. *See also* Labour
- Convalescent Home for Professional Class Children (Broadstairs), reopening of, 376
- COOKE, Arthur: *Groundwork of Surgery*, rev., 225
- COOKE, Luther, appointed J.P. for County Palatine of Lancaster, 35
- COOMBS, Carey: Irritable heart, 404
- COOPER, Arthur: Prevention of venereal disease, 28—*The Sexual Disabilities of Man and their Treatment and Prevention*, rev., 771
- COPE, V. Zachary (editor): *Pye's Elementary Bandaging and Surgical Dressing*, rev., 190
- Copper alanin in inoperable cancer, 104, 174
- CORBET, William: New lamps for old in obstetrics, 59
- CORBETT, Sir Julian S.: *Naval Operations*, rev., 637
- Cornea, prolonged retention of foreign body in (E. R. Chambers), 363
- Coroner for Westminster, and what the soldier said, 716
- Corporation tax (parliamentary question), 650
- Corrections, 138, 316, 726
- Correlation of function. *See* Function
- Correspondence:**
- Adenoids, treatment of, 238, 310, 349, 407. *See also* Nasal drill
- Air-way infections, 812
- Ante-partum haemorrhage, treatment of, 753
- Aortitis and aortic regurgitation, 586, 656, 688, 754
- Appendicectomy by a new route, 416
- Arsenic in lethargic encephalitis, 655
- Artificial pneumothorax, 522
- Cancer of cervix uteri, treatment of, 850
- Cancer, experimental induction of, 850
- Cancer of uterus. *See* Uterine
- Carcinoma of thyroid, 454, 586
- Circumcision, a barbarous and unnecessary mutilation, 620
- Civil motor ambulance service, 784
- Clinical centres, 520
- Clinical research, 311
- Contraction and retraction rings, 61
- Dental caries and oral osmosis, 585
- Diagnosis and treatment of, 619
- Duodenal ulcer and the hypertonic stomach, 655, 688
- Dyspepsia, 380
- Ear, running, treatment of, 382
- Emotion, measurement of, 381
- End of the war, 383
- Encephalitis, epidemic, 722
- Encephalitis lethargica, 621
- Epidemic diseases in Mauritius, 383
- Ethyl chloride, safety of, 485
- Fees for treatment of school children, 883
- Fibroids complicating pregnancy, hysterectomy, recovery, 554
- Forerunners of Harvey in antiquity, 58
- Forgetting, psychological repression, 98, 131, 169, 201, 236, 274
- Fracture dislocations of the ankle, 62
- Future provision of medical services. *See* Medical
- General practitioners and the health services, 753, 784
- Heat hyperpyrexia, 485, 521
- Horsley, Sir Victor, proposed memorial to, 271, 370, 418, 785
- Hospitals, co-operation between, 418
- Hypernephroma of ovary, 133
- Ileo-caecal valve, 553
- Indian Medical Service, 554
- Indian Medical Service: is it worth while? 307
- Indian Medical Service, temporary commissions, 96, 168, 200, 382, 417
- Influenza and epidemiology, 235
- Influenza, protective inoculations against, 309
- Intraspinal pressure in acute disease, 311
- Intravenous protein therapy, 380
- Irish motor deadlock, 132
- Local clinical laboratories, 59
- Machinery of the Association, 63
- Malaria, treatment of, 199, 235, 272, 381, 453
- Medical discovery, awards for, 486, 519
- Medical literature for Vienna, 484
- Medical services, future provision of, 783, 812, 850, 882
- Medical societies, international organization of, 272
- Memorial to the officers and men of the R.A.M.C. who fell in the war, 307
- Meninges, permeability of to arsenic, 785
- Mentally defective, 554
- Mental disorder, treatment of, 851
- Mental disorders, physical basis of, 415, 452
- Mental treatment, early, and the rights of the subject, 689
- Milk sterilized by electricity, 722
- Motors, taxation of, 555
- Nasal drill, 310, 487. *See also* Adenoids
- "New lamps for old" in obstetrics, 59, 97, 127, 170, 202
- Nyctalopia or hemeralopia, 555
- Order of St. John, 171
- Osler, Sir William, biography of, 522
- Our opportunity, 484, 520
- Pancreas, diagnosis of disease of, 553
- Pancreatitis, chronic, 62, 132, 236
- Panel practitioners and vaccination, 883
- Pensions referee, work of, 132
- Polish Red Cross Society of Great Britain, 884
- Prophylaxis and venereal disease amongst the Anzacs, 202
- Protein therapy, intravenous, 380
- Public health versus the State, 96, 127, 167, 237, 308, 349, 382, 416, 454, 520, 586, 656
- Quinine administration, mode of, 28, 60, 99, 130, 168, 454
- R.A.M.C. as a career, 29
- Rare accidents presumed due to negligence, 554
- Relapsing fever and ticks. *See* Ticks
- Rockefeller Foundation gifts, 883
- Sanatorium hospital for the well-to-do, 883
- Sand-fly fever in Mesopotamia, 620
- Sentish colliery surgeons and the Miners' Union, 171, 239
- Senior surgeon commanders, R.N., 454

**Correspondence (continued):**

- Septic peritonitis, treatment of, 656  
Shingles, varicella, epilepsy and the weather, 487  
Small-pox in Scotland, 785  
Spelman, Dr. A. P., death of: an appeal, 689  
Spleen, apparent spontaneous rupture of a normal, 63  
Sterility, 274, 349  
Surgical war honours, 236  
Syme the discoverer of waterproofing, 521  
Syphilis, early diagnosis of, 416, 486, 620, 688, 753  
Temporary commissions I.M.S. See Indian Territorial Force, 309, 350, 383, 417  
Territorial general hospital staffs, 236  
Ticks and relapsing fever, 97, 132, 200, 235, 273, 310, 380  
Tonsils, a plea for, 199, 722, 851  
Tuberculosis as affected by the war, 585  
Tuberculosis, pulmonary, early diagnosis of, 753  
Tuberculosis, pulmonary, treatment of in private practice, 552  
Tuberculosis sanatoriums, 619, 688  
Tuberculosis village settlements, 552  
Tumours, origin of, 132  
Uterine cancer, treatment of, 452, 521, 554, 585  
Uterine cancer complicating pregnancy and the puerperium, treatment of, 452  
Vaccinal condition of small-pox carriers, 851  
"Vagasthenia," 813  
Venereal disease prevention, 28, 61, 98, 128, 273, 311  
Vienna, distress in, 29  
Village tuberculosis settlements. See Tuberculosis  
War honours, 312, 555, 586  
War records, 723
- Cost of living (parliamentary question), 844  
Cottages, timber, Ministry of Health standard specification for, 418  
COTTON, W.: Localization of foreign body, 327  
Council, General Medical: Number of medical and dental students, 102—*Minutes*, rev., 331  
—Election of Direct Representative to fill vacancy: Bill to amend the Medical Council Act introduced in Parliament, 685; Bill read a second time, 843
- COUNCIL, LONDON COUNTY:  
Health services and hospitals in London, 752  
Influenza, precautions against, 205  
Medical inspection and treatment of school children, 483  
Medical officers, appointment of, 483  
Medical practitioners' fees in midwives' cases, 348  
Medical staff of, 379  
Medical treatment for fee-paying pupils, 387  
Venereal clinics in London, 414  
Venereal prophylaxis, 166
- Council, Worcestershire County, whole-time medical appointments under, 654  
Counter-irritation, value of, 856  
County health administration, Cheshire, 58  
Cow, a tuberculous (J. E. Scales), 400  
CRAIK, Robert: Simple treatment of ringworm of the nails, 185  
CRAMER, W.: Nature and treatment of hyperpyrexial heatstroke, 343  
CRAWFORD, Alexander David, obituary notice of, 70  
CRAWFORD, Barbara G. R.: Abortifacients and preventives, 242  
CRAWSHAW, Captain J. W.: Treatment of cerebro-spinal fever, 750  
Cremation, progress of, 513  
Cress, consumption of in large quantities causes dysuria, vesical spasm, etc. (Leclerc), 637  
CRICHTON-BROWNE, Sir James: Prevention of venereal disease, 623—Prevention and treatment of insanity (Maudsley Lecture), 749  
CRUE: Treatment of peritonitis, 376  
Criminal Law Amendment Bills (parliamentary question), 414, 482, 879  
Crippen, *Hawley Harvey*, *Trial of*, rev., 299  
Crippled children, care of (G. R. Girdlestone), 697. (O)  
Crippled and disabled men, *Handicapped Worker* issued by New York Institute for, 829  
CROFTON, W. M.: Association of lethargy with the influenza bacillus, 431. (O)  
CROMBIE, John Little, obituary notice of, 658  
CROOKSHANK, F. G.: First principles and epidemiology, 186—Encephalitis lethargica, 621  
CROSLAND, George William Kilner, obituary notice of, 137  
CROSSLEY, Leonard: Tuberculosis sanatoriums, 688  
CUMMINS, Colonel S. L.: Oxygen therapy, 152  
*Cunningham's Manual of Practical Anatomy*, rev., 367  
CUSHING, Harvey: Biography of Sir William Osler, 522  
Cyclopia in routine refraction work (N. Bishop Harman), 598. (O)  
Cyst, ectopic ovarian (J. W. Thomson), 437  
Cyst of ovary, large (J. Lionel Stretton), 80. (O)  
Cystoscopy, review of books on, 541  
Czernovitz, plague at, 855

## D.

- DA COSTA, John C.: *Principles and Practice of Physical Diagnosis*, rev., 331  
Dairies, inspection of (parliamentary question), 378  
D'ALBE, Fournier: Reading by ear, 692  
DALE, Dr.: Alcohol as a therapeutic agent, 294  
DANYSZ, J.: *Origine, Évolution, et Traitement des Maladies Chroniques non Contagieuses*, 839  
DAS, J. L.: *A Manual of Conservancy*, rev., 471  
DAVID, Dr.: *Quelques précisions rapides sur Salies de Béarn et le rôle de ses Eaux en Chirurgie*, rev., 831  
DAVIDSON, Mackenzie, Fund. See Fund  
DAVIDSON, W. Cameron: Treatment of profuse sweating in axillae, 242  
DAVIES, A. Lloyd: Suppurative arthritis and peritonitis after acute bronchopneumonia, 501  
DAVIES, Ivor J.: Bronchiectasis, 767  
DAVIES, Sidney: Public health versus the State, 238, 349, 454  
DAVIES-JONES, Charles: Forgetting, psychological repression, 237  
DAVIS, Haldin: Dermatitis artefacta in the army, 433. (O)  
DAWSON, Sir Bertrand, takes the title of Baron Dawson of Penn, 269—Dinner to, 337—Medicine and the State, 743—Future provision of medical services, 800  
DAWSON, W. S.: Treatment of malaria, 600  
Deaths and Births. See Births  
Death rate of illegitimate infants (parliamentary question), 378  
DEAVER, John B.: *The Breast: its Anomalies, its Diseases, and their Treatment*, rev., 675  
Defective children, industrial schools for (parliamentary question), 269  
Deficiency disease, with special reference to gastro-intestinal disorders (Robert McCarrison), 822. (O)  
Deficiency diseases (scurvy and beri-beri)—Treatment and management of (W. H. Wilcox), 73. (O)  
Deficiency diseases in Vienna (leading article), 477  
Degrees, registrable foreign, 786  
DE LAET: Origin of polymorphonuclear leucocytes, 93  
DELANEY, P. J.: The death of Dr. A. P. Spelman: An appeal, 689  
Delhi, maternity and welfare exhibition at, 618  
Delirium tremens, treatment of (W. Starkey), 47—(Richard Eager), 114  
Demobilization of medical students (parliamentary question), 720  
Demobilized, handbook for, 385  
Denmark: Investigations into various types of pneumococcus in, 557—Compulsory notification of lethargic encephalitis in, 659  
Dental caries and oral osmosis, review of book on, 189—Correspondence on, 585  
Dental legislation, proposed (parliamentary question), 305  
Dental sepsis in children (S. F. St. J. Steadman), 186—Discussion on, 187  
Dental students, number of, 102  
Dentistry, doctorate of to be created in Prussia and Baden, 589  
Dentists' Act, revision of (parliamentary question), 615, 686, 843, 844  
Dentists' registration, future of, 549  
DENTER, Stanley E.: Diurnal enuresis in a child: treatment with galvanism, 795  
DERCUM, Francis X.: *Rest, Suggestion, and other Therapeutic Measures in Nervous and Mental Diseases*, rev., 367  
Dermatitis artefacta in the army (Haldin Davis), 433. (O)  
Dermographism, case of (Captain H. S. Carter), 149  
Detection of suture material. See Suture  
Deutsche Kongress für Innere Medizin, 557  
Devon: School medical officers' salaries, 686, 847  
DEWAR, Michael: Future provision of medical services, 850  
Diabetes mellitus, dietetic treatment of (R. T. Williamson), 399. (O)  
Diagnosis, surprises in (Edmund I. Spriggs), 563. (O)  
Diagnosis and treatment, 619  
Diamond jubilee of a Scottish practitioner (George Banks), 127  
Diathermy, review of books on, 869  
Dickens on the treatment of malaria, 756  
DICKIE, W. S.: Treatment of uterine cancer, 452  
Dictionary, new English, medical terms in, 683  
Diet, deficient, effect of on monkeys (Lieut. Col. Robert McCarrison), 249. (O)  
Dietetic treatment of diabetes. See Diabetes  
DIGBY, Kenelm H.: Plea for the tonsils, 722  
Diphtheria in London, 27  
Diphtheria, deaths from in Australia, 632  
Diphtheria, bacilli in the throat (P. Hartley and C. J. Martin), 796  
Diphtheria, naked-eye diagnosis of (H. Drinkwater), 259  
Diphtheria, measles, and scarlatina, review of books on, 573  
Diphtheroid group (J. G. Adami), 14  
Diphtheroid septicaemia (H. E. Roaf), 13

- Diploma in medical radiology and electrology, 55  
Diplomas, special, 303  
Disabled ex-service men, number of in training (parliamentary question), 650—Circular from Ministry of Health re employment of, 691  
Disability partly due to military service (parliamentary question), 345  
Disability pensioners' rights (parliamentary question), 482  
Disclaimer, 138  
Discovery, notice of, 138, 315  
Disease, acute, intraspinal pressure in, 311  
Diseases, rare, 374  
Dispatch, Afghanistan, 422  
Diverticulitis (W. H. Maxwell Telling), 82—Discussion on, 84, 115—Leading article on, 119  
Diverticulitis, etiology of (C. H. Willey), 631. (O)  
Divorce law, medical aspects of (parliamentary questions), 583  
DIXON, Montague: Parental blood in haemorrhage of the newborn, 539  
Doctors and motors. See Motor  
Doctors' threatened strike (Castlecomer Union), 167  
Dogfish, spiny, poison of (H. Muir Evans), 287. (O)  
Dogs' Bill in America, 512  
Dogs' Protection Bill (parliamentary question), 269, 305, 448—(Leading article), 301—Text of the bill, 305—Second reading talked out, 448  
DOMVILLE, Edward J.: Proposal for a memorial to Sir Victor Horsley, 271, 785—Acts as consulting surgeon and house surgeon, 518  
DONALDSON, Robert, appointed pathologist and curator of the museum of St. George's Hospital, 71  
DONCASTER, Leonard, obituary notice of, 815  
DONELAN, James: Copperalanin in inoperable cancer, 104  
DONKIN, Sir Bryan: Prevention of venereal disease, 623  
DONOVAN, Lieut.-Col. C. A.: "Froghopper" as a blood-sucking insect, 220  
DOUGAL, D.: Caesarean section for dystocia, 224—(and J. W. BRIDE), Etiological factors in abortion, 632. (O)  
DOUGAL, Dr.: Factors in abortion, 540  
DOUGLAS, Lieut.-Col. C. G.: Oxygen therapy, 152  
Downs, William Campbell, obituary notice of, 70  
DRAKE-BROCKMAN, R. E.: Ticks and relapsing fever, 273—Treatment of malaria, 381  
DREVER, James R.: Scottish colliery surgeons and the miners' union, 171  
DREW, Douglas: Appendicectomy by a new route, 416  
DREW, H. V.: Intraspinal pressure in acute disease, 311  
DRINKWATER, H.: Naked-eye diagnosis of throat infections, 259  
Dropwort, water, fatal poisoning by (T. Harvey Thomson), 795  
Drug idiosyncrasy, discussion on, 405  
Drugless healer sentenced (Arthur Barker), 314  
Drugs, antipyretic, and cold water, 206  
Drugs, Dangerous, Bill (parliamentary question), 650, 720, 843—Leading article, 714  
Drugs, retail price of, 474  
DRUMMOND, Hamilton: Diverticulitis, 85  
Drunkenness in murder cases, House of Lords judgement in Beard case, 383  
Drunkenness statistics (parliamentary question), 346  
Dublin: Postal arrangements, 234—Radium Institute, 550  
DUDGEON, L. S.: Intramuscular injections of quinine, 25  
DUKE, Lieut.-Col. Joshua, obituary notice of, 314  
DUNCAN, F. Martin: Photomicrographs of acari from lungs of *Macacus rhesus*, 276  
DUNCAN, J. W.: Erysipelas, 278  
DUNDAS, Grace H. Giffen: Illegitimate births and ophthalmia neonatorum, 436  
DUNLOP, J. Leeper: Ticks and relapsing fever, 132  
DUNN, Edwin Lindsay, obituary notice of, 204  
*Duodecim*. See *Acta Societatis*  
Duodenal ulcer. See Ulcer  
Dupuytren's contraction not scheduled under Workmen's Compensation Act, 242  
DURET, H.: *Traumatismes crânio-cérébraux*, rev., 830  
DUTCH, Henry: Simple speculum illuminator, 174  
Duty and discipline movement, 589  
DYER, Francis Norman Victor, obituary notice of, 172  
Dysentery, amibiases in, 190  
Dysentery, bacillary, common complications of in military practice (Philip Manson-Bahr), 791. (O)  
Dysentery, some unusual forms of (George C. Low), 255. (O)  
Dysentery in lambs, isolation of an organism which is probably the cause of, 575  
Dyspepsia, appendix and gall bladder (Sir Humphry Rolleston), 317. (O)—Correspondence on, 380  
Dyspnoea, acute asthmatic, caused by fetal embryos (F. F. Bana), 796

## E.

- EAGER, Richard: Treatment of delirium tremens, 114
- EAGER, Wilson, obituary notice of, 754
- Ear (middle) disease, suppurative, plea for early treatment of (H. Smurthwaite), 467. (O)
- Ear, running, treatment of (T. A. MacGibbon), 294—Correspondence on, 382
- EASON, H. L., appointed superintendent of Guy's Hospital, 241
- EASTBURN, A. S., sentence on, 384
- Eaton Hall, Chester, hospital for convalescent soldiers (parliamentary question), 686
- EAVES, Captain Wilberforce Vaughan, obituary notice of, 276
- ECCLES, McAdam: Diverticulitis, 85
- ECCLES, O.: Contraction and retraction rings, 61
- ECKERMAN, Ragnar: *Dental Caries in Relation to Oral Osmosis*, rev., 189—Letter on, 585
- Eclampsia, expectant treatment in (W. Gough), 636
- Eclampsia, nature of (leading article), 479
- Eclampsia treated by blood transfusion (W. Blair Bell), 625. (O)
- Eclampsic toxin, path of (J. F. D. Hunter), 469
- Economic questions of the day, pamphlet on, 815
- Ectopia vesicae treated by implantation of the ureters in the rectum (C. C. Holman), 149. (O)
- EDDOWES, Alfred: Cutaneous manifestations in a case of cervical fistula, 326. (O)
- EDEN, Thomas Watts, (and Cuthbert LOCKYER), *Gynaecology for Students and Practitioners*, rev., 770
- EDINBURGH:
- Edinburgh Medical Journal*, 127
- Graduate courses, 349
- Growth of the city, 617
- "Liberton," 810
- Lister Memorial Institute, proposed, 95
- Neo natal death rate in, 270
- Royal Maternity and Simpson Memorial Hospital, 809
- Stillbirths rate in, 687
- Edinburgh Medical Journal*, 127
- EDINGTON, Colonel G. H.: *With the 1/1st Loyalist Field Ambulance in Gallipoli*, rev., 503
- EDMIDGE-GREEN, F. W.: *The Physiology of Vision, with Special Reference to Colour Blindness*, rev., 502—*Card Test for Colour Blindness*, rev., 502
- EDWARDS, Charles, appointed J.P. for borough of Briarport, 589
- EDWARDS, Francis H.: Physical basis of mental disorders, 452
- EDWARDS, Robert, obituary notice of, 813
- Eggs, dried, 856
- Egypt: report on pellagra outbreak in a refugee camp, 805—Plague in, 815
- E. *Histolytica*, house-fly as a carrier of (P. A. Buxton), 142. (O)
- Ekaferinodar, medical school established at, 837
- Electrology, diploma in, 55
- ELFORD, W. H.: Treatment of ringworm, 867
- ELIZALDE, Pedro I.: *Anatomia patologica y patogenia de la sífilis pulmonar*, rev., 869
- ELLIOT, H.: *Modern Science and Materialism*, rev., 89
- ELLIOT, Lieut.-Col. R. H.: Temporary commissions I.M.S., 96, 168, 201, 554—Diagnosis of glaucoma, 279. (O)—Indian Medical Service, 554
- ELLIOT, Captain W. E., appointed Secretary of Committee of Medical members of House of Commons, 344
- ELLIOTT, Major George Blacker, obituary notice of, 524
- ELMES, J. H.: Dickens on the treatment of malaria, 756
- ELMSLIE, R. C.: *After-treatment of Wounds and Injuries*, rev., 868
- EMBLETON, Dennis: Sphenoidal empyema and epidemic cerebro spinal fever, 7. (O)
- Emotion, measurement of (A. D. Waller), 259—Correspondence on, 381
- Empyema, sphenoidal, and epidemic cerebro-spinal fever (Dennis Embleton), 7. (O)
- Empyemata, immediate closure of (Frank Hathaway), 734. (O)
- EMRY-ROBERTS, Professor: The Welsh mobile laboratory, 27
- Encephalitis, case of: lethargy and myoclonus (James Camac), 704
- Encephalitis, epidemic, committee appointed to report on by Bordeaux Society of Medicine, 457
- Encephalitis, epidemic, myoclonic form of (Piero Boveri), 570. (O)—(E. W. M. Hubert Phillips), 634—Correspondence on, 722
- Encephalitis, epidemic, virus of, 646
- Encephalitis lethargica, 621—In Spain, 659—in Denmark, compulsory notification of, 659
- Encephalitis lethargica (Netter and Achard), 193, 241
- Encephalitis lethargica, acute, compulsory notification of, 71
- Encephalitis lethargica, arsen 55
- Encephalitis lethargica, case of (Maurice C. Barber), 500—(Captain A. Smith Goudie), 671
- Encephalitis lethargica, cases in Roumania and Egypt, 512
- Encephalitis lethargica, two typical cases (G. Bouché), 601
- Encephalitis lethargica, circular from Scottish Board of Health, 452
- Encephalitis lethargica, death from in Lincolnshire, 351
- Encephalitis lethargica, diagnosis of (leading article), 409—Note on, 481
- Encyclopaedia Medica*, vol. vi, rev., 118
- Endocarditis, malignant, in a war pensioner (J. A. Nixon), 435
- Endocrine glands. See Glands
- Endocrinology as an exact science (leading article), 644
- England and Wales, class fertility in (T. H. C. Stevenson), 604—Vital statistics, 457, 752, 775, 802, 836, 874
- English and Chinese doctors, joint conference, 619
- Enham village centre, basket-making shop to be erected, 150
- Enteroposis (Chalmers Watson), 797
- Entomology, review of books on, 707
- Entozoa, review of books on, 675
- Euresia, diurnal, in a child, treated with galvanism (Stanley E. Denyer), 795
- Epidemiology, first principles of (F. G. Crook-shank), 186
- Epilepsy, literature dealing with influence of atmospheric conditions on, 173
- Epilepsy and the weather, 282, 487
- Epileptics, anaesthesia in, 526, 558, 624
- Epsom College. See College
- Erysipelas, treatment of, 242, 277, 316, 352—A correction, 316
- Establishment licences, 590
- Estimates (parliamentary papers on the), 413
- Ethyl chloride, safety of, 485
- Eugenics, national, Galton chair of (leading article), 803
- Eusol in subtertian malaria, 303
- Evans's Analytical Notes, 786
- EVANS, Herbert: Urinary system and the *Bacillus coli communis*, 438
- EVANS, H. Muir: Poison of the spiny dog-fish, 287. (O)
- EVANS, Thomas Melancthon, obituary notice of, 487
- EVE, Frank C.: Sedimentary cell for microscopical examination of cerebro-spinal and other fluids, 708
- Everett v. Griffiths and Anklesaria, 522
- EVERSHED, A. Reginald F., obituary notice of, 276
- EWART, William, appreciation of George V. Perez, 456
- Experiments on animals (parliamentary question), 305
- Ex-service men: Professional training of (parliamentary question), 306, 650—Half-fare vouchers for men under treatment (parliamentary question), 650, 720
- Eye, fundus of after death, 878
- Eyelid, granuloma of, 458
- Eyesight of miners, discussion on, 327
- EYRE, Captain Charles R. B., appointed assistant surgeon to British Ophthalmic Hospital, Jerusalem, 525
- F.
- Facial trophoneurosis. See Trophoneurosis
- Factory Surgeons, Association of Certifying, report, 535
- FAIRBAIN, John S.: New lamps for old in obstetrics, 127
- FALTA, W. (and K. F. WENCKEBACH): *Wiener Archiv für Innere Medizin*, rev., 574
- Fascia lata, uses of free transplants of, in surgery (G. Grey Turner), 79. (O)
- Facial and post-nasal lymphoid tissue in children, chronic infection of (Percival W. Leathart), 217. (O)
- Federations for brain workers, 229
- Fee, notification, and the end of the war, 344, 383—Ministry of Health's Statutory Order re, 659
- Feeble-minded youth, trade teaching for, 558
- Fees, army, for civilian doctors, 814
- Fees, medical, increased in Chicago, 725
- Fees, medical, under Workmen's Compensation Act (parliamentary question), 879
- Fees, medical, for public work (Ireland), 655
- Fees in midwives' cases, 348
- Fees for treatment of school children, 883
- FEILING, Anthony (and E. WARD): Familial form of acoustic tumour, 496. (O)
- FELDMAN, W. M.: Needle in alimentary canal, 206—Diagnosis of disease of the pancreas, 553—*Principles of Ante-natal and Post-natal Child Physiology: Pure and Applied*, rev., 572
- Fellowship of Medicine and Post-Graduate Medical Association: First general meeting, 305—Number of graduates who attended emergency courses, 351—Note on, 779
- Femur, gunshot fracture of (Sir Anthony Howlby), 1. (O)
- FERGUSON, Alexander, obituary notice of, 422, 621
- FERGUSON, R. Bruce: *Aids to the Mathematics of Hygiene*, rev., 708
- Fertility of various classes in England and Wales (T. H. C. Stevenson), 604
- Fetal intracranial haemorrhage during birth (Eardley Holland), 868
- Fetal movements, 71
- Fever, epidemic cerebro-spinal, and sphenoidal empyema (Dennis Embleton), 7. (O)
- Fever, cerebro-spinal, treated by monotypical serum (W. T. Munro), 430. (O)
- Fever, cerebro-spinal, treatment of (Captain J. W. Crawshaw), 750
- Fever, enteric, diagnosis of (parliamentary question), 449
- Fever, enteric, and pyrexia of uncertain origin (leading article), 373
- Fever, puerperal, antistreptococcal serum in (O. Hilton), 185
- Fever, relapsing, in the East (W. H. Willcox), 222—Correspondence on, 380
- Fever, relapsing, and ticks, 97, 132, 200, 235, 273, 310
- Fever, sand-fly, in Mesopotamia, 620
- Fever, scarlet, in London, 27
- Fever, typhus, in the East (W. H. Willcox), 222
- Fever, typhus: In Poland, 122, 614, 751—in Russia, 751—Threatened western extension of (parliamentary question), 879
- Fever, typhus, Rickettsia bodies in, 709
- Fever, yellow, etiology of, 375—Indian committee on, 484
- FFRENCH, Major E. G.: Early diagnosis of syphilis, 486
- FFRENCH-MULLEN, Colonel Douglas, obituary notice of, 556
- FIBBER: Experimental induction of cancer, 680—Helminths in cancer, 777
- Fibroid, subperitoneal, traumatic rupture of pedicle of (P. D. Turner), 829
- Fibroids, results of hysterectomy for (J. W. Bried), 14
- Fibroids complicating pregnancy: hysterectomy: recovery (R. de S. Stawell), 498. (O)—Correspondence on, 554
- Filaria conjunctivae*, the host of the parasite of found in man (Forbes), 4
- Filarial embryos causing acute asthmatic dyspnoea (F. F. Bana), 796
- Filariasis, further work on antimony intravenously in (Lieut.-Colonel Sir Leonard Rogers), 596. (O)
- FILDES, Surgeon Lieut. Commander P.: Toxic effects of arseno-benzol preparations, 51
- Finance Bill, 677. See also Budget
- FINDLAY, Leonard: *Syphilis in Childhood*, rev., 366
- Finger-prints on documents, persistence of (C. A. Mitchell), 387
- FIRTH, J. B. (and J. E. MYERS): *Elementary Practical Chemistry*, rev., 190
- FIRTH, Colonel R. H.: *Musings of an Idle Man*, rev., 262
- FISHER, Irving: *Effect of Diet on Endurance*, rev., 16
- FISHER, Theodore: Aortitis and aortic regurgitation, 586, 688
- FISHER, Walter: Pericranial effusion of blood, 206
- Fistula, cervical, cutaneous manifestations in a case of (Alfred Eddowes), 326. (O)—Correspondence on, 424
- Fistula, jejuno-colic, following gastro-jejuno-stomy (Charles Bolton and Wilfred Trotter), 757. (O)
- FLAGG, P. J.: *The Art of Anaesthesia*, rev., 117
- Flail joints and their treatment (Sir Robert Jones), 175. (O)
- FLECHSIG celebrates the fiftieth anniversary of his doctorate, 815
- FLEMING, Chas. E. S.: New lamps for old in obstetrics, 202—Our opportunity, 484
- FLETCHER, Rory: Nyctalopia or hemeralopia, 555
- FLETCHER, Sir Walter: Appreciation of Sir Robert Morant, 420
- FLEXNER: Portal for acute poliomyelitis, 343
- Flies, house, as carriers of *E. histolytica* (P. A. Buxton), 142. (O)
- Flies, house, review of books on, 607
- Food, clothing, and medical aid for countries devastated by the war, sum required in United States to continue the supply of, 46
- Food and disease, 816
- Food and Drugs Acts: duties of local authorities, 173
- Food factors, accessory, in infant feeding, discussion on, 528—Work on, 709
- Food Ministry, continuation of the work of, 686
- Food poisoning, review of book on, 225
- Food supply of Germany (leading article), 301
- FORBES: Parasite of *Filaria conjunctivae* found in man, 4
- Forceps, Schultze's (Sir W. Smyly), 48
- Forearm, ischaemic, contracture of (Arch. Young), 636
- Foreign body in left bronchus (W. R. Cammock), 602—(Thomas Guthrie), 735
- Foreign body, localization of (W. Cotton), 327
- Foreign body in cornea, prolonged retention of (E. R. Chambers), 363
- Foreign degrees, registrable, 786
- Foreign mineral water resorts, 545
- Forgetting, psychological repression (Alfred Carver), 46. (O)—Correspondence on, 98, 131, 169, 201, 236, 274

- FORNI, G. G.: *Ferite del Capo e dell' Addome in un Ambulanza Chirurgica*, rev., 541
- FORSYTH, Noel C.: Use of antistreptococcal serum in quinsy, 361. (O)
- FOSS, R. Stafford: Treatment of gonorrhoea in women, 434. (O)
- FOSTER, Alfred: Early diagnosis of pulmonary tuberculosis, 753
- FOTHERGILL, W.: Hydatid mole, 224
- FOULERTON, Alexander G. R.: Poisoning by arsenobenzol compounds used in the treatment of syphilis, 864. (O)
- Fracture dislocations of ankle, 62
- Fracture of femur, gunshot (Sir Anthony Bowlby), 1. (O)
- Fractures of skull in civil life, lessons of the war for treatment of (C. M. Kennedy), 630. (O)
- Fractures, treatment of (Major M. Sinclair), 198
- FRANCE:
- Army Medical School at Val de Grâce, 55
  - Institute of Hygiene of Paris, 878
  - International Society of Surgery, next meeting, 144, 351
  - Maternity benefit for suckling mothers, 12
  - Medical Congress. See Congress
  - Medical History Society renews its activities, 387
  - Number of wounded and sick demobilized soldiers under treatment in hospitals, 457
  - Paris hospitals, scheme for improvement of, 283
  - Pharmacopoeia, additions to, 613
  - School of puericulture to be inaugurated at Edith Cavell Hospital, Paris, 557
  - See also Paris
- FRANCIS, Alexander: Nasal drill, 310
- Franco-Yugo-Slav medical union, 387
- FRÄNKEL, Sigmund: *Praktikum der medizinischen Chemie*, rev., 16
- FRANKS, Sir Kendal, obituary notice of, 723
- FRASER, A. Mearns: Prevention of venereal disease, 686
- FRASER, Peter, obituary notice of, 204
- FRASER, Sir Thomas Richard, death of, 55—Obituary notice of, 100
- FREEMAN, John: Susceptibility to foreign proteins, 188—Toxic idiosyncrasies, 403
- FREAR, Kathleen (and others): Production of clean milk, 876
- FREER, H. W.: Public health versus the State, 96, 416, 586
- FREMANTLE, Lieut.-Col. F. E.: Elected M.P. for St. Albans, 27—Elected Chairman of Housing Committee of London County Council, 457
- FREMLIN, H. S.: Preparation of calf lymph, 368
- FRENCH, E. G.: Early diagnosis of syphilis, 688
- French Medical History Society renews its activities, 387
- FREUD, Sigmund: *Totem and Taboo: Resemblances between the Psychic Lives of Savages and Neurotics*, rev., 502
- FRIEDENWALD, Julius (and John RUHRAB): *Diet in Health and Disease*, rev., 262
- Friedmann's remedy for tuberculosis, Prussian committee of inquiry into, 315
- Friedmann's turtle vaccine, 94
- Friendly societies and nursing benefits (Australia), 881
- Friends' Emergency and War Victims' Relief Committee, 885
- "Frog-hopper" as a blood-sucking insect (Lieut.-Col. C. Donovan), 220
- FRY, Captain H. J. B.: Use of immunized blood donors in treatment of pyogenic infections by whole blood transfusion, 290. (O)
- FRY, P. V., presentation to, 518
- Fuel Research Board, report 584
- FULLERTON, J. H., obituary notice of, 723
- FULLERTON, Andrew (and T. S. S. HOLMES): Ruptured gastric ulcer in an old man, laparotomy, recovery, 218. (O)
- Function, correlation of (W. Blair Bell), 787. (O)
- Fund, King Edward's Hospital: Statement re London hospitals, 451—Committee appointed to act in absence of the Prince of Wales, 457—Statistical Report Committee, 518—Annual meeting, 687
- Fund, the King's (parliamentary question), 345
- Fund, Mackenzie Davidson Memorial, 341
- Fund, Naval Medical Memorial, 457
- Fund, Queen Alexander's Field Force, demobilization of, 315
- Fund, R.A.M.C. Central Mess, annual meeting, 587
- Fund, R.A.M.C. and Officers' Benevolent Society, annual meeting, 587
- Fund, Royal Medical Benevolent, 154, 262, 476, 504, 608, 802—War Emergency Fund, 303
- Fund Guild, Royal Medical Benevolent, appeal at annual meeting, 457
- Funds, Auxiliary R.A.M.C., 35, 685, 689—Annual meeting, 689
- FURLONG, Wm. Verner: Atropine in acute suffocative catarrh, 219
- FYFFE, Lieut.-Col. William Kington, obituary notice of, 690
- G.
- GAGE, Captain Harold C.: *X-ray Observations for Foreign Bodies and their Localization*, rev., 153
- GAIGER, S. H., isolates an organism which is probably the cause of dysentery in lambs, 776
- GALBRAITH, Walter W.: Effusion into both knee-joints due to congenital syphilis, 636
- GALLAVARDIN, L.: *La tension en clinique. Sa mesure, sa valeur sémiologique*, rev., 503
- Gall bladder dyspepsia. See Dyspepsia
- GALLICAN, Walter M.: *The Critical Age of Women*, rev., 708
- Gall stones (R. P. Rowlands), 665. (O)
- Galton chair of national eugenics (leading article), 803
- Galvanism in treatment of diurnal enuresis in a child (Stanley E. Denver), 795
- GANGI, Salvatore: *Il Colpo di Calore*, rev., 89
- GARDINER, Frederick: *Handbook of Skin Diseases*, rev., 676
- GARDINER, J. Stanley (and L. A. BORRADALE): *The Cambridge Notebook for Practical Biology (Zoology)*, rev., 154
- GARRATT, G. C.: Severe anaphylaxis, recovery, 72
- GARROD, Sir Archibald E., appointed Regius Professor of Medicine at Oxford, 344—Schorstein lecture on diagnosis of disease of pancreas, 459. (O)—Elected to a studentship at Christ Church, 717
- GARROOD, J. R.: Paraffin wax for first-aid treatment in burns, 539
- GARRY, T. Gerald: Forerunners of Harvey in antiquity, 58
- Gas, arseniuretted hydrogen, poisoning by (Thomas H. Wignall), 826. (O)
- Gas poisoning (Sir Wilmot Herringham), 221—Discussion, 222
- GASTER, Leon: Industrial lighting and its relation to efficiency, 557
- Gastric pain, origin of, 162
- Gastric ulcer. See Ulcer
- Gastro-jejunostomy, gastric ulcer after (F. Bolton Carter), 13
- Gastro-jejunostomy followed by jejuno-colic fistula (Charles Bolton and Wilfred Trotter), 757. (O)
- GAUVAIN, Sir Henry, luncheon to, 166
- GAVRILOVITCH, Michailo, appointed President of Serbian Red Cross Society in Great Britain, 224
- GAY, Frederick P.: *Typhoid Fever*, rev., 88
- GEDDES, Sir Auckland, appointed British Ambassador in Washington, 344
- GEMMELL, A. C.: Sudden death at attempted abortion, 624
- General Medical Council. See Council
- General practitioners and the health services. See Health
- Geneva Red Cross Congress, 377. See also Red Cross
- German universities, appointment of professors to, 277
- Germany: Food supply of (leading article), 301—Tuberculosis statistics in Germany and the Rhine provinces, 837—Proposed tuberculosis law, 315—Small-pox in (parliamentary question), 346
- Geatation, length of, 558
- G. H. Q. (*Montreuil-sur-Mer*), rev., 117
- GIBBER, C. Chapman (and others): Ten thousand recruits with doubtful heart conditions, 730. (O)
- GIBSON, H. E.: Comparison of two methods of administering arseno-benzol compounds in syphilis, 114. (O)
- Giessen, Liebig museum opened at, 557
- GILLETT, A. Scott: Tonsil bayonet, 472
- GIRDLESTONE, G. R.: Care of crippled children, 697. (O)
- Gland, thyroid, papilliferous carcinoma of (Basil Hughes), 362. (O)
- Glands, endocrine, and the nervous system (Sibyl I. Welsh), 769
- Glands of internal secretion and reproductive organs, functional connexion between (Evelyn E. Hewer), 293. (O)
- Glasgow: Erskine Limbless Hospital, 197—Post-graduate courses in, 721—Radium in cancer, 483—Small-pox in, 483, 584, 617, 687, 721, 782, 881—Western Infirmary, 58
- GLASSON, C. J.: Method of treating tinea, 219. (O)
- Glaucoma, diagnosis of (Lieut.-Col. R. H. Elliot), 279. (O)
- GLEN, A. Kennedy: Panel practitioners and vaccination, 883
- GLYNN, E. E.: Spirochaetes in bronchiectasis, 14—Ovarian hypernephromas, 572
- GODDARD, Henry Herbert: *Psychology of the Normal and Subnormal*, rev., 470
- Golf tournament (Bromley Division), 785
- Gonorrhoea, number of cases notified in Western Australia, 724
- Gonorrhoea in the female, diagnosis of (W. W. King), 364—Treatment of (R. Stafford Foss), 434. (O)
- Gonorrhoeal vulvo-vaginitis in a newborn infant (Margaret Rorke), 671
- GOODALL, Alexander: *Aids to Histology*, rev., 190
- GOODALL, J. Strickland: Presentation to, 725—(and others) Ten thousand recruits with doubtful heart conditions, 730. (O)
- GORDON, A. Knyvett: Hypernephroma of ovary, 133
- GORDON, J. F.: The tertium quid, 206
- GORDON, M. H.: Simple method of cultivating the micro-organism of actinomycosis, 435
- GORDON, William: Epidemiology of phthisis, 594. (O)—Future provision of medical services, 882
- GORMAN, Captain A. D.: Subcutaneous injections of camphor, 828
- GOUDIE, Captain A. Smith: Case of encephalitis lethargica, 671
- GOUGH, George W.: *Half past Twelve*, rev., 771
- GOUGH, W.: Expectant treatment in eclampsia, 636
- Government policy as to hospitals. See Hospitals, voluntary
- GOW, A. E.: Intravenous protein therapy, 284. (O)
- GOYDER, David, obituary notice of, 204
- Graduate education in the United States (Sir Humphry Rolleston and H. J. Waring), 833
- Graduate study, aims and methods of (Sir Humphry Rolleston), 77. (O). See also Post-graduate
- GRANT, Sir James Alexander, death of, 232—Obituary notice of, 487
- GRANT, William F.: Pregnancy during amenorrhoea, 278
- Granuloma of eyelid, 458
- Grateful country, 316
- GRAVES, T. C.: Mammary sarcoma in old age, 81
- GRAY, H. Tyrrell: Atropine in pylorospasm and pyloric hypertrophy, 551
- GRAY, J. Pereira: Shingles, varicella, epilepsy, and the weather, 487—Anaesthesia in epileptics, 558
- Greek science and modern science, 748
- GREEN, Charles David (and Sir Charles A. BALLANCE): *Essays on the Surgery of the Temporal Bone*, rev., 798
- GREEN, Charles W., obituary notice of, 95
- Greenwich Hospital pensions, 203
- GREENWOOD, Major: Forgetting, psychological repression, 131
- GREVES, E. Hyla, name of, accidentally omitted from current issue of *Medical Directory*, 242
- GRIMSDALE, Harold B. (and E. BREWERTON): *Textbook of Ophthalmic Operations*, rev., 606
- Grocers' scholarships for research in sanitary science, 489
- GROSE, Staff Surgeon Samuel, obituary notice of, 70
- GROVE, W. R.: Calcium chloride as a haemostatic, 47
- GROVES, F. W. Hey: *Surgical Operations: A Textbook for Nurses*, rev., 471
- GUBB, Alfred S.: Prevention of beri-beri, 72—Mode of quinine administration, 131
- GUICCIARDI, Giuseppe, becomes editor of *Rivista Sperimentale di Freniatria*, 855
- GULLAND, G. Lovell: Appreciation of Sir W. Osler, 67
- Gunshot fracture of femur (Sir Anthony Bowlby), 1. (O)
- Gunshot injuries, review of book on, 707
- GURNEY-DIXON, S.: *Transmutation of Bacteria*, rev., 297
- GUTHRIE, Thomas: Foreign body in bronchus, 735
- Gynaecology and obstetrics, vaccines in (Robert Robertson), 437
- Gynaecology, review of books on, 15, 708, 770
- H.
- HADDON, John: Clinical research, 311—Food and disease, 816
- Haematoporphyria (G. E. Anson), 634
- Haemorrhage, accidental (Gordon Ley), 437
- Haemorrhage, ante-partum, treatment of (Hastings Tweedy), 672—Discussion, 672—Correspondence on, 753
- Haemorrhage, fetal intracranial, during birth (Eardley Holland), 868
- Haemorrhage of the newborn, parental blood in (Montague Dixon), 539
- Haemostatic, calcium chloride as a (W. R. Grove), 47
- Hair, grey, and herpes zoster (G. Lenthal Cheate), 219
- HALDANE, J. S.: Oxygen therapy, 151
- HALE, Arthur J.: *The Applications of Electrolysis in Chemical Industry*, rev., 154
- HALES, Stephen, account of, 173
- HALE-WHITE, Sir William: Alcohol as a therapeutic agent, 295—Drug idiosyncrasy, 405
- HALLAM, Rupert: Radium therapy, 736
- Hallucinatory psychosis. See Psychosis
- HALSTEAD, J. I.: Future provision of medical services, 882
- HAMILL, P.: Oxygen therapy, 152—(and others) Ten thousand recruits with doubtful heart conditions, 730. (O)
- Hampstead Research Institute. See Research
- Hand, physiopathic paralysis of, and its causation (R. G. Abercrombie), 764. (O)
- Handicapped Worker, 829
- HADLEY, W. Sampson: Diverticulitis,



- HANNAY, M. G.: Early diagnosis of syphilis, 620
- HANSCHHELL, H. M.: Phagedaena of Hunterian chancre following treatment with novarsenobenzol, 498. (O)
- Hard hit by the war, 303
- HARDWICKE, W. Wright: *Sight Testing Made Easy*, rev., 471
- HARFORD, Charles F.: "Miners' nystagmus," 138
- HARMAN, N. Bishop: Cycloplegia in routine refraction work, 598. (O)
- HARRIS, Wilfred: Chronic paroxysmal trigeminal neuralgia and its treatment, 693. (O)
- HARRISON, E.: Early diagnosis of syphilis, 364
- HARRISON, Lieut.-Colonel L. W.: *Manual of Venereal Diseases for Students*, rev., 638
- HARROGATE: Appoints an analytical chemist to the baths, 124—Medical dinner at, 584—Corporation pamphlet on, 815
- HART, Bernard: Modern treatment of functional nervous disorders, 207. (O)
- HART, David Perry: Puerperal sepsis, 296—Obituary notice of, 852
- HARTLEY, P. (and C. J. MARTIN), Diphtheria, 796
- HARVEY, forerunners of in antiquity, 58
- HASSALL, G. W.: Anaesthesia in epileptics, 624
- HASTINGS, Walter B., obituary notice of, 70
- HATHAWAY, Frank: Immediate closure of empyemata, 734. (O)
- HATSCHKE, Emil: *Laboratory Manual of Elementary Colloid Chemistry*, rev., 543
- HAUSER: Visceral analgesia in tabes, 480
- Havana, epidemic of meningitis in, 755
- Hay fever, treatment of, 458, 490
- HAYCRAFT, J. B.: Penetrating wound of chest, thoracotomy, suture of pericardium, 184. (O)
- HAYES, Maurice R. J.: Irish motor deadlock, 132
- HAYNES, F. H., presentation to, 270—Inherited syphilis, 765. (O)
- HAYTON, C. H.: Air-way infections, 812
- Hazell Annual and Almanack* for 1920, rev., 49
- HEAD, Henry: Elements of the psychoneuroses, 389. (O)
- Head lamp, 472
- Health Conference, International, 587
- HEALTH MINISTRY:
- Administrative posts, 808
  - Appointments, 785
  - Blind, deaf, and crippled students, training for, 584
  - Blind, welfare of, joint committee appointed, 276
  - Boarding-out of children, 782
  - Complement fixation test in syphilis, report on, 877
  - Compulsory notification of acute encephalitis lethargica and acute polio-encephalitis, 71
  - Consultative Council's interim report, 739, 746—Leading article on report, 746
  - Discharged and disabled officers and men, circular re employment for, 691
  - Dwellings, unoccupied, utilization of (parliamentary question), 844
  - Expenditure (parliamentary question), 306, 649
  - General Health Council, 270
  - General Nursing Council, 616
  - Health of the people, 583
  - Health Services Bill, 751
  - Health survey, memorandum on, 267
  - House demolition, rules for procedure of, 623
  - Housing plans, volume on, 885
  - Infants' and children's homes and hospitals, 880
  - Influenza prevention, memorandum on, 19, 23, 205
  - Irish Public Health Council, 197, 870
  - Land for housing, amended regulations, 277
  - Maternity and Child Welfare Centres in England and Wales*, 379
  - Maternity homes and hospitals, memorandum on, 299, 847
  - Medical staff of, 808
  - Milk for children and mothers, 124
  - Notification fee, 344, 659
  - Number of people employed by, 720
  - Nursing service, 450
  - Outdoor medical officers, new staff of, 407, 476
  - Parliamentary questions, 378, 450, 583, 720, 808
  - Poor Law Institution's Order, revival of Article 4, 489
  - Salaries of medical officers of local authorities, 230
  - Sale of Food and Drugs Act, memorandum on duties of local authorities, 173
  - Scottish Board of Health, 127, 195, 418, 452, 518, 654, 752
  - Smoke abatement, 303
  - Timber cottages, 418
  - Veneral disease, tests of cure in, memorandum on, 89—Leading article on above, 92—deputation re professional secrecy (protection for medical officers of clinics), 691—Treatment centres, 815
  - Village tuberculosis settlements, deputation to Minister of Health, 476
  - Welsh Board of Health, 345, 809
  - Welsh Consultative Council's report, 781, 809
  - Work of, 378
- Health of the people (parliamentary question), 583
- Health Services Bill, 751
- Health services and the general practitioner, 753, 784
- Health services and hospitals in London, 752
- Health services. *See also* Medical services
- Health surveys, Ministry of Health memorandum, 267
- Health work, co-operation in, 490
- HEARNE, K. G.: Heat hyperpyrexia, 521
- Heart affections in relation to the labour market (R. O. Moon), 628. (O)
- Heart conditions, collective investigation on ten thousand recruits with doubtful (C. Chapman Gibbs, R. O. Moon, S. Russell Wells, P. Hamill, Frederick W. Price, and J. Strickland Goodall), 730. (O)
- Heart disease, the passive mechanical factor in (Alexander Blackhall-Morison), 817. (O)
- Heart, irritable (Carey Coombs), 404
- Heart, soldier's (C. H. Cattle), 188
- Heart, soldier's and war neurosis (Sir James Mackenzie), 491, 530. (O)
- Heat hyperpyrexia, nature, prevention and treatment of (W. H. Willcox), 392. (O)—Physiological aspect of (Leonard Hill), 397. (O)—Discussion on, 401—Correspondence on, 485, 521—(Captain John N. McIntosh), 795
- Heat-stroke, hyperpyrexial, nature and treatment of, 343
- Heath's Minor Surgery and Bandaging*, rev., 226
- HECKEL, Francis: *Grandes et Petites Obésités, Cure Radicale*, rev., 118
- HEFFERNAN, Major P.: Duration of pulmonary tuberculosis, 206
- HEHR, Major-General P.: Commissions in the Indian Medical Service, 382—Treatment of malaria, 453
- Helminths in cancer (leading article), 777
- HEMBROUGH, John William, obituary notice of, 313
- Hemeralopia, epidemic of, 480
- Hemeralopia or nyctalopia, 514, 555
- Hemeralopia in scurvy, 526
- Hemiplegia, two cases of (Kenneth Rogers), 220
- HENDERSON, G. G.: *Catalysis in Industrial Chemistry*, rev., 154
- HENDRICK, Ellwood: *Chemistry in Everyday Life*, rev., 190
- HENNESSY, Thomas: Report of the Irish Public Health Council, 870
- HEPBURN, H. H.: Early manifestations of beri-beri, 466. (O)
- HERBERT, Lieut.-Col. Arthur Stanley: *Military Physical Orthopaedics, Part I, Gun-shot Wound of Nerve*, rev., 831
- Hereford, medical reunion dinner, 198
- Herman's Difficult Labour*, rev., 606
- HERNIMAN-JOHNSON, Francis: Use of x rays as immunity-raising agents before and after operation for cancer, 793. (O)
- Hernia, review of books on, 15
- Hernia, strangulated umbilical (C. M. Kennedy), 468. (O)
- Herpes and varicella (Claude Wilson), 828
- Herpes zoster and greyness of hair (G. Lenthal Cheate), 219
- HERPIN, A.: *Les fractures de guerre du maxillaire inférieur*, rev., 543
- HERRINGHAM, Sir Wilmot: Gas poisoning, 221—International Organization of Medical Societies, 272
- HERSCHELL, G.: *Textbook of Indigestion*, rev., 573
- HERTZLER, Arthur E.: *The Peritoneum: Vol. I. Structure and Function in Relation to the Principles of Abdominal Surgery. Vol. II. Diseases and their Treatment*, rev., 15
- HEWER, C. Langton: Anaesthesia in epileptics, 558
- HEWER, Evelyn E.: Functional connexion between the reproductive organs and other glands of internal secretion, 293. (O)
- HEWER, Mrs. J. Langton: *Our Baby: for Mothers and Nurses*, rev., 368
- HEWETSON, W. M.: Mode of quinine administration, 756
- HICKLING, Gertrude H.: Nasal drill in treatment of adenoids, 147. (O)
- HICKS, George Adam, obituary notice of, 172
- HIGGS, T. F., presentation to, 489
- Highlands and Islands Medical Service, 848
- HILL, A. W., elected Fellow Royal Society, 344
- HILL, Leonard: Physiological aspect of heat-stroke, 397. (O)—Ventilation and heating of tuberculosis institutions, 797
- HILTON, O.: Antistreptococcic serum in puerperal fever, 185
- HIRST, Barton Cooke: *An Atlas of Operative Gynaecology*, rev., 15
- Historical surgical instrument cases, 54
- History, Annals of Medical*, 226
- History of the war, medical and surgical: Surgeon-General of the United States Army asks for a grant towards the publication of, 623
- HODDER, A. E.: Sclerema neonatorum associated with placenta praevia, 634
- HOFFMANN, F. L.: *Is Leprosy Increasing?* 855
- HOLDEN, Oscar M.: The general practitioner and the health services, 784
- Holland, rabies in, 525
- HOLLAND, C. Thurstan: War lessons for radiology, 353. (O)
- HOLLAND, Eardley: Rupture of Caesarean section scar, 705—Fetal intracranial haemorrhage during birth, 858
- HOLLIS, H. S.: Treatment of ante-partum haemorrhage, 753
- HOLMAN, C. C.: Ectopia vesicae treated by implantation of the ureters in the rectum, 149. (O)
- HOLMES, T. S. S. (and Andrew FULLERTON): Ruptured gastric ulcer in an old man, laparotomy, recovery, 218. (O)
- Holt case, 523
- HOLTH, S.: Bronze medico-chirurgical instruments, 268—The Roman netting needle for winding a surgical thread, 458
- Home Office, order re tar cancer and chrome ulceration, 122
- Homes of Recovery (parliamentary question), 650
- HONOURS (January to June, 1920), 26, 27, 35, 99, 103, 124, 136, 172, 203, 240, 269, 275, 276, 304, 312, 313, 352, 385, 422, 457, 508, 545, 555, 557, 589, 660, 689, 725, 755, 771, 785, 805, 814, 854, 884
- Peerage, 26
- K.C.B., 26
- C.B., 35
- Order of St. Michael and St. George: C.M.G., 26, 240
- Order of the British Empire: G.B.E., 509
- K.B.E., 203, 304, 422, 508
- C.B.E., 35, 136, 203, 240, 313, 508, 854
- O.B.E., 35, 203, 240, 275, 508, 660, 771, 884
- M.B.E., 35, 203, 545, 589
- Knighthoods, 26, 27
- Distinguished Service Order (and bars), 240
- Military Cross (and bars), 136, 172, 203, 240
- Order of St. John of Jerusalem, 124, 557, 589
- Birthday honours, 805
- New Year honours, 26
- Kaisar-i-Hind medal, 26
- Territorial decoration, 137, 172, 457, 689
- Foreign decorations, 35, 103, 136, 172, 276, 313, 385, 457, 546, 689, 725, 755, 785, 814, 855
- Mentioned in services, 172, 203, 240, 275, 313, 884
- American surgeons mentioned in dispatches, 725
- Mentioned in dispatches, 99, 385, 525, 755, 854
- Surgical war honours, 238, 352
- War honours, 312, 352, 557, 586
- Hookworm disease, review of books on, 542
- HORDER, Sir Thomas: Influenza and epidemiology, 235—Nerve symptoms in acute infections, 404
- HORNABROOK, R. W.: Safety of ethyl chloride, 485
- HORROCKS, Sir William Heaton: Hon Fellowship of Society of Medical Officers of Health conferred upon, 305
- Horse-shoe kidney. *See* Kidney
- HORSLEY, Lady: Proposal for a memorial to Sir Victor Horsley, 418
- HORSLEY, Sir Victor, Life of, rev., 260—Proposed memorial to, 271, 350, 418, 785
- Hospital, No. 14 General: Work of, 195—Dinner, 195
- Hospital, American, in London, progress of, 650, 779
- Hospital, Craigleith Military, closure of, 270
- Hospital, Edinburgh Royal Maternity, and Simpson Memorial, 809
- Hospital, Endell Street, surgery at (Dr. Garrett Anderson), 605
- Hospital, Erskine, for limbless service men (Glasgow), 197
- Hospital, Freemasons' paying, 415
- Hospital, Glasgow Royal Cancer, annual meeting, 483
- Hospital, Graymount, Belfast, Sir H. Gauvain's report, 655, 688
- Hospital, Guy's, new superintendent appointed, 241
- Hospital, Johns Hopkins, first superintendent of, 232
- Hospital for limbless men, the Erskine (Glasgow), 197
- Hospital, the London, in-patients to pay 10s. a week, 351
- Hospital, Maudsley Mental, lectures in medical psychology at, 376
- Hospital, Middlesex: Joel chair of physics, 194, 315—Chair of pathology, 315—Special meeting re amalgamation of Cancer Research Department and Bland-Sutton Institute of Pathology, 580
- Hospital and Nursing Services (Scotland), 848, 880
- Hospital for paying patients, 263. *See also* Hospital, St. Chad's
- Hospital, provision in the future (parliamentary question), 377. *See also* Hospitals, voluntary
- Hospital, Queen Charlotte's Maternity, London, report, 518
- Hospital, Royal Free, reunion dinner of past and present students (women), 415
- Hospital, Royal Prince Alfred, note on, 271
- Hospital, St. Bartholomew's, clinical teaching element at work, 228
- Hospital, St. Chad's, Birmingham, for paying patients (William Billington), 263

Hospital, St. Luke's, Bradford (parliamentary question), 551  
 Hospital, St. Mary's, and clinical education at the Poor Law Infirmary, 92, 242  
 Hospital, St. Thomas's: University unit at, 26—Old students' dinner, 123  
 Hospital, Sir Patrick Dun's, memorial brass and bed, 589  
 Hospital survey, 684. *See also* Hospitals, voluntary  
 Hospital, Swansea General and Eye, opening of a pathological department, 722  
 Hospital system, remoulding the (leading article), 160. *See also* Hospitals, voluntary  
 Hospital, Tribondeau, 458  
 Hospital University College: University unit, 26, 161—Rockefeller Foundation gifts to, 799, 834, 838  
 Hospitals, army mental, treatment in (parliamentary question), 306  
 Hospitals, bequests to. *See* Bequests  
 Hospitals and clinics at Cardiff, 307  
 Hospitals, co-operation between, 418  
 Hospitals in India (parliamentary question), 306  
 Hospitals, in-patients at: Organization of in-patient treatment (leading article) 372—To pay 10s. a week at the London Hospital, 351. *See also* Hospitals, voluntary  
 Hospitals, London Mental, increase of remuneration of medical superintendents of, 264  
 Hospitals, maternity. *See* Maternity  
 Hospitals, mental, assistant medical officers at, 686. *See also* Asylum  
 Hospitals for mental cases (parliamentary question), 649. *See also* Mental  
 Hospitals, military, board appointed to advise on chronic cases in, 277  
 Hospitals, municipal general (parliamentary question), 583—Government policy as to, 612  
 Hospitals, Public and Secondary Schools Red Cross, hand over balance of their funds to the Village Centres Council, 35  
 Hospitals, voluntary: Future of, 156, 160, 351, 372, 377, 379, 451, 647, 685, 691, 710, 713, 751, 752, 783, 844, 879—Scheme for Red Cross assistance, 156—Discussion at Birmingham, 157—Proposed public inquiry into the medical service of the community, 157—Leading article, 160, 713—In-patients at, 351, 372—Parliamentary questions, 377, 647, 685, 751, 844, 879—The question of in Kent, 379—Statement of King Edward's Hospital Fund, 451—Government policy as to, 647—Financial position of, 685, 751, 879—Sir Arthur Stanley on, 691—Survey (Sir E. Napier Burnett's report), 684, 710, 713—Payment of visiting staffs, conference at Leicester, 752—Statement by Dr. Addison 783  
 Hôtel-Dieu, Paris: Advanced lectures on diseases of the gastro-intestinal canal, 796  
 Hour glass stomach, gastric and pyloric ulcers (Donald M. MacLeod), 115  
 Hours of labour 446  
 House of Commons, ventilation of, 650  
 House demolition, Ministry of Health's rules of procedure for, 623  
 House flies. *See* Flies  
 Housing, lead for, amended regulations from Ministry of Health, 277  
 Housing, in Scotland (Sir George McCrae), 95—Volume on *Type Plans*, etc., issued by Ministry of Health, 885  
 HOWARD, A. H. H.: Heat hyperpyrexia, 485  
 HOWARD, H. H.: *The Control of the Hookworm Disease by the Intensive Method*, rev., 542  
 HUGHES, Basil: Papilliferous carcinoma of the thyroid gland, 362. (O)—Letter on, 586  
 HUGHES, Edmund: Experimental induction of cancer 722  
 Human metabolism. *See* Metabolism  
 HUMPHRY, Laurence, obituary notice of, 239  
 HUNT, G. H.: Oxygen therapy, 151  
 HUNT, Lieut.-Colonel John Percival, obituary notice of, 524  
 HUNT, Joseph William, obituary notice of, 658  
 HUNTER, Duncan Francis, obituary notice of, 524  
 HUNTER, J. F. D.: Path of the eclamptic toxin, 469  
 Hunterian chancre, phagedaena of, following treatment with novarsenobenzol (H. M. Hanschell), 498. (O)  
 HUNTLEY, E.: Three cases of acute perforation of duodenal ulcer, laparotomy, recovery, 362. (O)  
 HURD, H. M., and Johns Hopkins Hospital, 232  
 HURST, Arthur F.: Forgetting, psychological repression, 170—New views on the pathology, diagnosis, and treatment of gastric and duodenal ulcer, 559. (O)—Duodenal ulcer and the hypertonic stomach, 688  
 Hydatid mole (Dr. Fothergill), 224—(Carlton Oldfield), 224  
 Hydrogen peroxide solution, supply limited, 103  
 Hydatidiform mole (F. J. Browne), 152  
 Hygiene Institute of Paris, 878  
 Hyperglycaemia in mental disorders, 193  
 Hypernephroma of ovary, 133—(Ernest E. Glynn), 572  
 Hyperpyrexia, heat. *See* Heat  
 Hysterectomy for fibroids, results of (J. W. Bride), 14  
 Hysteria and instinct (Major V. T. Carruthers), 792. (O)

## I.

Ileo-caecal valve, 553  
*Imitation of Christ*, "Edith Cavell" edition, rev., 407  
 Immunity, non-specific (leading article), 228  
 Imperial War Museum. *See* Museum  
 Improving us off the earth, 104  
 IMRIE, C. G. (and others): Pyrexia of uncertain origin and enteric fever, 373  
 Income tax, 36, 71, 104, 138, 173, 242, 277, 316, 388, 409, 424, 441, 458, 479, 490, 526, 558, 624, 660, 692, 726, 756, 786, 808, 816, 856, 879, 885—And pensions of retired naval officers (parliamentary question), 305—Of naval officers (parliamentary question), 345—Reconstruction of (leading article), 409—Editorial article, 441—And service gratuities, 479—Parliamentary questions, 305, 345, 808, 879—Method of dealing with renewals, 885  
 INDIA:  
 Army officers in (parliamentary question), 345  
 Cost of increased pay, 751  
 Indigenous medicine, 618  
 Influenza, 199, 618  
 Kashmir Medical Mission, report, 881  
 Leper Hospital, Kashmir State, 881  
 Leprosy, 484, 618, 749  
 Maternity and infant welfare, 483, 618  
 Medical conditions of service in (parliamentary question), 720  
 Medical inspection by women, 849  
 Medical institutions of Jaipur, 198  
 Medical research, 199  
 Plague in the United Provinces (1918-19), 849  
 Proposed all-India research institute, 344  
 R.A.M.C. pay in 525  
 Recruiting for the Indian Medical Service, 849  
 Small pox in Calcutta, 618  
 Yellow Fever Committee, 484

Indian medical practitioners in East Africa (parliamentary question), 482, 650  
 Indian Medical Service. *See* Army, Indian  
 Indigestion, review of books on, 573  
 Industrial lighting (Leon Gaster), 557  
 Industrial research: Board of Trade issues licence to Scottish Shale Oil Scientific and Industrial Research Association, 557  
 Industrial schools, defective children in (parliamentary question), 269  
 Infant feeding, accessory food factors in, discussion on, 328  
 Infant welfare centres, discussion at London Association of the Medical Women's Federation, 153. *See also* Maternity  
 Infants and children's homes and hospitals, Ministry of Health circular, 880  
 Infants, illegitimate, death rate of (parliamentary question), 378  
 Infectious diseases at British ports (parliamentary question), 345  
 Infirmary, Poor Law and clinical education, 92—Decision of Paddington guardians, 92, 242  
 Infirmary, Poor Law, future of (parliamentary question), 414  
 Infirmary, Edinburgh Royal, report, 234  
 Infirmary, Glasgow Royal, annual report, 270  
 Infirmary, Glasgow Western, 58  
 Infirmary, Leeds General, new year's gift for nurses' pension fund, 71  
 Infirmary, Leicester, Royal, conference on payment of visiting staffs of voluntary hospitals, 752  
 Infirmary, Manchester Royal: Post-graduate courses, 126—Annual report, 233  
 Influenza, Note on 163, 232, 342—Leading article, 191—In India, 199, 618—Made notifiable in Vienna, 589—In St. Kilda, 654  
 Influenza bacillus, association of with lethargy (W. M. Crofton) 431. (O)  
 Influenza, chameleon, 424  
 Influenza, control of (Reginald Pollard), 258  
 Influenza deaths: Registrar-General's weekly returns, 305—In England and Wales (February-March, 1920), 423—Parliamentary questions 514  
 Influenza and epidemiology, 235  
 Influenza, experimental production of, 267  
 Influenza, inoculation against (W. H. Wynn), 254. (O)  
 Influenza, inoculation against (preventive), results of in the army at home, 1918-1919 (Major-General Sir William B. Leishman), 214. (O)—Correspondence on, 309  
 Influenza among the Lapps (A. H. Macklin), 465. (O)  
 Influenza, ocular conditions in, 72  
 Influenza, prevention: Memorandum by Ministry of Health, 19, 23—Regulations for prevention of, 205, 305—Parliamentary questions, 305—Correspondence on, 886  
 Influenza, vaccinal prophylaxis of, 19, 23  
 Influenza vaccine, 271  
 INGLIS, Florence M.: Prevention of venereal disease, 311  
 INMAN, F. Wm.: Tuberculosis sanatoriums, 619  
 INNES, Deputy Surgeon-General Charles Alexander, obituary notice of, 524

In-patient treatment, 372. *See also* Hospitals, in-patients  
 Inquests in the City of London and Southwark, 451  
 Insanitary areas (parliamentary question), 844  
 Insanitary conditions at theatres. *See* Theatres  
 Insanity and crime (Holt case), 523  
 Insanity, prevention and treatment of (Sir James Crichton-Browne), 749  
 Insect, blood-sucking, the "froghopper" as (Lieut.-Col. C. Donovan), 220  
 Insomnia aggravated by noise, 424  
 Instinct and hysteria (Major V. T. Carruthers), 792. (O)  
 Institution, Liverpool Medical:—J. G. Adami: Historical sketch of the diphtheroid group, 14—Keith Monsarrat: Massive calcareous deposit in the urinary channels, 14—E. E. Glynn: Spirochaetes in bronchiectasis, 14—Ovarian hypernephromas, 572—Annual meeting, 166—R. Stenhouse Williams: Bacteriology of milk, 365—F. C. Lewis: Standardization of blood cell suspension in complement fixation tests 637  
 Instrument cases, historical surgical, 54  
 Instruments, bronze medico-chirurgical, 268  
 Insular orthography, 174  
 INSURANCE, NATIONAL:  
 Administration, 345  
 Amending Bill, 345, 450, 717  
 Arbitration, 378  
 Expenses, 482  
 Finance, 306, 808  
 Highlands and Islands Medical Services, 848  
 Hospitals and nursing services (Scotland), 848, 880  
 Medical grants under, 269  
 Medical remuneration (leading article), 120  
 Panel practitioners and vaccination, 883  
 Parliamentary questions, 269, 306, 345, 378, 450, 482, 615, 650, 686, 717, 808  
 Practices, 378  
 Tuberculosis treatment in London, 782

Insurance against sickness, Swedish commission appointed to report on, 557  
 Internal secretion, organs of (W. Blair Bell), 787. (O). *See also* Function, correlation of  
 Internal secretion, review of book on, 189  
 International good fellowship, 779. *See also* Fellowship of Medicine  
 International Society of Surgery. *See* Society  
 Intestinal obstruction. *See* Obstruction  
 Intestine, large, atony and prolapse of (J. W. Smith), 243. (O)  
 Intestinal obstruction, acute, due to pregnancy in a bicornuate uterus (C. E. S. Jackson), 185. (O)  
 Intraspinal pressure in acute disease, 311  
 Intravenous injections, physiological action of, 375  
 Intravenous protein therapy. *See* Protein  
 Intussusception of appendix (Archibald Young), 365  
 Invalid chairs (motor driven), taxation of (parliamentary question), 346  
 Invalids, opportunity for, 786

IRELAND:  
 Belfast: Tuberculosis sanatorium, objections to proposed site, 617—Purchase of Craigavon refused, 783—Graymount Hospital, Sir H. Gauvain's report, 655, 688  
 Byers, Sir John, dinner to, 167  
 Coates, S. P., presentation to, 848  
 Doctors' threatened strike, 167  
 Dublin, postal arrangements in, 234  
 Influenza vaccine, 271  
 Irish General Nursing Council, 271  
 Irish Public Health Council, 197  
 Medical attendance on the Royal Irish Constabulary, 234  
 Medical fees for public work (Limerick), 655  
 National University of Ireland, roll of honour, 234  
 Royal Academy of Medicine, 519  
 Salaries of Poor Law medical officers, 234, 519  
 Sanatorium at Craigavon, Belfast, proposed 783  
 Spelman, the late Dr. A. P., 721  
 State medical service, the proposed, 197—Meeting in Belfast 197  
 Taylor, James, presentation to, 849  
 Ulster Medical Society, 197, 379, 618, 688, 783—Examination in ophthalmology, 198  
 Wexford county practitioners, meeting on, 783

Irish General Nursing Council, 271. *See also* Nursing  
 Irish motor deadlock, 132  
 Irish Public Health Council, 197, 870—Report (Thomas Hennessey), 870  
 IRVING, Captain G.: Sublimed sulphur in mercurialism, 149  
 Ischaemic contracture of forearm (Archibald Young), 636  
 Italy, statistics of the deaths and wounded in the navy during the war, 313—Activities of Italian section of "Pneumothorax artificialis" to be resumed, 472—Statistics of war deaths in the sanitary service, 543

## J.

- JACKSON, C. E. S.: Acute intestinal obstruction due to pregnancy in a bicornuate uterus, 185. (O)
- JACKSON, F. S.: Erysipelas, 278
- JACKSON, Thomas, obituary notice of, 690
- Jaipur, medical institutions of, 198
- Jamaica as a holiday resort, 590
- JAMES, Major Gwilym Gregory, obituary notice of, 690
- JAMESON, Sir Leander Starr, his body removed to Africa, 779
- JANET, Pierre: Psychology and mental pathology, 774, 805
- JARDINE, Robert (and A. M. KENNEDY): Puerperal suppression of urine, 767
- Java, plague in, 589, 771
- Jejuno-colic fistula following gastro-jejuno-stomy (Charles Bolton and Wilfred Trotter), 757. (O)
- Jejuno-ileum, volvulus of the whole (B. P. Sabawala), 221
- Jenner Society, 842
- JEX-BLAKE, A. J.: Bronchiectasis, 591. (O)
- Joel chair of physics, 194
- Johannesburg Medical Advisory Committee presents a report on the organization of the medical school, 153
- Johns Hopkins Hospital, first superintendent of, 232
- JOHNSON, Claude, obituary notice of, 853
- JOHNSON, Reginald: Combined use of novarsenobillon and mercury intravenously, 436—Early diagnosis of syphilis, 620
- JONA, J. Leon: Prevention of influenza, 886
- JONES, D. W. Carmalt: Hypothesis as to the organic basis of functional nervous disease, 231
- JONES, E. Gabriel: *Chemistry for Public Health Students*, rev., 543
- JONES, E. H.: *The Road to Endor*, rev., 542
- JONES, Sir Robert: Flail joints and their treatment, 175. (O)
- JONES, W. Black: Analysis of 100 consecutive cases of cardiac disease, 145. (O)
- JONES, Wood: Voluntary movements in nerve lesions, 684
- Journal of Neurology and Psycho-pathology*, rev., 870
- JUDD, W. Rossell: Hay fever, 490
- Jugs, good and bad, 490

## K.

- Kantara, camp conditions (parliamentary question), 879
- Kashmir, State leper hospital, 881—Medical mission (report), 881
- KAYSERLING proposes a tuberculosis law for Germany, 315
- KEANE, A. H.: *Man, Past and Present*, rev., 330
- KEATS, John, his house at Hampstead for sale, 526—Memorial fund, 614
- KEEPEE, Frank R.: *Textbook of Elementary Military Hygiene and Sanitation*, rev., 88
- KEEGAN, Colonel Denis Francis, obituary notice of, 386
- KEELING, G. S.: End of the war, 383
- KEITH, Arthur: *Engines of the Human Body*, rev., 638
- KEITH, Brigade Surgeon Lieut.-Colonel Joseph Forbes, obituary notice of, 556
- KELLY, Surgeon Lieutenant Peter Burrows, obituary notice of, 557, 724
- KENNEL, Arabella: *Feminism and Sex Extinction*, rev., 676
- KENNEDY, A. M. (and Robert JARDINE): Puerperal suppression of urine, 767
- KENNEDY, C. M.: Strangulated umbilical hernia, 468. (O)—Lessons of the war in treatment of civil fractures of the skull, 630. (O)
- Kent, hospital question in, 379
- KROCH, Sir Alfred: A warning, 624
- KHOORI, Joseph: *Essai d'Urologie Pathologique des Pays Chauds*, rev., 639
- KIDD, H. Cameron: Acute pulmonary oedema, 490
- KIDD, Leonard J.: Treatment of psoriasis, 756
- Kidney, horseshoe, two cases of (J. Mill Benton), 601
- Kidney, metastatic staphylococcal infection of (Captain H. R. Souper), 288. (O)
- Kidney, retrograde absorption by, 878
- KING, Colonel W. G.: Awards for medical discovery, 519—Small-pox, its types and prevention, 778
- KING, W. W.: Spindle-celled sarcoma, 224—Diagnosis of gonorrhoea in the female, 364
- King's Fund. See Fund
- King's speech, 232
- KINGZETT, C. T.: *Popular Chemical Dictionary*, rev., 226
- KIRKPATRICK, T. Percy C.: *Henry Quin, M.D.*, rev., 407
- KNAUER: Intracarotid salvarsan injections, 162
- Knee joint, arthroplasty of, 768
- Knee-joint effusion due to congenital syphilis (Walter W. Galbraith), 636
- KNIGHT, E.: Sterility, 274

- KNIGHT, Edith G. (and others): Production of clean milk, 876
- KNOX, Robert: *Radiography in the Examination of the Liver, Gall Bladder, and Bile Ducts*, rev., 405
- KOLL, Irvin S.: *Diseases of the Male Urethra*, rev., 406
- KOOS: Hyperglycaemia in mental disorders, 193
- KÖRBL: Manicure infection, 376
- KYNASTON, Lieut.-Col. John: Treatment of adenoids, 238

## L.

- LABBÉ, Marcel, nominated Professor of Pathology and Therapeutics in Paris Faculty of Medicine, 315
- Laboratories, local clinical, 59
- Laboratory, Welsh mobile, 27
- Labour, delayed, significance of the "contraction ring" in (C. D. Lochrane), 11. (O)—Correspondence on, 61
- Labour, review of books on, 606
- Labour, hours of, 446
- Labour market, heart affections in relation to (R. O. Moon), 628. (O)
- Labour Ministry, statistics on the cost of living, 443
- Labyrinthine reactions of experienced aviators (David Ranken), 860. (O)
- LADELL, R. G. M.: Forgetting, psychological repression, 169
- LAIGNEL-LAVASTINE, M.: *The Internal Secretions and the Nervous System*, rev., 189
- Lamba, dysentery in, isolation of an organism causing, 776
- Lamp, a head, 472
- LANCISI, Giovanni Maria, celebration of second centenary of, 305
- LANE, Sir W. Arbuthnot: Prevention of venereal disease, 623
- LANG, W. D.: Handbook of British mosquitos, rev., 737
- Lapps, influenza among (A. H. Macklin), 465. (O)
- LARKIN, F. C., presentation to, 752
- LARKING, A. E., presentation to, 95
- Larynx, malignant disease of (W. S. Syme), 365
- LAUBIÈRE, P.: *Le Lait Condensé*, rev., 88
- LAUMONIER: Physiological action of intravenous injections, 375
- LAURENS, Georges: *Oto-Rhino-Laryngology*, rev., 830
- LAURIE, R. Douglas: Caesarean section for placenta praevia with concealed haemorrhage, 220
- LAW, W. F.: Treatment of malaria, 272
- LAWRIE, W. Duncan: "Acute suffocative catarrh," 115
- LAYTON, Frank G.: "Vagasthenia," 813
- LEADER, Charles Robert, obituary notice of, 70

## Leading Articles:

- Abortifacients, sale and advertisement of, 192
- Antianaphylaxis in treatment of chronic disorders, 839
- Army Medical Service in the war, 840
- Association of Surgeons of Great Britain and Ireland, 90
- Budget, 577, 610
- Birth rate, declining, 611
- Cancer, experimental induction of, 680
- Clinical research, 119
- Consultative Council, report of, 746
- Dangerous Drugs Bill, 714
- Deficiency diseases in Vienna, 477
- Diverticulitis, chronic, 119
- Dogs' Protection Bill, 301
- Eclampsia, nature of, 479
- Encephalitis, epidemic, types and treatment of, 578
- Endocrinology as an exact science, 644
- Food supply of Germany, 301
- Galton chair of National Eugenics, 803
- Helminths in cancer, 777
- Hospital survey, 713
- Hospital system, remoulding the, 160
- Immunity, non-specific, 228
- Income tax, reconstruction of, 409
- Influenza, 191
- In-patient treatment, organization of, 372
- Insurance medical remuneration, 120
- League of Red Cross Societies. See Red Cross
- Lethargic encephalitis, diagnosis of, 409
- Lobar pneumonia, etiology of, 875
- London's opportunity, 50
- Malaria, treatment of, 875
- Mechanism of symptoms, 547
- Medical Research Council, 510
- Medicine in the House of Lords, 21
- Military service and medical graduation, 445
- Miners' nystagmus, 227
- Opium question and the peace treaty, 339
- Organization of in-patient treatment, 372
- Osler, William, 21
- Parliamentary session, 22
- Paternalism or *laissez faire*? 52
- Penetrating wounds of the chest, 91

## Leading Articles (continued):

- Physical education, 338
- Physique of British manhood, 339
- "Pitfalls of old surgeons," 265
- Preventive medicine, teaching and research, 159
- Psycho-neuroses, 408
- Pyrexia of uncertain origin and enteric fever, 373
- Radium therapy, 644
- Red Cross Societies, League of, 547
- Rockefeller Foundation gifts, 838
- St. Andrews Institute for Clinical Research, 115
- Salvarsan, composition of, 804
- Security of tenure for health officers, 803
- Small-pox, its types and prevention, 778
- Skiagraphy of solid viscera, 511
- Stomach, volvulus of, 548
- Symptoms, mechanism of, 547
- Toxic effects of arsenobenzol preparations, 51
- Toxins and antitoxins, 266
- Tuberculosis, epidemiology of, 444, 478
- Tumours complicating pregnancy, 375
- Venereal clinic, needs of the, 92
- Venereal disease in the Portsmouth area, 680
- Volvulus of the stomach, 548
- League of Red Cross Societies. See Red Cross
- LEATHART, Percival W.: Chronic infection of the faucial and post-nasal lymphoid tissue in children, 217. (O)
- LEATHES, J. B.: Renal function in nephritis, 403
- LECLERC, H.: Cress consumption causing dysuria, vesical spasm, etc., 637
- Lecture, Lady Priestley Memorial: Public opinion and preventive medicine (Sir George Newman), 646
- Lecture, Schorstein: Diagnosis of disease of the pancreas (Sir A. E. Garrod), 459. (O)
- Lectures, Lettsomian: Tumours complicating pregnancy, labour, and the puerperium (Herbert R. Spencer), 179, 246, 320. (O)—Note on, 205—Leading article on, 373—Correspondence on, 416, 452
- Lectures, Mackenzie Davidson Memorial, 581
- Lectures, Maudsley: Prevention and treatment of insanity (Sir James Crichton-Brown), 749
- L'Encéphale et L'Informateur des aliénistes et des neurologistes* resume publication, 457
- Legumes in beri-beri. See Beri-beri
- Leicester: Public medical service, 415—Post-graduate course, 518—University college for, 715
- LEISHMAN, Major-General Sir William B.: Results of protective inoculation against influenza in the army at home, 1918-1919, 214. (O)
- LEITCH, Archibald: Treatment of uterine cancer, 416, 522, 585
- LEITH, W. Compton: *Domus Doloris*, rev., 639
- Lemon juice tablets, antiscorbutic, 624
- Leprosy conference in India, 484, 618, 749
- Leprosy statistics (F. L. Hoffman), 855
- LESBRE, Dr., elected correspondent of the Académie de Médecine, 221
- Lethargy, association of with the influenza bacillus (W. M. Crofton), 431. (O)
- Letters of a Widowed Physician to his Daughter*, rev., 331
- Leucocytes, polymorphonuclear, origin of, 93
- Leukæmia, acute, 231
- LEWIN, Octavia: Nasal hygiene or nasal drill, 487
- LEWIS, F. C.: Standardization of blood-cell suspension in complement fixation tests, 637—(and J. Martin BEATTIE) Sterilization of milk by electricity, 682
- LEWIS, Thomas: *Mechanism and Graphic Registration of the Heart Beat*, 622
- LEY, Gordon: Utero-placental apoplexy (accidental haemorrhage), 437
- "Liberton," 810
- Licences, establishment, 590
- Liebig museum opened at Giessen, 557
- Life, span of, 138
- LIGNIÈRES, Dr., elected a corresponding member of the Académie de Médecine, 221
- Liguria Medica*, reappearance of, 725
- LINDBOM, O.: Acute leukaemia, 231
- Lip reading, 103
- Liquor control, annual report of the Carlisle experiment, 653
- Liquor prescriptions in Ontario, 725
- Lister Institute, report of governing body, 709
- Lister memorial institute in Edinburgh, proposed, 95
- LISTER, T. D.: Address on the Assurance Medical Society, 366
- LITTLEJOHN, Arthur Rieukssett, obituary notice of, 69
- LITTLE, Muirhead: Artificial appliance for amputation below the ankle, 590
- Liver, acute yellow atrophy of (Major E. C. Whitehead), 400
- Liverpool: Women students' dinner, 198—Health of, 379
- Living, cost of, 443
- LOYD, G. W. (and Col. Ransom P. CKARD): Early signs of scurvy, 329
- LOYD, I. H.: Case of facial trophonewrosis with deformity of hand, 735



Local Government Board. *See* Board  
*Local War Pensions Committees' Handbook*, 587  
 LOCHRANE, C. D.: Significance of the position of a "contraction ring," 11. (O)  
 LOCKHART-MUMMERY, J. P.: Diverticulitis, 115—Operative treatment of ulcerative colitis, 497. (O)  
 LOCKYER, Cuthbert (and Thomas Watts EDEN): *Gynaecology for Students and Practitioners*, rev., 770  
 Loewi's adrenalin mydriasis as a sign of pancreatic insufficiency (W. L. Cockerott), 669. (O)  
 LOGIE, James Scarth Spence, 100th birthday of, 691, 717  
 LONDON:  
 Association of Medical Women's Federation. *See* Association  
 Baths of old London, 807  
 County Council. *See* Council  
 Diphtheria and scarlet fever in, 27  
 District discharge centre, 518  
 District nursing in, 307, 348  
 Health services and hospitals in, 752  
 Inquests in, 451  
 Maternity and child welfare arrangements in, 687  
 Mental hospitals. *See* Hospitals  
 Post-graduate teaching in. *See* Post-graduate  
 Radium Institute report, 640, 644  
 School of Tropical Medicine. *See* Tropical  
 Small-pox in, 660  
 Small-pox in East London (parliamentary question), 378  
 University quarter for, 780  
 Venereal clinics in (parliamentary question), 414  
 LONDON, Bishop of (and others): Polish Red Cross Society of Great Britain, 884  
 London Insurance Committee's report on sanatorium benefits, 782  
 London's opportunity (leading article), 50  
 Longevity, weight, and height (Lewis P. Orr), 678  
 Loss of both legs (parliamentary question), 450  
 Low, Barbara: *Psycho analysis*, rev., 640  
 Low, George C.: Some unusual forms of dysentery, 255. (O)  
 LUCAS, A.: *Legal Chemistry and Scientific Criminal Investigation*, rev., 607  
 LUMB, Major N. F. L.: *The Urethroscope in the Diagnosis and Treatment of Urethritis: a Contribution to Urethroscopy*, rev., 48—A urethroscopic tube, 771  
 LUMSDEN, Thomas: Forgetting psychological repression, 131, 201  
 Lunacy Act, liability under (Everett v. Griffiths and Anklesaria), 522  
 Lunacy statistics (parliamentary question), 345  
 Lungs, acute oedema of (Stewart McNaughton, 293—(Herbert H. Brown), 435—(Cecil Musgrave), 468—(H. Cameron Kidd), 490—(Kenneth Anderson), 571—(William S. Scott), 571  
 Luxembourg, number of doctors, dentists, etc., in, 670  
 LUTY, Georges: *Textbook on Gonorrhoea and its Complications*, rev., 441—*Treatise on Cystoscopy and Urethroscopy*, rev., 541  
 Lymph, Government (parliamentary question), 378  
 Lymphocyte, biology of, 123  
 LYSTER, Cecil Rupert Chaworth, obituary notice of, 1, 2  
 M.  
 MACALISTER, Alexander, estate of, 457  
 MACALISTER, Sir John, complimentary dinner to, 447—Presentation to, 885  
 McBRIDE, P.: Adenoids, nasal catarrh, and influenza, 349  
 McCABE, Lieut.-Col. Frederick F.: The span of life, 138  
 McCARDIE, Mr. Justice: His remarks on professional secrecy, 102, 135  
 MCCARRISON, Lieut. Col. Robert: Effects of deficient dietaries on monkeys, 249. (O)—Deficiency disease, with special reference to gastro-intestinal disorders, 822. (O)  
 McCRAE, Sir George: *Summary of the Report by the Committee on Housing in Scotland*, 95  
 McCUBBIN, Thomas, obituary notice of, 313  
 MCCURRICH, H. J.: Case of malignant pustule in which the incubation period was known, 828  
 MACDONALD, D. M.: Treatment of profuse sweating in axillae, 242  
 MACDONALD, J. F., called to the bar, 659  
 MCFARLAND, Joseph (and John B. DEEVER): *The Breast, its Diseases and their Treatment*, rev., 675  
 MACGIBBON, T. A.: Treatment of the running ear, 294  
 Machinery of the Association. *See* Association  
 MACILLRAITH, W. M.: New lamps for old in obstetrics, 278

MACILWAINE, J. E.: Association of aortic endocarditis and aortitis, 428. (O)—Aortitis and aortic regurgitation, 656, 754  
 MCINTOSH, James, appointed to University chair of pathology at Middlesex Hospital Medical School, 315  
 MCINTOSH, Captain John N.: Heat hyperpyrexia, 795  
 MACKENNA, Robert William, appointed honorary dermatologist to Royal Infirmary, Liverpool, 173  
 MACKENZIE, J.: Medical literature for Vienna, 484—Future provision of medical services, 783  
 MACKENZIE, Sir James: Clinical research, 105. (O)—The soldier's heart and war neurosis, 491, 530. (O)  
 MACKENZIE, John W.: Ticks and relapsing fever, 200  
 MACKIE, Major F. P.: Treatment of relapsing fever, 380  
 MACKINNON, Grace: Idiosyncrasy to quinine, 258  
 Mackintosh. *See* Waterproofing  
 MACKINTOSH, Ashley W.: Appreciation of Sir W. Osler, 67  
 MACKLIN, A. H.: Influenza among the Lapps, 465 (O)  
 MACKWOOD, J. Charsley: Prevention of venereal disease, 130  
 MACLEAN, Inspector-General George, obituary notice of, 855  
 MACLEOD, Donald M.: Hour glass stomach, gastric and pyloric ulcers, 115—Obstruction due to adhesions of the pelvic colon, 867  
 MACMILLAN, Margaret: *The Nursery School*, rev., 367  
 McNABB, Surgeon Rear-Admiral Sir Daniel J. P., appointed naval member of Medical Consultative Board to Admiralty, 884  
 McNAUGHTON, Stewart: Acute oedema of lungs, 293  
 MACNEECE, Major-General James Gausson, obituary notice of, 70  
 McOSCAR, J.: Our opportunity, 520  
 MACPHAIL, James M.: *Eyes Right*, rev., 441  
 McVAIL, John C.: *Half a Century of Small-pox and Vaccination*, rev., 605  
 McWALTER, J. C.: Prevention of venereal disease, 273—Syphilis insontium, 827. (O)  
 MADDEN, Frank Cole: *The Surgery of Egypt*, rev., 405  
 Madrid. *See* Spain  
 MAGIAN, A. C.: A disclaimer, 138—*Practitioner's Manual of Venereal Diseases*, rev., 331  
 Magic and medicine, 612  
 MAKINS, Sir George: Dinner to, 232 684—Memorial to officers and men of the R.A.M.C. who fell in the war, 307—Becomes President of the Fellowship of Medicine 377  
 Malaria, haematooxon of first verified in America by Osler, 525  
 Malaria in Scotland, 654  
 Malaria, subtertian, usual in, 303  
 Malaria, treatment of, 199, 235, 272, 381, 453, 872—(W. S. Dawson), 600. (O)—Volume edited for War Office by Sir Ronald Ross, with reports by many officers, 872—Leading article on the volume, 875  
 Malaria treatment, Charles Dickens on, 756  
 Malaria in Uganda, routine treatment of (J. A. Taylor), 113 (O)  
 Malay States gold medal, 133  
 MALCOLM, E.: Sanatorium hospital for the well-to-do, 883  
 MALCOLM, John D.: Appendicitis without protective stiffening of the abdominal wall, 432. (O)  
 Male population, physical census of, report on, 331—Leading article on, 339  
 MALING, Edwin Allan, obituary notice of, 588  
 Malta, nurses in (parliamentary question), 551  
 Man, toxicological investigation of acute alcoholism in, 411  
 Man, white, in West Africa, 411  
 Manchester: Black smoke tax in, 721—Radium Institute report, 745—College of Technology publishes pamphlet on economic questions of the day, 815  
 Mandible, ankylosis of, and its operative treatment (Gilbert Chubb), 256. (O)  
 Mange, psoroptic. *See* Psoroptic  
 Manicure infection, 376  
 MANSON-BAXTER, Philip: Commoner complications of bacillary dysentery in military practice, 791. (O)  
 MARSH, Lieut.-Col. O. E. Bulwer, appointed J. P. for county of Monmouth, 525  
 MARSHALL, C. F.: Early diagnosis of syphilis, 486, 688  
 MARSHALL, Claude H.: Salvarsanized serum in sleeping sickness, 702. (O)  
 MARSHALL, F. H. A., elected Fellow of the Royal Society, 344  
 MARTIN, C. J. (and P. HARTLEY): Diphtheria bacilli in the throat, 796  
 MARTIN, T. Muirhead: *Pocket Notes on Nerves*, rev., 118  
 MARVEL, Emery, obituary notice of, 240  
 Mary Louisa Prentice Montgomery lectureship in ophthalmology, 241  
 Mary Putnam Jacobi Fellowship, 173, 205  
 MASON, Captain W. F.: Rupture of membranes not followed by natural evacuation of the uterus, 258  
 "Mass reflex," 104

Massage, cardiac, in asphyxia neonatorum (E. Ward), 257  
 Massage establishments (parliamentary question), 650  
 Masseurs, blind, 232, 624  
 Masseuses, army (parliamentary question), 306  
 Maternity benefit for suckling mothers in France, 12  
 Maternity and child welfare centres in England and Wales, number of, 379—Booklet issued by Ministry of Health, 379—In London, 687  
 Maternity and infant welfare in India, 483, 618  
 Maternity homes and hospitals, memorandum by Ministry of Health, 299, 847—Parliamentary questions, 305. *See also* Infant welfare  
 MATTHEW, D.: Forgetting, psychological repression, 201  
 MATTHEWS, J. S.: Treatment of psoroptic mange, 856  
 Maudslays lectures. *See* Lectures  
 Mauritius, epidemic diseases in, 298, 383  
 MAYOR, O. H.: Mode of quinine administration, 28  
 MAW, Henry T.: Anthrax infection by brushes, 25, 53  
 MAY, Otto: Prevention of venereal disease, 99  
 MAYER, Leo: *Orthopaedic Treatment of Gunshot Injuries*, rev., 707  
 MAYLAND, A. Ernest: Partial pyloric obstruction, 626. (O)  
 MAYNARD, Lieut.-Colonel F. P.: Ophthalmic operations, 660  
 MAYO-ROBSON, Sir Arthur, elected honorary member of Royal Medical Society of Ghent, 241  
 MEAKINS, Jonathan C.: Therapeutic value of oxygen in pulmonary lesions, 324. (O)  
 MEARS, F. C.: New lamps for old in obstetrics, 128  
 Measles notification, a plea for, 278  
 Measles, public health administration in epidemics of (John Brownlee), 534. (O)  
 Mechanism of symptoms. *See* Symptoms  
 Mechano-therapy (Hedda Alstrom), 366  
 Medical ambassadors to the United States, 410  
*Medical Annual*, 1920, rev., 738  
 Medical appeal boards for officers, 136  
 Medical appointments, whole-time, under the Worcestershire County Council, 654  
 Medical aspects of divorce laws. *See* Divorce  
 Medical assessors (parliamentary question), 583  
 Medical attendance on the Royal Irish Constabulary, 234  
 Medical barristers, 659  
 Medical bill (South Australia), 27  
 Medical boards, remuneration of (parliamentary question), 450. *See also* Pensions  
 Ministry  
 Medical conditions of service in India (parliamentary question), 720  
 Medical Consultative Council. *See* Health Ministry  
 Medical Defence Union: Marks of appreciation, 35—The circumlocution office to day, 513—Special general meeting, 771  
*Medical Directory*, accidental omission of a name from current issue, 242  
 Medical discovery, rewards for, 26—Correspondence on, 486, 519  
 Mental disease, incipient, treatment of, report of Medico-Psychological Association, 515  
 Medical education in America, mission from France and Great Britain to visit America to study systems of, 525  
 Medical movements in America, 342, 346. *See also* Scientific investigation  
 Medical examination for Government employment (parliamentary question), 583  
 Medical fees. *See* Fees  
 Medical grants under the Insurance Act (parliamentary question), 269. *See also* Insurance  
 Medical and surgical history of the war. Surgeon-General of United States Army asks for grant for the publication of, 623  
 Medical inspection of schools. *See* School  
 Medical inspection by women (India), 849  
 Medical institutions of Jaipur, 198  
 Medical Insurance Agency, 842  
 Medical investigation, the aeroplane in. *See* Aeroplane  
 Medical journals of Scandinavia, 55  
 Medical literature for Vienna, 484, 516  
 Medical magistrates, 35, 525, 557, 589, 785, 885  
 Medical members of Parliament, 27  
 Medical men and motor tax. *See* Motors  
 Medical mission reports (South Travancore), 822—(Kashmir), 831  
 Medical missions (Russell Wells), 623  
 Medical Museums Association, American and Canadian Section, annual meeting, 786  
 Medical officers, advertisements for (Colchester), 809  
 Medical officers of health, security of tenure of (leading article), 803  
 Medical officers of local authorities, salaries of, 230  
 Medical officers in Mesopotamia (parliamentary question), 450  
 Medical profession, opportunity of. *See* "Our opportunity,"  
 Medical professional privilege, 135. *See also* Professional secrecy  
 Medical psychology. *See* Psychology

Medical radiology, diploma in, 55  
*Medical Register*, 514, 786, 841—Registrable foreign degrees, 786—Change of address, 841  
 Medical research in India, 199

**MEDICAL RESEARCH COMMITTEE:**  
 Report to on the toxic effects of arsenobenzol preparations (Surgeon Lieutenant Commanders R. J. G. Parnell and P. Fildes), 51  
 Report on penetrating wounds of the chest, 91  
 Report to on probable proportion of enteric infections among undiagnosed febrile cases invalided from the Western Front since October, 1916 (W. W. C. Topley, S. G. Plates, and C. G. Imrie), 372  
 Report to on the epidemiology of phthisis (John Brownlee), 444, 478  
 Expenditure of (parliamentary question), 482

**MEDICAL RESEARCH COUNCIL.** 447, 504  
 Provisions of the charter, 504  
 Constitution of, 504  
 Powers, 504  
 Leading article on, 510  
 Arranges to maintain a national collection of type cultures, 582  
 Sterilization of milk by electricity (J. Martin Beattie and F. C. Lewis), 682

Medical schools of America, 481  
 Medical schools, clinical units in, 775  
*Medical Science: Abstracts and Reviews*, rev., 88, 262, 331, 503  
 Medical service pay (parliamentary question), 720  
 Medical services, future provision of, report of Medical Consultative Council for England, 739—Report of Welsh Consultative Council, 781—Lord Dawson on the report, 800—In Wales, 809—Correspondence on, 783, 812, 850, 882—The primary centres, 783—Provision of private wards in health centres, 783—Position of general practitioners, 784—Medicine and the State, 882  
 Medical services. *See also* Health services  
 Medical sickness assurance, 94  
 Medical societies. *See* Societies  
 Medical students, number of, 102—In the United States, 481—Proposal that first-year students should study nursing and dietetics, 525—Demobilization of (parliamentary question), 720  
*Medical Students' Register*, 581

**MEDICAL AND SURGICAL APPLIANCES AND PREPARATIONS:**  
 Ambiasine, 190  
 Anti-vermin paste, 472  
 Head lamp, 472  
 Nujol, 709  
 Petroleum jellies, 190  
 Sedimentary cell for microscopical examination of cerebro-spinal and other fluids, 708  
 Tonsil bayonet, 472  
 Urethroscopic tube, 771

Medical terms in the *New English Dictionary*, 683  
 Medical treatment for fee paying pupils in London County Council secondary schools, 387  
 Medical women's dinner, 45  
 Medicine in Bolshevik Russia, 54  
 Medicine and the Government, 52, 56  
 Medicine in the House of Lords (leading article), 21  
 Medicine, indigenous (India), 618  
 Medicine and medical appliances not to be sold by unlicensed persons at Athens (New York) without a permit, 725  
 Medicine, review of books on, 502  
 Medicine and the State (Lord Dawson), 743

**Medico-Legal:**  
 Abortionist sentenced (Devi Dayal Sasun), 589, 754  
 Drugless healer sentenced (Arthur Barker), 314  
 Drunkenness in murder case: House of Lords delivers judgement in the Beard case, 383  
 "Herbal specialist" (Charles C. Abbott), 659  
 Insanity and crime, 523  
 Liability under the Lunacy Act, 522  
 Medical professional privilege, 102, 135  
 Panel practitioner's action for slander, 454  
 Professional secrecy, 102, 135  
 Unqualified treatment of venereal disease, 63, 384  
 Venereal "professor" sentenced (A. S. Eastburn), 384

Melancholia, senile, 104  
 MELLANBY, E.: Alcohol as a food, 295—Accessory food factors in infant feeding, 328  
 MELLOR, J. E. M.: Treatment of psoroptic mange (*Psoroptes communis*, var. *cuniculi*), 316  
 Membranes, rupture of, not followed by natural evacuation of the uterus (Captain W. F. Mason), 258  
 Memorial to men who fell in the war. *See* British  
 Meninges, permeability of to arsenic, 785

Meningitis treated by intrathecal injections of the patient's blood (Rupert Waterhouse), 45. (O)  
 Meningitis, tuberculous, case of, with complete recovery (Hugh Barber), 601. (O)  
 Mental cases, early care of in South Wales, 348  
 Mental cases, uncertifiable, sanatoriums for (parliamentary question), 414—Hospitals for (parliamentary question), 649  
 Mental deficient institutions for, 126  
 Mental disease and spiritualism, 660  
 Mental disorders, hyperglycaemia in, 193  
 Mental disorders, physical basis of, 415, 452. *See also* Nervous disorders  
 Mental disorders, treatment of, 741, 851  
 Mental hospitals. *See* Hospitals  
 Mental treatment, early, and the rights of the subject, 689  
 Mentally defective, Birmingham scheme for (W. A. Potts), 472—Correspondence on, 554  
 Mentally defective, list of schools and institutions for, 809  
 Merchant seamen, proposed sanatorium for, 229  
 MERCIER, Charles, note on, 342  
 Mercurialism, sublimed sulphur in (Captain G. Irving), 149  
 Mercury and novarsenobillon, combined use of intravenously (Reginald Johnson), 436  
 Mesopotamia: Territorial and Special Reserve Officers R.A.M.C. in (parliamentary question), 345—Medical officers in (parliamentary question), 450—Sandfly fever in, 620  
 Metabolism, human, recent work on, 877  
 Mexican Board of Health, quarantines all ships from Havana where there is an epidemic of meningitis, 755  
 MICHELIN brothers, note on, 458  
 Middle-ear. *See* Ear  
 MIDDLETON, A. G.: Forgetting, psychological repression, 274  
 MIDDLETON, James, presentation to, 103; obituary notice of, 884  
 MIDDLETON, W. J.: Value of counter-irritation, 856  
 Midwives (parliamentary question), 649  
 Midwives Board. *See* Board  
 MILES, W. Ernest: Diverticulitis, 115  
 Military medicine at the Imperial War Museum, 841  
 Military medical services in 1919, 134—Deaths, 134—Honours, 134—Recruiting for the R.A.M.C. and I.M.S., 134. *See also* Army, British  
 Military service civil liabilities claims, time extended (parliamentary question), 269  
 Military service and medical graduation (leading article), 445  
 Military service, compulsory, in Prussia, abolition of, 289  
 Milk adulteration (parliamentary question), 583  
 Milk, bacteriology of (R. Stenhouse Williams), 365  
 Milk for children and mothers, 124  
 Milk, clean, production of, report on, 876  
 Milk, condensed, inter-departmental committee appointed to determine standard composition of, 423  
 Milk from Denmark (parliamentary question), 844  
 Milk, dried, and vitamins, 580  
 Milk, sweetened condensed (parliamentary question), 482, 720, 751  
 Milk and dairies legislation (parliamentary question), 269, 686  
 Milk, pure and clean, 336  
 Milk sterilized by electricity, 682, 722  
 MILLARD, C. Killick: Vaccinal conditions of small-pox carriers, 851  
 MILLS, Lieut.-Col. B. L.: The Tagliacotian doctrine, 174  
 MILNE, Robert, presentation to, 205  
 MILNE, Thomas, obituary notice of, 488  
 Mineral water resorts, foreign, 545  
 Miners, eyesight of. *See* Eyesight  
 Miners' nystagmus. *See* Nystagmus  
 Mines, illumination in, discussion on, 327  
 MITCHELL, C. A.: Finger-prints on documents, persistence of, 387  
 MITCHELL, Chalmers, to accompany aerial expedition from Cairo to the Cape, 230  
 MITCHELL, Captain George Alan, obituary notice of, 71  
 Mitral stenosis in soldiers (A. G. Auld), 13  
 MOCK, Harry E.: *Industrial Medicine and Surgery*, rev., 502  
 MOFFAT, R. U.: Mode of quinine administration, 60  
 MOFFET, Lieut. Colonel Grenville Edwin, obituary notice of, 70  
 Mole, hydatidiform (F. J. Browne), 152  
 Monaco, congresses in, 283  
 Monkeys, effects of deficient dietaries on (Lieut.-Col. Robert McCarrison), 249. (O)  
 Monotypical serum in cerebro-spinal fever (W. T. Munro), 430. (O)  
 MONSABRAT, K. W.: Some clinical types of abdominal tuberculosis, 5. (O)—Massive calculous deposit in the urinary channels, 14  
 MOON, R. O.: Heart affections in relation to the labour market, 628. (O)  
 MOOR, Captain C. G.: Antivermin paste, 472  
 MOORE, Helen, obituary notice of, 276  
 MOORE, Sir John W.: Appreciation of Sir W. Osler, 68

MORANT, Sir Robert, obituary notice of, 419, 455  
 MORCOM-HARREIS, T. W., presentation to, 518  
 MORELLI, Enrico, death of, 589  
 MORISON, Rutherford: Diverticulitis, 85—Abdominal emergencies, 425. (O)  
 MORLEY, John: Duodenal ulcer and the hyperkonic stomach, 655  
 Morphine acreage under cultivation (parliamentary question), 751  
 Morphine factories in Great Britain (parliamentary question), 720  
 Morphine, morphine salts and opium (parliamentary question), 345  
 MORRISON, G. E. (of Peking), obituary notice of, 781  
 MORRISON, Major J. T. (and Colonel Seymour BARLING), *Manual of War Surgery*, rev., 469  
 MORTON, John, obituary notice of, 523  
 Mosquitoes, review of book on, 737  
 Mothercraft, rev., 368  
 MOTHERSOLE, R. D.: Apparatus spontaneous rupture of a normal spleen, 63  
 Motor accessories, 526  
 Motor ambulance. *See* Ambulance  
 Motor car of a doctor, obstruction of, 783  
 Motor cars, rise in price of Austin cars, 557—Establishment licences, 590  
 Motor deadlock, the Irish, 132  
 Motor notes for medical men (H. Massac Buist), 517, 543, 574—Taxation of cars, 555, 574, 648, 660, 685, 808—Recommendations of Departmental Committee, 575—Parliamentary questions, 808  
 Motors, water charges for car washing, 195, —Taxation of, 555, 574, 648, 660, 685, 808, 844—Parliamentary question on taxation of, 685, 686, 808, 844  
 MOTT, Clarence: Intratracheal chloroform, 13  
 MOTT, Sir Frederick W.: Early symptoms and diagnosis of diseases of the spinal cord, 857. (O)  
 MUIR, Robert: Appreciation of Alexander Ferguson, 621  
 MÜLLER: Origin of gastric pain, 162  
 MUMMERY, J. Howard: *The Microscopic Anatomy of the Teeth*, rev., 406  
 MUNRO, W. T.: Treatment of cerebro spinal fever by monotypical serum, 430. (O)  
 MURRAY, George R.: Appreciation of Sir W. Osler, 66—Life-history of the first case of myxoedema treated by thyroid extract, 359. (O)  
 MURRAY, Colonel Robert Davidson, obituary notice of, 204  
 MURRAY, W. A.: Treatment of malaria, 235  
 Muscular work, physiological cost of (A. D. Waller), 537. (O)  
 Museum, Imperial War: Naval medicine at, 807—Military medicine at, 841  
 MUSGRAVE, Cecil: Acute oedema of lungs, 468  
 Muzzling Order (parliamentary question), 414  
 MYERS, J. M. (and J. H. FORT): *Elementary Practical Chemistry*, rev., 190  
 MYLES, Wilfrid Leech, obituary notice of, 239  
 Mydrasis, Loewi's adrenalin, as a sign of pancreatic insufficiency (W. L. Cockcroft), 669. (O)  
 Myoclonic form of epidemic encephalitis (Piero Boveri), 570. (O)—*See also* Encephalitis  
 Myxoedema treated by thyroid extract, life-history of the first case of (George R. Murray), 359. (O)

## N.

Nails, ringworm of, simple treatment of (Robert Raik), 185  
 Naples, physiological study at the Zoological Station, 241, 268  
 Narcotic addiction, review of books on, 573  
 Nasal drill in treatment of adenoids (Gertrude H. Hickling), 147. (O). *See also* Adenoids  
 Nasal hygiene or nasal drill, 487  
 National Health Week, 557  
 National Service Medical Board (parliamentary question), 378  
 National Union of Manufacturers (Incorporated), *Descriptive and Classified Directory of Members*, rev., 49  
 Naval Medical Memorial Fund. *See* Fund  
 Naval medicine at the Imperial War Museum, 807  
 Naval officers, retired, pensions and income tax (parliamentary question), 305, 378  
 Navy, Royal, Medical Service of: Note on, 304—Promotions (parliamentary question), 345, 615—Income tax (parliamentary question), 345—Medical club dinner, 814—Retired surgeon commanders (parliamentary question), 378—Senior surgeon commanders R.N., 454—Surgeon rear-admirals, 615—Work of in the war, review of book on, 637—Sick berth ratings (parliamentary question), 650—Physical therapy in (Surgeon Commander A. K. Smith-Shand), 683—Prize money not applicable to hospitalships (parliamentary question), 686—Establishments and services (parliamentary question), 719  
 Needle in alimentary canal (Heywood Smith), 81—W. M. Feldman, 206. *See also* Alimentary canal

Needle for artificial pneumothorax, a new (Frederic C. Coley), 432. (O)  
 Needle, Roman netting, for winding a surgical thread, 458  
 Neo-natal death rate in Edinburgh, 270  
 Neoplasms, x-ray treatment of (G. E. Villandrè), 215. (O)  
 Nephritis, abdominal haemorrhage, death (James E. Blomfield), 400  
 Nephritis, blood transfusion in (Jeffrey Ramsay), 766 (O)  
 Nephritis, chronic, prognosis and treatment of (J. O. Symes), 494. (O)  
 Nephritis, renal function in (J. B. Leathes), 403  
 Nephritis, review of book on, 606  
 Nerve lesions, voluntary movements in, 684  
 Nerve strain, discharged soldiers with (parliamentary question), 751  
 Nerve symptoms in acute infections (Sir Thomas Horder), 404  
 Nerves, cervical, vagus, and sympathetic, a correction, 138  
 Nerves, effects of radium treatment on war injuries in the neighbourhood of (Captain Walter C. Stevenson), 862. (O)  
 Nervous and borderland cases (Helen Boyle), 438  
 Nervous disorders, acidosis in (B. H. Shaw), 635 (O)  
 Nervous disease, functional, hypothesis as to the organic basis of, 231  
 Nervous disorders, functional, modern treatment of (Bernard Hart), 207. (O)—Correspondence on, 415, 452. *See also* Mental disorders  
 Nervous system and the endocrine glands (Sibyl I. Welsh), 769  
 NETTER: Lethargic encephalitis, 193  
 Neuralgia, chronic paroxysmal trigeminal, and its treatment (Wilfred Harris), 693. (O)  
 Neuralgia, trigeminal, treatment of, 173  
 Neurological Board, Lancaster Gate, 379  
 Neurological jottings (James Taylor) 282. (O)  
*See also* Shingles, Varicella, Epilepsy, and the Weather  
 Neurological treatment of pensioners (parliamentary question), 879  
 Neuroses, war, 36  
 Neurosis, war, and the soldier's heart (Sir James Mackenzie), 491, 530. (O)  
 New lamps for old in obstetrics. *See* Obstetrics  
 NEWMAN, Sir George: Appreciation of Sir Robert Morant, 419—Lady Priestley Memorial Lecture: Public opinion and preventive medicine, 646  
 NEWSHOLME, Sir Arthur, to publish his American addresses, 623  
 NEW SOUTH WALES:  
 Alien enemy practitioners, 233  
 Red Cross fields of labour, extension of, 811  
 Re-formative treatment of soldier prisoners, 811  
 Roll of honour, University of Sydney, 233  
 Royal Prince Alfred Hospital 271  
 Stuart, the late Sir T. A., 811  
 Tuberculous soldiers, 271  
 New York: Report of State Hospital Commission, 165—Women's Medical Association of New York City and Mary Putnam Jacobi fellowship, 173, 205—Carnegie Corporation gives money to National Academy of Sciences and the National Research Council, 249—Medical men contribute to Vienna food fund, 619—*Handicapped Worker* issued by the Institute for Crippled and Disabled Men, 829  
 NEWILL, A. G.: Plea for the notification of measles, 278  
 NICOLL, James H.: Chronic pancreatitis, 132—Dyspepsia, 380  
 NIERENSTEIN, M.: Excretion of quinine in the faeces, 278—Permeability of the meninges to arsenic, 785  
 Nigeria, Northern, service in (parliamentary question), 615  
 Night blindness. *See* Hemeralopia  
 NIGHTINGALE, Florence: Some manuscript notes by, 679—Centenary of the birth of, 691—Medal awarded, 786  
 NIJHOFF, M.: Issues catalogue of books concerning Netherlands India, 315  
 NIOSI: Volvulus of stomach, 548  
 NIXON, J. A.: Appreciation of Sir W. Osler, 65—Malignant endocarditis in a war pensioner, 435  
 Nobel Medical Prize for 1919 not to be awarded, 241  
 NOGUCHI: Etiology of yellow fever, 375  
 Noise in main thoroughfares (parliamentary question), 615  
 NORMAN, Geo.: Ventrifaction before the menopause, 571  
 Nose, separation of tip of, with complete primary union, 72  
 Notes, Letters, Answers, etc.  
 Abortifacients and preventives, 242  
 Abortion, attempted, sudden death at, 624  
 Adjusting the matter, 278  
 Advertising's artful aid, 556  
 Alopecia, 138, 173  
 Anaesthesia in epileptics, 526, 556, 624  
 Anaphylaxis, severe: recovery, 72  
 Antiscorbutic lemon juice tablets, 624

Notes, Letters, Answers, etc. (contd.):  
 Antispiritualistic vaccine, 726  
 Apothecary poet's house (Keats), 526  
 Asphyxia from inhalation of tobacco smoke, 692  
 Beri-beri, prevention of, 72  
 Blind masseurs, 624  
 Calcium lactate, value of, 726  
 Camphor oil, subcutaneous injections of, 388, 424  
 Cervical vagus and sympathetic, 138  
 Chinese medicine, the founder of, 72  
 Coelium non animum, 278  
 Cold water and antipyretic drugs, 205  
 Copper alumin in inoperable cancer, 104, 174  
 Correction, 316  
 Counter-irritation, value of, 856  
 Cutaneous manifestations in a case of cervical fistula, 424  
 Dickens on the treatment of malaria, 756  
 Disclaimers, 138  
 Dupuytren's contraction, 242  
 Eggs dried, 856  
 Epilepsy, influence of atmospheric conditions on, 173  
 Erysipelas, 242, 277, 316, 352—A correction, 316  
 Establishment licences, 590  
 Evans's Analytical Notes, 786  
 Fetal movements, 71  
 Food and disease, 816  
 Foreign degrees, registrable, 786  
 Gestation, length of, 556  
 Good and bad jugs, 490  
 Granuloma of eyelid, 458  
 Grateful country, 316  
 Hay fever, 458, 490  
 Health work, co-operation in, 490  
 Improving us off the earth, 104  
 Income tax, 36, 71, 104, 138, 173, 242, 277, 316, 388, 424, 458, 490, 526, 556, 624, 650, 692, 726, 756, 786, 816, 856, 885  
 Influenza: Ocular conditions in, 72—Chameleon, 424 Prevention of, 886  
 Insomnia aggravated by noise, 424  
 Insular orthography, 174  
 Invalids, opportunity for, 786  
 Jamaica as a holiday resort, 590  
 Legumes in beri beri, 816  
 Light wines and heavy prices, 590  
 Lip reading, 103  
 Local rating, 277  
 "Mass reflex," 104  
 Measles notification, a plea for, 278  
 Medical Directory, clerical error in, 242  
 Michelin Brothers, 458  
 Miner's nystagmus, 138  
 Motor accessories, 526  
 Motor cars: Establishment licences, 590; proposed taxation of, 660  
 Needle in the alimentary canal, 206  
 Neuralgia, trigeminal, 173  
 New lamps for old in obstetrics, 278  
 Night blindness in scurvy, 526  
 Obesity, adolescent, 138  
 Ophthalmic operations, 660  
 Orthography, insular, 174  
 Paraesthesia, 277  
 Pericranial effusion of blood, 206  
 Petrol, price of, 352  
 Pin in the alimentary canal, 242, 424  
 Pneumonia infection, 816  
 Potatoes, sunburnt, 886  
 Pregnancy during amenorrhoea, 278  
 Professional secrecy, 174  
 Pruritus, treatment of, 104  
 Psoriasis, treatment of, 756  
 Psoroptic mange (*Psoroptes communis* var. *cuniculi*), treatment of, 316, 856  
 Pulmonary oedema, acute, 490, 726  
 Quadruplets, 556  
 Quinine administration, mode of, 756  
 Quinine in the faeces, excretory or, 278  
 Rats and plague, 816, 856  
 Reading by ear, 692  
 Record tramp, 692, 726  
 Roman netting needle for winding a surgical thread, 458  
 Sciatica, treatment of, 856  
 Senile melancholia, 104  
 Smith's visiting list, 36  
 Soft answer (story of Sir Samuel Wilks), 72  
 Span of life, 138  
 Speculum illuminator, simple, 174  
 Spiritualism and mental disease, 660  
 Surgical war honours, 352  
 Sweating, profuse, 206, 242  
 Syphilis, sites of inoculation lesions in, 388  
 Tagliacotian doctrine, 72, 104, 174, 352  
 Tertium quid, 206  
 T. F. and S. R., 590, 624  
 Thyroid administration in hibernating dormice, 424  
 Trade teaching for feeble-minded youths, 556  
 Tuberculosis, pulmonary, duration of, 206  
 Unmusical swab, 104  
 Venereal disease in the Portsmouth area, 726  
 Venereal disease prevention, 352  
 War honours, 352  
 War neuroses, 36  
 Warning, 316, 624  
 Wilks, Sir Samuel, story of (a soft answer), 72, 104  
 Notification fee. *See* Fee  
 Novarsenobenzol treatment followed by phagedaena or Hunterian chancre (H. M. Hanschell), 498. (O)

Novarsenobillon and mercury, combined use of intravenously (Reginald Johnson), 436  
 Nujol, 709  
 Nursery Schools, rev., 299  
 Nurses, alternative pensions for (parliamentary question), 879  
 Nurses, army (parliamentary question), 269  
 Nurses, disabled, treatment for, 385  
 Nurses in Malta (parliamentary question), 551  
 Nursing Council, General, appointment of, 616  
 Nursing Council for Scotland, 127, 584, 752—For Ireland, 271  
 Nursing, district, in London, annual meeting, 307, 348  
 Nursing organization in Wales, 233  
 Nursing service of the Ministry of Health (parliamentary question), 450  
 Nyctalopia or hemeralopia, 510 *See also* Hemeralopia  
 Nystagmus, miners', 138—Leading article on, 227—Double glaucoma developing after, 424—Parliamentary questions, 482—Review of books on, 572  
 O.  
 OBATA: Nature of eclampsia, 479  
 Obesity, adolescent, 138  
 Obstetrics and gynaecology, vaccines in (Robert Robertson), 437  
 Obstetrics "new lamps for old" in, 59, 97, 127, 170, 202, 278  
 Obstruction due to adhesions of pelvic colon (Donald M. MacLeod), 867  
 Ocular conditions in influenza, 72  
 Oedema, acute, as a result of a prick by a dog-fish (H. Muir Evans), 287 (O)  
 Oedema, acute, of lungs (Stewart McNaughton), 293—(Herbert H. Brown), 435 Cecil Musgrave), 468—(H. Cameron Kidd), 490—Kenneth Anderson), 571—(William S. Scott), 571—(John Brown), 726—(D. W. Samways), 726  
 Oedema, severe angio-neurotic (Reginald Alderson), 828  
*Oenanthe crocata*. *See* Dropwort, water  
 Officers, disabled, treatment for, 385  
 Officers, invalided (India), assistance for (parliamentary question), 650  
 OGSTON, Sir Alexander: *Reminiscences of Three Campaigns*, rev. 87  
 OHEDAR, Mohendra Nath, obituary notice of, 853  
 Oil of camphor, subcutaneous injections of, 388, 424, 828  
 Old age pensions. *See* Pensions  
 OLDFIELD, Carlton: Hydatid mole, 224  
 OLIVER, Colonel C. Pye, appointed J. P. for county of Kent, 557  
 OLIVER, George Y.: Pregnancy during amenorrhoea, 278  
 O'MEARA, Lieut.-Col. E. J.: *Medical Guide for India and Book of Prescriptions*, rev., 471  
 O'MEARA, William Patrick, obituary notice of, 202  
 Ontario, liquor prescriptions in, 725  
 Operations on pensioners, 482  
 Ophthalmia neonatorum and illegitimate births (Grace H. Giffen Dundas), 436  
 Ophthalmic operations: review of book on, 606—Correspondence on, 660  
 Ophthalmological Congress, the annual, 582, 647, 671  
 Ophthalmological Congress, Oxford, 351  
 Ophthalmological teaching (J. B. Story), 671  
 Ophthalmology, examination in (Ireland), 198  
 Ophthalmology and the public, 647  
 Ophthalmology, teaching of, discussion in *Archives of Ophthalmology* by Vernoeff, Wiener, and Duane, 341  
 Opium acreage in India (parliamentary question), 751  
 Opium question and the peace treaty (leading article), 339  
 Optical instruments, 230  
 Oral osmosis and dental caries. *See* Dental  
 Order of St. John. *See* St. John  
 ORR, Lewis P.: Weight, height, and longevity 678  
 Orthography, insular, 174  
 Orthopaedic cases in Birmingham, difficulty in dealing with (parliamentary question), 650  
 Orthopaedics, military (Major R. W. Sutherland and Captain J. M. Christie), 762. (O)—Review of books on, 831  
 Oriental sore in Mesopotamia (Adam Patrick), 365  
 OSBURN, Cecil A. P.: Forgetting, psychological repression, 169  
 OSLER Sir William: Leading article on, 21—Obituary notice of, 30—Appreciations of, 64  
 Note on, 121—Memorial service, 205—Oxford memorial to, 304, 369, 374, 423—Donation from the Prince of Wales, 423—Eulogium at meeting of Vienna Medical Society, 315—At the Bodleian, 411—Presentation volumes for 70th birthday of, 457, 614—Biography of, 522—Tributes to the memory of, 525—Estate and bequests of, 685  
 Osteopaths to submit to State medical examination in South Carolina, 623  
 O'SULLIVAN, W. J.: A warning, 316  
 Our opportunity, 484, 520

Ovarian cyst. *See* Cyst  
Ovarian insufficiency (Dr. Ashe), 48  
Ovary, hypernephroma of, 133  
OVEREND, Walker: *Radiography of the Chest*,  
rev., 798  
Oxford memorial to Sir W. Osler. *See* Osler  
*Oxford University Press General Catalogue*,  
725  
Oxygen in pulmonary lesions, therapeutic  
value of (Jonathan C. Meakins), 324. (O)  
Oxygen therapy (J. Barcroft), 150—Discussion,  
151

## P.

Paddington Board of Guardians and clinical  
education at the infirmary, 92, 242  
PAGE, Stephen: *Sir Victor Horsley: A Study  
of his Life and Work*, rev., 260  
PAINE, Alexander, awarded Berraute prize,  
457  
PALMER, A. C.: Rupture of vagina, 602  
Palsy, mixed functional and organic, 736  
Pancreas, diagnosis of disease of (Sir Archi-  
bald W. Garrod), 459. (O)—Correspondence  
on, 553  
Pancreatic insufficiency, Loewi's adrenalin  
mydriasis as a sign of (W. L. Cockcroft),  
669 (O)  
Pancreatitis, chronic, 62, 132, 238  
Panel practitioner's action for slander (James  
Wylie), 454  
Panel practitioners and vaccination, 883. *See*  
*also* Insurance  
Pan-Hellenic Congress. *See* Congress  
PANTIN, C. S.: Insular orthography, 174  
Paper shortage in America, 659—Parlia-  
mentary questions, 686  
Paraesthesia, 277  
Paraffin wax for first-aid treatment of burns  
(J. R. Garrod), 539  
Paralysis of left arm and leg (Dr. Spears), 736  
Paralysis, right facial, due to mastoiditis and  
caries, treated by operation (Patel), 224  
Paralysis, physiopathic, of the hand and its  
causation (R. G. Abercrombie), 764. (O)  
Paris: Scheme for the improvement of the  
hospitals, 283—Salaries of professors of the  
Faculty of Medicine raised, 723—Institute of  
Hygiene in, 878. *See also* France  
PARISOT, J.: Tuberculosis mortality in  
Germany and the Rhine provinces, 837  
PARKER, Rushton: Rhinoplasty and cheilo-  
plasty, 12. (O)—Gastric ulcer after gastro-  
jejunostomy, 47

## Parliament, Medical Notes in:

Air raid claims, 808  
Anaesthetics, administration of, 583  
Antityphoid inoculation, 482  
Army estimates, 269  
Army masseuses, 306  
Army Medical Services, 449  
Army mental hospitals, treatment in, 306  
Army nurses, 269  
Army officers in India, 345  
Army, R. A. M. C. officers due for foreign  
service, 720  
Artificial limbs, provision of, 583  
Asylums as military hospitals, 551  
Austrian destitute orphans, hospitality for,  
346  
Bread, 615  
British prisoners still unaccounted for, 650  
British soldiers in France and Germany,  
720  
Budget, 582, 686—Direct taxation, 686  
Blind persons for Advisory Blind Com-  
mittees, 650  
Blind Persons Bill, 751  
Blind, pensions for, 615  
Blind soldiers, 615  
Blind, training of, 345, 413  
Blind Welfare Committee, 879  
Bovine tuberculosis, 414  
Census, 305, 879  
Central Research Institute, Hampstead, 751  
Child labour restrictions, 414  
Clothing for tuberculous patients, 482  
Coal on a medical certificate, 720  
Corporation tax, 650  
Cost of living, 844  
Criminal Law Amendment Bills, 414, 482,  
879  
Dairy inspection, 378  
Dangerous Drugs Bill, 720, 843  
Death rate of illegitimate infants, 378  
Defective children in industrial schools, 269  
Demobilization of medical students, 720  
Dental legislation, proposed, 305  
Dentists Act, revision of, 615  
Dentists Bill, 686, 844  
Direct representative, election to fill  
vacancy, 685, 719  
Disabled ex-service men in training, 650  
Disability partly due to military service,  
345  
Disability pensioners' rights, 482  
Doctors and motor car taxation 685  
Dogs' Protection Bill, 269, 305, 448  
Drugs, dangerous, 650  
Drunkenness statistics, 346  
Dwellings, unoccupied, utilization of, 844  
Eaton Hall Hospital for convalescent sol-  
diers, 686  
Employment of women after childbirth, 879

## Parliament, Medical Notes in (contd.):

Estimates, 413  
Experiments on animals, 305  
Fibroid phthisis, 482  
Food Ministry, 686  
General Medical Council Bill, 843  
Government lymph, 378  
Half-fare vouchers for men under treatment,  
650  
Health of the people, 583  
Health Services Bill, 751  
Homes of recovery, 650  
Hospital provision in the future, 377  
Hospitals in India, 306  
Hospitals of London, financial position of,  
685, 751, 844, 808  
Hospitals for mental cases, 649  
Income tax, 808, 879  
India: Army officers in, 345—Pensions for  
widows, children, and dependants of  
deceased officers, 650—Assistance for in-  
valid officers, 650—Medical conditions of  
service in, 720—Indian services, increase  
of pay, 751  
Indian medical practitioners in East Africa,  
482, 650  
Infectious disease at British ports, 345  
Influenza, precautions against, 305—Deaths,  
514  
Insanitary areas, 844  
INSURANCE ACT:  
Administration, 345  
Amending Bill, 345, 450, 615, 686  
Arbitration, 378  
Expenses, 482  
Finance, 306, 808  
Medical grants under, 269  
Practices, 378  
Right of appeal, 717  
Sanatorium treatment, 650  
Tuberculosis sanatoriums, 719  
Kantara Camp, conditions at, 879  
King's Fund, administration of, 345  
King's Speech, 232  
London hospitals. *See* Hospitals  
"Loss of both legs," 450  
Lunacy statistics, 345  
Massage establishments, 650  
Maternity homes, 305  
Medical assessors, 583  
Medical Boards, remuneration, 450  
Medical conditions of service in India, 720  
Medical degrees in East Africa Protectorate,  
650  
Medical examination for Government em-  
ployment, 583  
Medical fees under the Workmen's Com-  
pensation Act, 879  
Medical men and the motor car tax, 648  
Medical officers in Mesopotamia, 450  
Medical practitioners and motor cars. *See*  
Motor  
Medical Research Committee, expenditure  
of, 482  
Medical service pay, 720  
Medical students, demobilization of, 720  
Medicine and mining administration, 843  
Midwives, 649  
Military service civil liabilities claims, time  
extended, 269  
Milk adulteration, 583  
Milk and Dairies Bill, 686  
Milk and dairies legislation, 269  
Milk from Denmark, 844  
Milk, sweetened condensed, 482, 720, 751  
Mineral waters, taxation of, 615  
Miners' nystagmus, 482  
Ministry of Health: Expenditure, 306, 649—  
Work of, 378—Nursing services, 450—  
Number of persons employed, 720—  
Medical staff of, 808—Administrative  
posts over £500 a year, 808—And utiliza-  
tion of unoccupied dwellings, 844  
Minister of Pensions, new, 514  
Morphine, manufacture of in England, 720  
Morphine, morphine salts, and opium, 345  
Morphine and opium, 751  
Motor car taxation or petrol tax, 686; and  
medical practitioners, 808, 844  
Municipal general hospitals, 583  
National Service Medical Board, 378  
Naval medical establishments and services,  
719  
Naval Medical Service promotions, 345  
Naval officers' income tax, 345  
Naval officers, retired, pensions and income  
tax, 305—Surgeon commanders, 378—  
Surgeon rear-admirals, 615  
Naval prize money, 686  
Navy, sick-berth ratings, 650  
Nerve strain (discharged soldier's pension),  
751  
Neurological treatment of pensioners, 879  
New session, 196  
Nigeria, Northern, service in, 615  
Noise in main thoroughfares, 615  
Nurses, alternative pensions for, 879  
Nurses in Malta, 551  
Officers' pensions. *See* Pensions  
Old age pensions, 844  
Opium and morphine, 751  
Orthopaedic cases in Birmingham, difficulty  
in dealing with, 650  
Paper supplies, 686  
Parliamentary session, 750  
Pensioners refused grants by Civil  
Liabilities Commissioners, 686  
Pensioners, treatment allowances to, 583

## Parliament, Medical Notes in (contd.):

Pensions and pensioners, 808  
PENSIONS:  
Administration, 269  
Discharged soldier with nerve strain, 751  
Medical boards, remuneration, 450  
Medical officers' recommendation, 306, 378  
Medical referees, 269  
Medical staff of, 583  
New Minister, 514  
Number of pensioners, 808; of officers'  
widows, 615; of officers on continued  
service, 345  
Permanent rate, 450  
Pre-war, and the cost of living, 414, 686  
Regional directors for the Ministry, 269  
Retired regular naval and military officers  
employed by, 650  
Revised, 377  
Select Committee, the new, 686  
Treatment allowances to pensioners, 583  
War Pensions Bill, 685  
Poor Law children in receipt of relief, 650  
Poor Law infirmaries, future of, 414  
Professional training of ex-service men, 306  
Quinine, cost of, 306  
Quinine stores, sale of, 686  
Rabies in imported dogs, 808  
Rabies, muzzling order, 414  
Recruits, health conditions of, 720  
Registrar-General's Department, 305  
Retired surgeon commanders. *See* Naval  
officers  
St. Luke's Hospital, Bradford, 551  
Sanatorium treatment, 482—After-care of  
persons who have received sanatorium  
treatment, 650  
Sanatoriums for uncertifiable mental cases,  
414  
Service women's compensation, 306  
"Shell shock," departmental inquiry on,  
648  
Small-pox, 450—In Germany, 346—In East  
London, 378—In Poplar, 414—At Bolton,  
650  
Small pox carriers, vaccinal condition of,  
751  
Soldiers in hospital, number of, 808  
Stamp duties on patent medicines, 482  
State grants to universities, 879  
Surgeons. *See* Naval officers  
Syphilis, treatment of, 346  
Tax: Corporation, 650—"All trading profit,"  
650  
Taxation of invalid chairs (motor driven),  
346  
Territorial army, new instructions, 879  
Territorial and Special Reserve officers  
R. A. M. C. in Mesopotamia, 345  
Theatres, insanitary conditions at, 346  
Travelling facilities for men under treat-  
ment, 615, 720  
Treatment allowances to ex-servite men,  
615, 720  
Tuberculosis, institution accommodation  
for, 450  
Tuberculous ex-service men, 450  
Tuberculous soldiers, treatment of, 720  
Typhoid fever, diagnosis of, 449  
Typhus in Poland and Russia, 751  
Typhus, threatened Western extension of,  
879  
Universities, State grants to, 879  
University of London, proposed new site, 808  
Vaccination: Statistics, 306—Public, cost of,  
615—Value of, 720  
Venereal disease in the British army, 751  
Venereal disease treatment boards, 414  
Ventilation of the House of Commons, 650—  
Veterinary Surgeons Act Amendment Bill,  
414, 844  
War Pensions Bill, 685  
Welsh Board of Health, 345  
Whisky, imported, 650  
Women and Children Employment Bill, 844  
Parliamentary session (leading article), 22  
PARNELL, Surgeon Lieutenant Commander  
R. J. G.: Toxic effects of arseno benzol  
preparations, 51  
PARSONS, William M.: 94th birthday of, 785  
Paste, antivermin, 472  
PATEL, M.: Right facial paralysis due to  
mastoiditis and caries treated by operation,  
224  
Patent medicine labels, revenue from, 589  
Patent medicines, stamp duties on (parlia-  
mentary questions), 482  
"Patent remedies" statistics, 49  
Paternalism or Laissez Faire? (leading  
article), 52. *See also* Public health versus  
the State  
PATERSON, A. Melville: *Anatomy of the Peri-  
pheral Nerves*, rev., 88  
PATERSON, Surgeon-Major-General Henry  
Foljambe, obituary notice of, 724  
PATERSON, William: General practitioner  
and the Health Services Bill, 753  
Pathology, review of books on, 15  
PATON, Noel: *Essentials of Human Physiology*,  
rev., 799  
PATON, Stewart: *Education in War and  
Peace*, rev., 630  
PATRICK, Adam: Multiple Oriental sore, 365  
PATRICK, John: Syme the discoverer of water-  
proofing, 521  
Peace treaty and opium question, 339. *See  
also* Opium

- analysis, 736  
in asseurs, 624  
health versus the  
factor in relief vision.
- PEDERSEN, V. C.: *Textbook of Urology in Men Women, and Children, including Urinary, and Sexual Infections, Urethroscopy, and Cystoscopy*, rev., 225
- Pellagra in a refugee camp (near Port Said), 805
- Pennsylvania: *Tenth Annual Report of the Commissioner of Health for the Commonwealth of*, rev., 851
- Pensioners, operations on, 482—Treatment allowances, 583—Neurological treatment of (parliamentary question), 879
- Pensioners' records, 304
- Pensioners' disability rights (parliamentary question), 482
- Pensioners refused grants by the Civil Liabilities Commissioners (parliamentary question), 686
- Pensions Bill, 685
- Pensions, Greenwich Hospital, 203
- Pensions handbook, 587
- PENSIONS MINISTRY:  
Administration, 269  
Artificial limbs, provisional, 423  
Blind men and pensions, 615  
Disabled officers and nurses, treatment for, 385  
Discharged soldier in institution for nerve strain, 751  
Homes of recovery, 650  
*Local War Pensions Committees Handbook*, 587  
Medical appeal boards for officers, 136  
Medical boards, remuneration of, 450  
Medical officers' salaries, 378  
Medical referees, 269  
Medical staff of, 583  
New Minister of, 514  
New Select Committee on, 686  
Number of pensioners, 808  
Number of retired regular naval and military medical officers employed, 650  
Officers' widows, 615  
Parliamentary questions, 269, 306, 345, 378, 414, 450, 583, 615, 650, 685, 751, 808  
Pensioners' records, 304  
Permanent rate, 450  
Regional directors for, 269  
Remuneration of officers, 306  
Treatment allowances, 583, 615  
War neuroses, 36
- Pensions of officers on continued service (parliamentary question), 345
- Pensions, old age, 844
- Pensions, pre war, and the cost of living (parliamentary question), 414, 686
- Pensions referees, work of a, 132
- Pensions, revised service (parliamentary question), 377
- Pensions of Senior Surgeon Commanders R.N., 269
- Pensions, war, the bill, 685
- Pensions of widows, children, and dependants of deceased officers of the Indian army (parliamentary question), 650
- People, health of (parliamentary question), 583
- Peptone treatment of asthma (A. G. Auld), 567. (O)
- Peps of Medicine (Sir D'Arcy Power), 674
- PEREZ, George V., obituary notice of, 456
- Peritonitis, septic, treatment of (F. J. Steward), 527. (O)—Correspondence on, 656
- Peritonitis, treatment of (Criele), 376
- PETERS, R. H.: Oxygen therapy, 152
- PETERSON, Frederick (and Archibald Church): *Nervous and Mental Diseases*, rev., 471
- Petrol prices, inquiry into, 241, 276, 352—Board of Trade report, 352
- Petroleum jellies, 150
- PRYOR, Albert, awarded Berrault prize, 457
- Phagedaena of Hunterian chancre following treatment with novarsenobenzol (H. H. Hanschell), 498. (O)
- Pharmacopoeia French, additions to, 613
- PHILIP, Sir R. W.: Tuberculosis as affected by the war, 585—Treatment of tuberculosis, 704
- PHILLIPS, E. W. M. Hubert: Myoclonic type of epidemic encephalitis, 634
- PHILLIPS, Miles H.: Adenomyoma of recto-vaginal septum, 224—Large cervical fibroid causing severe haemorrhage, 224—Unilateral pelvic-abdominal pain due to constriction of ureter, 540
- Physical education (leading article), 338
- Physical therapy in the navy (Surgeon Commander A. K. Smith-Shand), 683
- Physical Training, Syllabus of*, 77
- Physically defective. See Mentally defective
- Physicians and surgeons, proposed world congress of, 241
- Physiological cost of muscular work (A. D. Waller), 537. (O)
- Physiological study at the Naples Zoological Station, 268
- Physiology, review of books on, 540, 572, 676, 799
- Physique of British manhood (leading article), 339. See also Census
- PICKARD, Colonel Ransom (and G. W. Lloyd): Early signs of scurvy, 329
- PICKIN, Frederick H.: Prevention of venereal disease, 352
- PIERON: Puerilism of war, 194
- PIKE, Major-General William: Heat hyper-pyrexia, 521
- "Pilgrim's Books," rev., 870
- PILON, H.: *The Coolidge Tube: Its Scientific Applications, Medical, and Industrial*, rev., 770
- Pin in alimentary canal (H. B. Pope), 242—(A. B. Roberts), 424
- PINARD, M.: Quadruplets, 558
- PINKERTON, James, obituary notice of, 313
- PIRIE, Dr.: Atropine in pylorospasm and pyrotic hypertrophy, 551
- "Pities of old surgeons" (leading article), 265
- PITT, G. Newton: Appreciation of Samuel West, 386
- Pituitrin administration followed by spontaneous rupture of uterus (A. W. Bourne), 829
- Placenta praevia with concealed haemorrhage, Caesarean section for (R. Douglas Laurie), 220
- Placenta praevia associated with sclerema neonatorum (A. E. Hodder), 634
- Plague: Case of on ss. *Alps Maru*, 315—In Java, 589, 771—In Egypt, 815—In the United Provinces during 1918-19, 849—At Czernovitz, 855
- Plague and rats, 816, 856
- Plant response, 412, 512, 716
- PLANK, Victor G.: Some manuscript notes by Florence Nightingale, 679
- PLASS, E. D.: Rare diseases, 374
- PLATES, S. G. (and others): Pyrexia of uncertain origin and enteric fever, 373
- Pleura, pneumonic haemorrhagic effusion into (Hubert C. Bristowe), 500
- Pneumococcus in Denmark, investigations on the various kinds of, 557
- Pneumonia, infection in, 816
- Pneumonia, lobar, etiology of (leading article), 875
- Pneumonic haemorrhagic effusion into pleura (Hubert C. Bristowe), 500
- Pneumothorax, artificial, discussion on, 737
- Pneumothorax, artificial, note on, with description of a new needle (Frederic C. Coley), 432. (O)—Correspondence on, 522
- Pneumothorax Therapeutique* to be revived, 472
- Poison of the spiny dog-fish (H. Muir Evans), 287. (O)
- Poisoning by arsenobenzol compounds used in the treatment of syphilis (Alexander G. K. Coulerton), 864. (O)
- Poisoning by arseniuretted hydrogen gas (Thomas H. Wignall), 826. (O)
- Poisoning by potassium bichromate, 691
- Poisoning by potassium nitrate, 885
- Poisoning by veronal in a hysterical person, 691
- Poisoning by water dropwort, case of fatal (T. Harvey Thomson), 795
- Poland, typhus fever in, 122, 614, 751
- Polarized light in detection of suture material embedded in tissues (M. J. Stewart), 663. (O)
- Polio encephalitis, acute, compulsory notification of, 71
- Poliomyelitis, acute, the portal for, 343
- POLLARD, Reginald: Control of influenza, 258
- Polymorphonuclear leucocytes, origin of, 93
- Polypus of stomach (J. Lionel Stretton), 80. (O)
- Poole, Surgeon-major George Kenneth, obituary notice of, 71
- Poor Law children in receipt of institutional relief (parliamentary question), 650
- Poor Law infirmaries and clinical education, 92—Decision of Paddington Guardians, 92
- Poor Law infirmaries, future of (parliamentary question), 414
- Poor Law institutions order, revival of Article 4, 489
- Poor Law medical officers' salaries (Ireland), 234, 519—Meeting at Clones, 519
- POPE, H. B.: Pin in alimentary canal, 242
- Popular Borough Dispensary for Prevention of Consumption: Report, 44
- POKTER, Annie: *Survey of the Intestinal Entozoa, both Protozoal and Helminthic, observed among Natives of Johannesburg from June to November, 1917*, rev., 675
- PORTER, W. G.: *Diseases of the Throat, Nose, and Ear*, rev., 830
- Portsmouth area, venereal disease in (leading article), 680—A correction, 726
- "Post-graduate" word coined in America, 525. See also Premedical
- Post-graduate courses: At Birmingham, 103, 659—At Manchester, 126—At the West London Post-graduate College, 126—In London, 26, 161, 194, 580, 855—In Edinburgh, 349—In Leicester, 518—In Bath (Spa treatment), 589—In Great Britain, 715—In Glasgow, 721
- Post-graduate courses in surgical tuberculosis, 457
- Post-graduate course in venereal disease, 55, 103, 315, 589, 623
- Post-graduate study, aims and methods of (Sir Humphry Rolleston), 77. (O)
- Post-nasal lymphoid and faucial tissue in children, chronic infection of (Percival W. Leathart), 217. (O)
- Potassium bichromate, poisoning by, 691
- Potassium nitrate, poisoning by, 885
- Potatoes, sunburnt, 886
- POTTER, Nathaniel B. (and James C. Wilson): *Internal Medicine, a Work for Practising Physicians in Diagnosis and Treatment*, rev., 676
- POTTS, W. A.: The Birmingham scheme for the mentally defective, 472
- POWELL, Arthur: Professional secrecy, 174
- POWELL, H. E., appointed librarian to Royal Society of Medicine, 623
- POWER, Sir D'Arcy: The Rev. John Ward and Medicine, 674
- Pregnancy during amenorrhoea, 278
- Pregnancy, colour in (J. W. Ballantyne and F. J. Browne), 438
- Pregnancy complicated by fibroids, hysterectomy, recovery (R. de S. Stawell), 498. (O)
- Pregnancy, suppression of urine in (Robert Jardine and A. M. Kennedy), 767
- Pregnancy, toxæmias of (Alec W. Bourne), 727. (O)
- Pregnancy, tumours complicating (Herbert R. Spencer), 179, 246, 320. (O)—Leading article on, 373
- Premedical used in America instead of Post-graduate, 525
- Presentations, 95, 103, 198, 205, 241, 270, 379, 489, 518, 691, 725, 752, 847, 848, 885
- Preventive medicine and public opinion, 646
- Preventive medicine, teaching and research (leading article), 159
- PRICE, Frederick W. (and others): Ten thousand recruits with doubtful heart conditions, 730. (O)
- PRINGLE, Nelson: Early symptoms of cancer of colon, 768
- Prisoners of war, British (parliamentary question), 650
- Professional secrecy, 102, 135, 174—Mr. Justice MacCardie's remarks on, 102, 135
- Professional training of ex-service men. See Ex-service
- Profit tax, all trading (parliamentary question), 650
- Protein shock therapy, 228
- Protein therapy, intravenous (A. E. Gow), 284. (O)—Correspondence on, 380
- Proteins, foreign, susceptibility to (John Freeman), 188<sup>1</sup>
- Pruritus, treatment of, 104
- Prussia: Abolition of compulsory military service, 289—Appointment of a commission to investigate value of Friedmann's remedy for tuberculosis, 315—And Baden decide to create a doctorate in dentistry, 589
- Psoriasis, treatment of, 756
- Psoroptic mange (*Psoroptes communis*, var. *cuniculi*), treatment of, 316, 856
- Psychiatry courses, 268
- Psychiatry, review of books on, 297
- Psychological analysis (T. H. Pear), 736
- Psychological repression. See Forgetting
- Psychology, medical, Maudsley courses in, 376
- Psychology and mental pathology (Pierre Janet), 774, 805
- Psychology, review of books on, 154, 470
- Psycho-neuroses, elements of (Henry Head), 389. (O)—Leading article on, 408
- Psychopathology and dissociation (William Brown), 139. (O)
- Psychosis, hallucinatory (R. Hunter Steen), 363
- Public health in 1918-19, 164
- Public Health Congress, Dutch, 438
- Public health, federal control of (Australia), 881
- Public health versus the State (Bertram G. M. Baskett), 40. (O)—Leading article, 52. Correspondence on, 90, 127, 167, 237, 368, 349, 382, 416, 454, 526, 566, 566
- Public opinion and preventive medicine, 646
- Public Vaccinator's Association. See Association
- Public work, medical fees for (Ireland), 655
- Puerilism of war, 194
- Puerperal fever. See Fever
- Puerperal sepsis (Berry Hart), 296
- Puerperal suppression of urine. See Pregnancy and Urine
- Pulmonary infection, mode of infection in (Thomas Campbell), 185
- Pulmonary lesions, therapeutic value of oxygen in (Jonathan C. Meakins), 324. (O)
- Pustule, malignant, case of in which the incubation period was known (H. J. McCurrah), 828
- Pye's Elementary Bandaging and Surgical Dressings*, rev., 190
- Pyloric obstruction, partial (A. Ernest Maynard), 626. (O)
- Pylorospasm and pyloric hypertrophy, atropine in, 551
- Pyogenic infections, immunized donors in blood transfusion in (Captain H. J. B. Fry), 290. (O)
- Pyrexia of uncertain origin and enteric fever (leading article), 373
- Q.
- Quadruplets, 558
- Queen Alexandra's Fund. See Fund
- Quinine administration, mode of, 28, 60, 163, 454, 756
- Quinine excreted in the faeces, 278
- Quinine, idiosyncrasy to, 258



Quinine, intramuscular injections of, 25, 99  
 Quinine in malaria. *See* Malaria  
 Quinine, price of 124, 173, 306—(Parliamentary questions), 306, 686  
 Quinine stores, sale of (parliamentary question), 686  
 Quinsy, antistreptococcal serum in (Noel C. Forsyth), 361. (O)  
 QUIRKE, Joseph, obituary notice of, 69

## R.

R.A.M.C. as a career, 29. *See also* Army, British  
 Rabies in Holland, 525  
 Rabies in imported dogs (parliamentary question), 808  
 Rabies muzzling order (parliamentary question), 414  
 RACE, Joseph: *Chlorination of Water*, rev. 573  
 Radiography, review of books on, 405, 770, 798  
 Radiology, diploma in, 55—Scientific study of, 341  
 Radiology, war lessons for (C. Thurstan Holland), 353. (O)  
 Radio-therapy in cancer of uterus, 480  
 Radium Institute—Dublin: Annual report, 550—London: Annual report, 640; leading article on, 644—Manchester: Report, 745  
 Radium-therapy (Rupert Hallam), 736  
 Radium-therapy in advanced cancer of cervix, 806, 829, 850. *See also* Cancer  
 Radium treatment in war injuries in the neighbourhood of nerves, effects of (Captain Walter C. Stevenson), 862. (O)  
 Railway Clearing House on increase of rates, 489  
 RAINES, R.: Taxation of motors, 555  
 RAINS, Robert H.: obituary notice of, 884  
 RAISSON, Cyril A.: Ruptured malarial spleen, splenectomy, recovery, 827. (O)  
 RAMSAY, Jeffrey: Blood transfusion in nephritis, 766. (O)  
 Ramsgate, note on, 525  
 RANKEN, David: Labyrinthine reaction of experienced aviators, 860. (O)  
 Rare accidents. *See* Accidents  
 Rarity, 374  
 Rating, local, 277  
 Rats and plague, 816, 856  
 RATTRAY, Lieut.-Col. M. MacGregor, obituary notice of, 70  
 RAW, Nathan, appointed to assist in selection of village settlements for tuberculous men, 423—An attenuated tubercle vaccine, 538. (O)  
 RAYSON, H. Knights: Mode of quinine administration, 454  
 Reading by ear, 692  
 Record tramp? 692, 726. *See also* Tramp  
 Recruits, health conditions of (parliamentary question), 720  
 Red Cross, Armenian, continued appeal, 815  
 Red Cross, British, and Order of St. John: Total amount received by Joint Council, 36  
 Red Cross Committee, International, institutes the Florence Nightingale medal, 786  
 Red Cross Congress at Geneva, 377  
 Red Cross fields of labour, extension of (Australia), 811  
 Red Cross Society of China, 755  
 Red Cross Society, Polish, of Great Britain, 884  
 Red Cross Societies, League of, meeting of General Council, 71, 267, 337, 377, 547—Leading article on, 547  
 REDDING, J. Magnus: *Aids to Electro-therapeutics*, rev., 770  
 REECE, Richard J., appointed senior medical officer to the Ministry of Health, 173  
 REES, Ferdinand: Co-operation between hospitals, 418  
 Reformative treatment of soldier prisoners (Australia), 811  
 Refraction work, cycloplegia in routine (N. Bishop Harman), 598. (O)  
 Registrar—General's department (parliamentary question), 305  
 Registrar General's quarterly return, 457, 752—Annual report, 775, 802, 836, 874. *See also* Vital statistics  
 Regius Chair of Medicine at Oxford, 344  
 REID, G. Archdall: Prevention of venereal disease, 128  
 Renal disease (Charles R. Box), 356. (O)  
 Renal function in nephritis (J. B. Leathes), 403  
 Renal secretion, review of book on, 606  
 RENTON, J. Mill: Note on two cases of horse-shoe kidney, 601  
 Reproductive organs and other glands of internal secretion, functional connexion between (Evelyn E. Hower), 293. (O)  
 Research Institute for Aberdeen, proposed, 438  
 Research Institute, Central, Hampstead (parliamentary question), 751  
 Research Institute for all India, proposed, 344  
 Respiratory movements, antenatal, 877  
 Restaurants, non-alcoholic, increase of in Zurich, 443

## Reviews of Books:

Advice to a Mother (Chavasse), 368  
 Altitude and Health (F. F. Roget), 298  
 American Froise Life-size Anatomical Charts, 16  
 Anaesthesia, Art of (P. J. Flagg), 117  
 Anaesthetics, Handbook of (J. Stuart Ross), 117

## Reviews of Books (continued):

Anatomy, Cunningham's Manual of (edited by Arthur Robinson), 367  
 Animal Parasites and Human Disease (Asa C. Chandler), 118  
 Ante-natal and Post-natal Child Physiology, Pure and Applied, Principles of (W. M. Feldman), 572  
 Asthma (Orville H. Brown), 869  
 Austrian Medicine: Wiener Archiv für Innere Medizin (W. Falta and K. F. Wenckebach), 574  
 Baby, The (E. A. Saunders), 368  
 Baby, Our: For Mothers and Nurses (Mrs. J. Langton Hower), 368  
 Baby Welfare: A Guide to its Acquisition and Maintenance (W. E. Robinson), 368  
 Baby's Food (Isaac A. Abbott), 368  
 Bacteria, Transmutation of (S. Gurney-Dixon), 297  
 Biological Chemistry. *See* Chemistry  
 Blood Pressure: La tension artérielle en clinique. Sa mesure, sa valeur sémiologique (L. Gallavardin), 503  
 Bodily Changes in Pain, Hunger, Fear, and Rage (Walter B. Cannon), 440  
 Breast, The: Its Anomalies, Its Diseases, and their Treatment (John B. Deaver and Joseph McFarland), 675  
 British Journal Photographic Almanac 331  
 British Nurse in Bolshevik Russia (Margaret H. Barber), 799  
 Burdett's Hospitals and Charities, 1919, being the Year Book of Philanthropy and the Hospital Annual (Sir Henry Burdett), 49  
 Cambridge Note Book for Practical Biology [Zoology] (edited by J. Stanley Gardiner and J. A. Borradale), 154  
 Card Test for Colour Blindness (F. W. Edridge-Green), 502  
 Cerebro-cranial Injuries: Traumatismes Cranio-Cérébraux (H. Duret), 830  
 Change of Life, its Difficulties and Dangers (Mary Scharlieb), 708  
 Charaka Club, Proceedings of, vol. v, 1919, 16  
 Chavasse's Advice to a Mother (edited by T. D. Lister), 368  
 Chemistry, Biological, Introduction to the Study of (S. B. Schryver), 154  
 Chemistry, Elementary Colloid, Laboratory Manual of (Emil Hatschek), 543  
 Chemistry, Elementary Practical (J. E. Myers and J. B. Firth), 190  
 Chemistry in Everyday Life (Ellwood Hendrick), 190  
 Chemistry, Legal, and Scientific Criminal Investigation (A. Lucas), 607  
 Chemistry, Industrial, Catalysis of (G. G. Henderson), 154  
 Chemistry: Praktikum der medizinischen Chemie (Sigmund Fränkel), 16  
 Chemistry for Public Health Students (E. Gabriel Jones), 543  
 Child Welfare and the Teachings of Certain Dentists, School Medical Officers, Medical Officers of Health, and other Medical Men (J. Sim Wallace), 607  
 Children's Diseases: Säuglingskrankheiten (Walter Birk), 771  
 Chlorination of Water (Joseph Raco), 573  
 Christianity and Christian Science (M. Carta Sturge), 16  
 Concise Chronicle of Events of the Great War (R. P. P. Rowe), 738  
 Conservancy Manual of (Jahar Lal Das), 471  
 Consumptives, Advice to: Home Treatment, After-Care, and Prevention (Noel Dean Bardswell), 708  
 Coolidge Tube: Its Scientific Applications, Medical and Industrial (H. Pilon), 770  
 Country Cousin at Cambridge (Lilian Clarke), 869  
 Crippen, Hawley Harvey, Trial of, 299  
 Critical Age of Women (Walter M. Gallichan), 708  
 Cystoscopy and Urethroscopy, Treatise on (Georges Luys), 541  
 Dental Caries in Relation to Oral Osmosis (Ragnar Eckerman), 189  
 Diathermy in Medical and Surgical Practice (Claude Faberton), 869  
 Dictionary, Popular Chemical, 226  
 Diet, Effect of on Endurance (Irving Fisher), 16  
 Diet in Health and Disease (Julius Friedewald and John Rührh), 262  
 Diet Lists of the Presbyterian Hospital, New York City (Herbert S. Carter), 16  
 Diphtheria, Measles, Scarlatina: Lectures to Students on (Frank V. G. Scholes), 573  
 Domus Doloris (W. Compton Leith), 639  
 Education in War and Peace (Stewart Paton), 640  
 Electrotherapeutics, Aids to (J. Magnus Redding), 770  
 Electrolysis in Chemical Industry, Applications of (Arthur J. Hale), 154  
 Encyclopaedia Medica, vol. vi, 118  
 Engines of the Human Body (Arthur Keith), 638  
 Entomology for Medical Officers (A. Alcock), 707  
 Ergebnisse der gesamten Medizin (Th. Brugsch), 639  
 Evening Play Centres for Children (Janet Penrose Trevelyan), 262

## Reviews of Books (continued):

Eyes Right (James M. Macphail), 441  
 Face, Plastic Surgery of, 543  
 Feminism and Sex-extinction (Arabella Kenaly), 676  
 Field Ambulance: With the 1st Lowland Field Ambulance in Gallipoli (Colonel G. H. Edington), 503  
 Fly (House), its Life-history and Practical Measures for its Suppression (Major E. E. Austen), 607  
 Food Poisoning and Food Infections (William G. Savage), 225  
 Fortnightly Review for May, 771  
 General Medical Council Minutes, 331  
 Genito-Urinary Surgery, an Outline of (G. G. Smith), 49  
 G.H.Q. [Montreuil-sur-Mer] ("G. S. O."), 117  
 Gonorrhoea and its Complications, Textbook of (Georges Luys), 441  
 Great War and the R.A.M.C. (Lieut.-Colonel F. S. Brereton), 48  
 Gynaecological Surgery, Textbook of (Comyns Berkeley and Victor Bonney), 708  
 Gynaecology in General Practice, Guide to (Comyns Berkeley and Victor Bonney), 770  
 Gynaecology, Handbook of (Bethel Solomon), 15  
 Gynaecology for Nurses and Gynaecological Nursing (Comyns Berkeley), 870  
 Gynaecology, Operative, Atlas of (Barton Cooke Hirst), 15  
 Gynaecology for Students and Practitioners (Thomas Watts Eden and Cuthbert Lockyer), 770  
 Half-past Twelve (George W. Gough), 771  
 Hazell Annual and Almanac for 1920, 49  
 Heat stroke: Il Colpo di Calore (Salvatore Gangli), 89  
 Herman's Difficult Labour (revised by Carlton Oldfield), 606  
 Hernia, Inguinal: the Imperfectly Descended Testicle and Varicocele (Philip Turner), 15  
 Herschell's Textbook of Indigestion (revised by Adolph Abrahams), 573  
 Histology, Aids to (Alexander Goodall), 190  
 Hookworm Disease Controlled by the Intensive Method (H. H. Howard), 542  
 Horsley, Sir Victor: A Study of his Life and Work (Stephen Paget), 260  
 House-fly. *See* Fly  
 Hygiene, Aids to the Mathematics of (R. Bruce Ferguson), 708  
 Hygiene and Sanitation, Military (Colonel Frank R. Keefer), 88  
 Imitation of Christ, "Edith Cavell" edition, 407  
 India, Medical Guide to (Lieut.-Col. E. J. O'Meara), 471  
 Indigestion, Dr. G. Herschell's Textbook of (revised by Adolph Abrahams), 573  
 Industrial Medicine and Surgery (Harry E. Mock), 502  
 Internal Medicine. *See* Medicine  
 Internal Secretions and the Nervous System (M. Laignel-Lavastine), 189  
 Intestinal Entozoa, Survey of, both Protozoal and Helminthic, observed among Natives in Johannesburg from June to November, 1917 (Annie Porter), 675  
 Journal of Neurology and Psycho-pathology, 870  
 Labour, Difficult, Herman's, 606  
 Legal Chemistry. *See* Chemistry  
 Letters of a Widowed Physician to his Daughter, 331  
 Man, Past and Present (A. H. Keane), 330  
 Mauritius, Epidemics of (Daniel E. Anderson), 298  
 Medical Annual for 1920, 738  
 Medical Guide for India and Book of Prescriptions (Lieut.-Col. E. J. O'Meara), 471  
 Medical History, Annals of, vol. ii, No 1 226  
 Medical Society of London: Transactions, vol. xlii, 407  
 Medical Science: Abstracts and Reviews, 88, 262, 331, 503  
 Medicine, Internal: A Work for Practising Physicians on Diagnosis and Treatment (Nathaniel B. Potter and James C. Wilson), 676  
 Military Hygiene and Sanitation, Textbook of Elementary (Frank R. Keefer), 88  
 Military Orthopaedics. *See* Orthopaedics  
 Milk: Le Lait Condensé (P. Lassablière), 88  
 Mind and its Disorders (W. H. B. Stoddart), 297  
 Miner's Nystagmus: La fatigue de l'appareil visuel chez les ouvriers mineurs (M. Stassen), 572  
 Minor Surgery and Bandaging (Heath, Pollard, Davis, and Williams), 226  
 Modern Science and Materialism (H. Elliot), 89  
 Moses, the Founder of Preventive Medicine (Percival Wood), 607  
 Mosquitos, British, Handbook of (W. D. Lang), 737  
 Mothercraft, 368  
 Music, Foundations of (Henry J. Watt), 407  
 Musings of an Idle Man (Col. H. R. Firth), 262  
 Narcotic Drug Problem (Ernest S. Bishop), 573  
 National Union of Manufacturers (incorporated), Descriptive and Classified Directory of Members, 49

**Reviews of Books (continued):**

- Naval Operations (Sir Julian S. Corbett), 637  
Nerves, Pocket Notes on (T. Muirhead Martin), 118  
Nervous and Mental Diseases (Archibald Church and Frederick Peterson), 471  
Nose and Throat Diseases (Herbert Tilley), 830  
Nose, Throat, and Ear Diseases (W. G. Porter), 830  
Nursery School (Margaret Macmillan), 367  
Nursery Schools: A Practical Handbook, 299  
Nutrition of the Fetus (J. Morris Simons), 470  
Obesity: Grandes et Petites Obésités: Cure Radicale (Francis Heckel), 118  
Open-air Schools: L'Ecole de Plein air et L'Ecole au Soleil (P. Armand-Delille and Ph. Wapler), 154  
Ophthalmic Operations, Textbook of (Harold B. Grimsdale and E. Brewerton), 606  
Orthopaedic Treatment of Gunshot Injuries (Leo Mayer), 707  
Orthopaedics, Military Physical: Part I—Gunshot Wound of Nerve (Lieut.-Colonel Arthur Stanley Herbert), 831  
Oscar Montagu, Paranoiac (George Lincoln Walton), 471  
Oto-Rhino-Laryngology (Georges Laurens), 830  
Pennsylvania Tenth Annual Report of Commission of Health for Commonwealth of, 831  
Peripheral Nerves, Anatomy of (A. Melville Paterson), 88  
Peritoneum, The: Vol. I, Structure and Function in Relation to the Principles of Abdominal Surgery: Vol. II, Diseases and their Treatment (Arthur E. Hertzler), 15  
Physical Diagnosis, Principles and Practice of (John C. Da Costa), 331  
Physiology of the Central Nervous System and Special Senses, 870  
Physiology, Human, Essentials of (D. Noël Paton), 799  
Physiology, Human, Principles of (Ernest H. Starling), 676  
Physiology: La Physiologie (Maurice Arthus), 540  
Physiology: Lehrbuch der Physiologie des Menschen (Zuntz and Loewy), 154  
Physiology of Vision (F. W. Edridge-Green), 502  
Post-mortem Manual (Charles R. Box), 470  
Prophylaxia Rural no Estado do Paraná (Heraclides Cesar de Souza Araujo), 738  
Psycho-analysis (Barbara Low), 640  
Psychology and the Day's Work: A Study in the Application of Psychology to Daily Life (Edgar James Swift), 154  
Psychology of the Normal and Subnormal (Henry Herbert Goddard), 470  
Psychologies (Sir Ronald Ross), 262  
Psychology from the Standpoint of a Behaviorist (John B. Watson), 771  
Physiology in Surgical and General Practice, the New (A. Rendle Short), 738  
Pye's Elementary Bandaging and Surgical Dressing (edited by W. Zachary Cope), 190  
Quin, Henry, M.D., President and Fellow of the King and Queen's College of Physicians in Ireland and King's Professor of the Practice of Physic [1718-1791] (T. Percy C. Kirkpatrick), 407  
Radiography of the Chest (Walker Overend), 738  
Radiography in the Examination of the Liver, Gall Bladder, and Bile Ducts (Robert Knox), 405  
Radiology: Elements de radiologie (E. Albert Weil), 770  
Rambling Recollections (A. D. Rockwell), 639  
Recklinghausen's Disease: Il Morbo di Recklinghausen (Nina Samaja), 799  
Reminiscences of Three Campaigns (Sir Alexander Ogston), 87  
Renal Secretion: Physiologie normale et pathologique des reins (L. Amand), 605  
Rest, Suggestion, and other Therapeutic Measures in Nervous and Mental Diseases (Francis X. Dercum), 367  
Road to Endor (Lieut. E. H. Jones), 542  
Salles de Béarn: Quelques précisions rapides sur Salles-de-Béarn et le rôle de ses Eaux en Chirurgie (Dr. David), 831  
Scientific Authority for Total Abstinence, Part II: Alcohol in Relation to the Nervous System, with special reference to its action on the brain (Courtenay C. Weeks), 503  
Scottish Women's Hospitals, History of (edited by Eva Shaw), 153  
Sexual Disabilities of Man, their Treatment and Prevention (Arthur Cooper), 771  
Sexual Diseases: Die Geschlechtskrankheiten (Karl Zeller), 870  
Shell-shock and other Neuropsychiatric Problems (E. E. Southward), 574  
Sight Testing Made Easy (W. Wright Hardwick), 471. See also Vision  
Skin Diseases, Handbook of (Frederick Gardiner), 676  
Small-pox and Vaccination, Half a Century of (John C. McVail), 605  
Spiritism, Modern (A. T. Schofield), 542

**Reviews of Books (continued):**

- Stanford University Medical Publications, 738  
Surgery of Egypt (Frank Cole Madden), 405  
Surgery, Groundwork of (Arthur Cooke), 225  
Surgery, Manual of [Rose and Carless] (Albert Carless), 769  
Surgery, Minor, and Bandaging (Heath, Pollard, Davis and Gwynne Williams), 225  
Surgical Operations: Textbook for Nurses (E. W. Hey Groves), 471  
Surgery of the Temporal Bone (Sir Charles A. Ballance and Charles David Green), 798  
Surgery, Textbook of (W. Q. Wood), 799  
Sussex in Bygone Days (Nathaniel Paine Blaker), 225  
Syphilis, Acquired, Atlas of the Primary and Acquired Lesions of in the Male (Charles F. White and W. Herbert Brown), 541  
Syphilis in Childhood (Leonard Findlay), 366  
Syphilis, Pulmonary: Anatomia patologica y patogenia de la sífilis pulmonar (Pedro I. Elizalde), 869  
Syphilis, the Third Great Plague (John H. Stokes), 504  
Teeth, Microscopic Anatomy of (J. Howard Mummery), 406  
Third Great Plague (John H. Stokes), 504  
Throat and Nose Diseases (Herbert Tilley), 830  
Throat, Nose, and Ear Diseases (W. G. Porter), 830  
Toasts, Rakes, and Cits, 870  
Totem and Taboo, Resemblances between the Psychic Lives of Savages and Neurotics (Sigmund Freud), 502  
Treatment, Physiological Principles in (W. Langdon Brown), 188  
Tropical Diseases, Diagnostics and Treatment of (Rear Admiral E. R. Stitt), 299  
Tuberculosis: Feststellung und Behandlung der Tuberkulösen Infektion mittels antitoxischer Heilkörper (Emanuel Wein), 16  
Turner, Sir William, K.C.B., F.R.S. (A. Logan Turner), 439  
Typhoid Fever (Frederick P. Gay), 88  
Urethra, Male, Diseases of (Irvin S. Koll), 406  
Urethroscopy in the Diagnosis and Treatment of Urethritis, a Contribution to Urethroscopy (Major N. P. L. Lumb), 48  
Urology, Modern (edited by Hugh Cabot), 470  
Urology: Urologisches Praktikum (I. Cohn), 831  
Urology, Textbook of, in Men, Women, and Children, including Urinary and Sexual Infections, Urethroscopy, and Cystoscopy (V. C. Pedersen), 225  
Urology: Essai d'Urologie Pathologique des Pays Chauds (Joseph Khouri), 639  
Venereal Disease, its Prevention, Symptoms, and Treatment (Hugh Wansey Bayly), 639  
Venereal Diseases, Manual of (A. C. Magian), 331  
Venereal Diseases for Students, Manual of (L. W. Harrison), 638  
Venereal Problem (H. T. Burke), 190  
Vision: Card Test for Colour-blindness (F. W. Edridge-Green), 502  
Vision, Physiology of, with special reference to Colour-blindness (F. W. Edridge-Green), 502  
War Diseases and Pensions (R. M. Wilson and W. M. T. Wilson), 504  
War Nursing (Charles Richet), 504  
War Surgery of the Face: Les fractures de guerredu maxillaire inférieur (A. Herpin), 543  
War Surgery of the Face (John B. Roberts), 190  
War Surgery, Manual of (Colonel Seymour Barling and Major J. T. Morrison), 459  
War Surgery, Italian: Ferite del Cavo e dell'Addome in un Ambulanza Chirurgica d'Armata (G. G. Forni), 511  
Whitaker's Almanack for 1920, 49  
Work of V.A.D. London I during the War (edited by Stanley Unwin), 574  
Wounds and Injuries, After-Treatment of (R. C. Elmslie), 863  
X-ray Observations for Foreign Bodies and their Localization (Captain Harold C. Gage), 153  
X-ray Plates and Films, Systematic Development of (Lehman Wentzell), 770  
Yearbook of Pharmacy, 225  
*Revue Générale d'Ophthalmologie*, reappearance of, 253  
*Revue de la Tuberculose*, resumption of publication, 315  
Rewards for medical discovery, 26  
Reynolds and Branson, centenary of, 241  
REYNOLDS, James Emerson, obituary notice of, 387  
REYNOLDS, H. S.: Cold water and antipyretic drugs, 206  
Rhinoplasty and cheiloplasty (Rushton Parker), 12. (O)  
RIBBERT, Hugo: Origin of tumours, 53  
RICE-OLEY, Douglas George, appointed Surgeon-in-Ordinary to Princess Beatrice, 205—Holds a successful mayoral reception, 351  
RICHARDS, Meredith, appointed to Head Quarters of Ministry of Health, 785

- RICHET, Charles: *War Nursing*, rev., 504  
RIGGALL, Robert M.: Forgetting, psychological repression, 131  
Ringworm of nails, simple treatment of (Robert Craik), 185  
Ringworm, treatment of (W. H. Elford), 867  
Riviera, The, 24  
RIVIERE, Olive: Artificial pneumothorax 522  
RIXON, C. H. L.: Forgetting: psychological repression, 201  
ROAF, H. E.: Case of diphtheroid septicaemia, 13  
ROBERTS, A. B.: Pin in alimentary canal, 424  
ROBERTS, Lieut.-Col. Alfred Ernest, obituary notice of, 855  
ROBERTS, John B.: *War Surgery of the Face*, rev., 190  
ROBERTS, Richard Lumley, obituary notice of, 690  
ROBERTSON, Robert: Vaccines in obstetrics and gynaecology, 437  
ROBERTSON, R. K.: Treatment of malaria 199  
ROBINSON, John: Prevention of venereal disease, 273  
ROBINSON, Robert, elected Fellow of Royal Society, 344  
ROBINSON, Sir William Arthur, appointed First Secretary to the Ministry of Health, 582  
ROBINSON, W.: Taxation of motor cars, 576  
ROBINSON, W. E.: *Baby Welfare: a Guide to its Acquisition and Maintenance* rev., 368  
Rockefeller benefactions, 24—New gift, 24—Gift to University College and Hospital, 799, 834, 838—Leading article, 838—Correspondence on, 883  
ROCKWELL, A. D.: *Rambling Recollections*, rev., 639  
ROGERS, Kenneth: Two cases of hemiplegia, 220  
ROGERS, Lieut.-Col. Sir Leonard: Further work on antimony intravenously in filariasis, 596. (O)  
ROGET, F. F.: *Attitude and Health* rev., 298  
ROLLESTON, Sir Humphry: Appreciation of Sir William Osler, 65—Aims and methods of graduate study, 77. (O)—Appendix and gall-bladder dyspepsia, 317. (O)—(and H. J. Waring): Graduate education in the United States, 833  
Roman netting needle for winding a surgical thread, 458  
ROOCROFT, Colonel W. Mitchell, appointed J.P. for County Palatine of Lancaster, 35  
ROOD, Felix: Anaesthesia in throat operations 295  
ROOKE, Margaret: Gonorrhoeal vulvo-vaginitis in a newborn infant, 671  
ROSS, J. Stuart: *Handbook of Anaesthetics*, rev., 117  
ROSS, Sir Ronald: Mode of quinine administration, 130—*Psychologies*, rev., 252—Awards for medical discovery, 486  
ROSS, Brigade Surgeon William George, obituary notice of, 71  
ROTH, Paul Bernard: Fracture dislocations of the ankle, 62  
ROUT, Ettie A.: Prophylaxis and venereal disease amongst the Anzacs, 202  
ROUTH, Amand: Prevention of venereal disease, 98  
ROWE, R. P. P.: *Concise Chronicle of Events of the Great War*, rev., 738  
ROWLANDS, R. P.: Gall stones, 655. (O)  
ROWNTREE, Cecil: Origin of tumours, 132—Spontaneous rupture of subclavian artery, 325  
Royal Faculty of Physicians and Surgeons of Glasgow: Admission of Fellows, 385, 755, 854—Accepts case of surgical instruments used by Lord Lister, 385—Representative on General Medical Council, 588  
Royal Institute of Public Health Congress. See Congress  
Royal Irish Constabulary, medical attendance on, 234  
Royal Mail Steam Packet Company, sailings, 103  
Royal Medical Benevolent Fund. See Fund  
Royal Sanitary Institute Congress, 438  
Rubber Growers' Association offers prizes for new ideas on rubber, 855  
RUHRAH, John (and Julius FRIEDENWALD): *Diet in Health and Disease*, rev., 261  
Rupture of membranes. See Membranes  
RUSS, Sidney, appointed first incumbent of Joel chair of physics, 315  
RUSSELL, Glaiys J. C.: Case of cervical abortion 363  
RUSSELL, Wilfred A.: Prevention of venereal disease, 62  
Russia: Medicine in Bolshevist Russia, 54—Typhus fever in, 751  
RUTHERFORD, A. H.: Ileo-caecal valve, 553  
RUTHERFORD, Sir Ernest, delivers first Mackenzie Davidson Memorial Lecture, 581  
RYLE, Dr.: Oxygen therapy, 152

S.

- St. Andrews Institute for Clinical Research (leading article), 119. See also Clinical  
St. John, Order of, 29, 171  
St. Kilda, influenza in, 654  
SABAWALA, B. P.: Volvulus of the whole jejunum-ileum, 221

**SABERTON, Claude:** *Diathermy in Medical and Surgical Practice*, rev., 869  
 "Safety first," 848  
 Salaries of medical officers of local authorities, 230; of school medical officers, 686, 847  
 Salaries of Poor Law medical officers, 234, 783  
 Sale of Food and Drugs Acts, duties of local authorities under, 173  
 Saline taste in mouth, remedy for, 660  
 Salvarsan, composition of (leading article), 804  
 Salvarsan injections, intracarotid, 162  
 Salvarsanized serum in sleeping sickness (Claude H. Marshall), 702. (O)  
**SAMAJA, Nina:** *Il Morbo di Recklinghausen*, rev., 799  
**SAMWAYS, D. W.:** Chameleon influenza, 424—Acute pulmonary oedema, 726  
 Sanatorium hospital for the well-to-do, 883  
 Sanatorium superintendents decide to form a society, 351  
 Sanatorium treatment (parliamentary question), 482, 650—"After care," 650  
 Sanatoriums for tuberculosis: Proposed for merchant seamen, 229—For uncertifiable mental cases (parliamentary question), 414—Objections to proposed site of the Belfast sanatorium, 617, 783—Correspondence on, 619, 688  
 Sandfly fever. *See* Fever  
 Sanitary science research, Grocers' scholarships for, 489  
 Sarcoma, mammary, in old age (T. C. Graves), 81  
 Sarcoma, spindle-celled (W. W. King), 224  
 SARGENT, Percy: Surgical aspects of spinal tumours, 37. (O)  
**SASUN, Devi Dayal:** trial of and sentence on, 589, 754  
**SAUGMAN:** Thoracoplasty in pulmonary tuberculosis, 717  
**SAUNDERS, E. A.:** *The Baby*, rev., 368  
**SAUNDERS, William:** obituary notice of, 813  
**Saunders, W. B. and Co.:** Catalogue of medical books, 885  
**SAVAGE, William G.:** *Food Poisoning and Food Infections*, rev., 225  
 Sawyer and Co.'s catalogue of medical books, 148  
**SCALES, J. E.:** Note on a tuberculous cow, 400  
 Scandinavian medical journals, 55  
**SCHARLIEB, Mary:** *Change of Life, its Difficulties and Dangers*, rev., 708  
**SCHOFIELD, A. T.:** *Modern Spiritism*, rev., 542  
**SCHOLES, Frank V. G.:** *Lectures to Students on Diphtheria, Measles, Scarlatina*, rev., 573  
 School children, medical inspection and treatment of, Board of Education draft regulations, 481—London County Council's proposals, 483—Fees for treatment of, 883  
 School medical officers' salaries. *See* Salaries  
 Schools, elementary, medical examinations in (parliamentary question), 615  
 Schools, Metropolitan Medical, Conference, 885  
 Schools, secondary and continuation, local authorities to provide for medical inspection of, 241, 591, 855  
**SCHRYVER, A. B.:** *An Introduction to the Study of Biological Chemistry*, rev., 154  
**SCHULLER, Walter Joseph:** obituary notice of, 813  
 Sciatica, treatment of, 856  
 Scientific investigation, State grants for, deputation to Right. Hon. A. J. Balfour, 346—Note on, 342  
 Sclerema neonatorum associated with placenta praevia (A. E. Hodder), 634  
 Scleroderma, remarks on (Frank H. Barendt), 44. (O)  
**Scotland:**  
 Anatomy inspector, 617  
 British Orthopaedic Association, 687  
 Central Midwives Board for Scotland, 379  
 Colliery Surgeons' Committee, 27  
 Craigleith Military Hospital, 270  
 Diamond jubilee of a Scottish practitioner (George Banks), 127  
 East of Scotland Overseas Medical Club, 196  
**EDINBURGH:**  
 Clinical meeting of Edinburgh Branch, 234, 348  
*Edinburgh Medical Journal*, 127  
 Greater Edinburgh, 617  
 "Liberton," 810  
 Lister Memorial Institute, the proposed, 95  
 Morison lectures, 270  
 Neo-natal death rate, 270  
 Royal Infirmary, 234  
 Royal Maternity and Simpson Memorial Hospital, 809  
 Stillbirths rate in, 687  
 University report 27—Extensions at, 617.  
*See also* University  
 General Nursing Council for Scotland, 127, 584, 752  
**GLASGOW:**  
 Limbless hospital (Erskine), 197  
 Post-graduate teaching in, 721  
 Radium in cancer, 483  
 Royal Infirmary, 270  
 Small-pox in, 483, 584, 617, 654, 687, 721, 782, 848, 881  
 Western Infirmary, 58  
 Grein, C. E., death of, 95  
 Highlands and Islands Medical Service, 848

**Scotland (continued):**  
 Hospitals and nursing services, 848, 880  
 Housing, 95  
 Influenza in St. Kilda, 654  
 Lethargic encephalitis, 452  
 Malaria in Scotland, 654  
 Obstruction of a doctor's car, 783  
 Radium in cancer, 483  
 School health administration, 518  
 Scottish Board of Health, 196—Consultative councils, 196, 452—Lethargic encephalitis, 452—School health administration, 518—Village settlements for tuberculous ex-service men, 654—Venereal diseases treatment, 752  
 Scottish Poor Law Medical Officers' Association, 166  
 Sir James Simpson's daughter, 167  
 Small-pox in Scotland, 483, 584, 617, 654, 687, 721, 782, 848, 881  
 Venereal diseases treatment, 752  
 Village settlements for tuberculous ex-service men, 654  
**Scotland, East of, Overseas Medical Club,** 196  
**SCOTT, J. M. Duncan:** Infection in pneumonia, 816  
**SCOTT, Surgeon-Major Ralph Robert:** obituary notice of, 853  
**SCOTT, William S.:** Acute oedema of lungs, 571  
 Scottish Board of Health: General Nursing Council for Scotland, 127, 752—Consultative Councils, 196, 418, 452—Election of officers, 418—Lethargic encephalitis, 452—Administration, 518—Village settlements for tuberculous ex-service men, 654—Malaria in Scotland, 654—Treatment of venereal diseases, 752  
 Scottish colliery surgeons and the Miners' Union, 171, 239  
 Scottish Poor Law Medical Officers' Association, 166 *See also* Association  
*Scottish Women's Hospitals, History of*, rev., 153  
 Scurvy, night blindness in, 526  
 Scurvy, treatment of (W. H. Willcox), 73. (O)  
 Sea sickness, atropine in, 23  
**SECRETAN, W. Bernard:** Proposed taxation of motor cars, 660  
**SEMON, H. C.:** X-ray treatment of acne vulgaris, 700. (O)  
 Senile melancholia, 104  
 Sepsis, puerperal (Berry Hart), 296  
 Septicaemia, diphtheroid (H. E. Roaf), 13  
 Serbia, Ministry of Social Welfare, Belgrade, invites co-operation with Serbian Relief Fund, London, 245  
 Serum, antistreptococcal, in quinsy (Noel C. Forsyth), 361. (O)  
 Serum, monotypical, in treatment of cerebro-spinal fever (W. T. Munro), 430. (O)  
 Service women's compensation (parliamentary question), 306  
**SWARP, A. C.:** Simple paroxysmal tachycardia, 867  
**SHATTOCK, S. G.:** Appendicular concretions, 635  
**SHAW, B. H.:** Significance of acidosis in certain nervous disorders, 695. (O)  
**SHAW, Eva (editor):** *History of the Scottish Women's Hospitals*, rev., 153  
**SHAW, Fletcher:** Advanced cancer of cervix rendered operable by radium therapy, 806, 829  
**SHAW, Lauriston E.:** The machinery of the Association, 63  
**SHAW-MACKENZIE, J. A.:** Copper alanine in inoperable cancer, 174  
**SHRAF, E. W.:** Spontaneous rupture of malarial spleen, 767  
**SHELL, Spencer:** Circumcision, 768  
 Shell shock. *See* Shock  
**SHEPHERD, Flora:** Infant welfare centres, 153  
**SHERA, A. G.:** Local clinical laboratories, 59  
**SHERREN, Major Hugh Godwin:** obituary notice of, 455  
**SHERINGTON, C. S.:** Appreciation of Sir W. Osler, 65  
 Shingles and chicken-pox (A. Ingram Cooke), 468  
 Shingles, varicella, epilepsy, and the weather, 487  
**SHIPLEY, Sir Arthur:** Biting insects and children, 659  
**SHIRLAW, J. Thomson:** New lamps for oild in obstetrics, 170  
 Shock, shell, departmental inquiry on, 648  
 Shock therapy, protein, 228 *See also* Immunity  
**SHORT, A. Rendle:** *The New Physiology in Surgical and General Practice*, rev., 738  
**SHUFFLEBOTHAM, Dr.:** Oxygen therapy, 152  
**SHILLAR, Sir W. C.:** Appreciation of Sir Thomas Fraser, 101  
**SIMPSON, Evelyn Blantyre:** death of, 167  
**SIMPSON, Garry:** Value of calcium lactate, 726  
**SINCLAIR, Major M.:** Treatment of fractures, 198  
**SINGER, Charles:** Magic and medicine, 612—Greek science and modern science, 748  
**SKERRETT, F. B.:** Experimental induction of cancer, 850  
**SKERVINGTON, J.:** Spontaneous rupture of a malarial spleen, 571  
 Skiagraphy of solid viscera (leading article), 511

Skin diseases, review of books on, 676  
 Skull, fractures of in civil life, lessons of the war in treatment of (C. M. Kennedy), 630. (O)  
**SLADDEN, Arthur F.:** Epidemic encephalitis, 722  
 Sleeping sickness in Africa (Captain Basil Spence), 205  
 Sleeping sickness, salvarsanized serum in (Claude H. Marshall), 702. (O)  
**SLEMONS, J. Morris:** *Nutrition of the Fetus*, rev., 470  
 Small-pox: In Germany (parliamentary question), 346—in East London (parliamentary question), 378—in Poplar (parliamentary question), 414—Parliamentary questions on, 346, 378, 414, 450, 650—in Glasgow, 483, 584, 617, 654, 687, 721, 782, 881—in Calcutta, 618—in Bolton (parliamentary question), 650—in Scotland, 654, 687, 721, 782, 785, 848, 881—in London, 660—in Bohemia, 725  
 Small-pox carriers, vaccinal condition of (parliamentary question), 751—Correspondence on, 851  
 Small-pox, its types and prevention (leading article), 778  
 Small-pox and vaccination, review of book on, 605  
**SMETHAM, Alfred:** elected president of Society of Public Analysts, 241  
**SMITH, Edwin:** appointed deputy coroner for Westminster and South-West London District, 137  
**SMITH, Gerard:** Spiritualism and mental disease, 660  
**SMITH, G. G.:** *An Outline of Genito-Urinary Surgery*, rev., 49  
**SMITH, Heywood:** Needle in the alimentary canal, 81  
**SMITH, J. Barker:** Chronic pancreatitis, 62, 238  
**SMITH, J. W.:** Atony and prolapse of the large intestine, 243. (O)  
**SMITH, R. Eccles:** Volvulus of caecum, double obstruction, 289. (O)  
**SMITH'S** Visiting List, 36  
**SMITH-SHAND, Surgeon Commander A. K.:** Physical therapy in the navy, 683  
 Smoke abatement, 303  
 Smoke, the black, tax, 721  
**SMURTHWAITE, H.:** Plea for early treatment of suppurative middle-ear disease, 467. (O)  
**SMYLY, Sir W.:** Schultze's forceps, 48  
**SMYTH, F. C.:** obituary notice of, 884  
**SMYTH, Colonel J.:** The Tagliacotian doctrine, 104, 352  
**SMYTH, J. A.:** Acute suffocative catarrh, 670. (O)  
**SMYTH, Johnson:** Sunburnt potatoes, 886  
**SNODGRASS, William:** Appreciation of John Morton, 523  
 Société Belge de Médecine Mentale, fiftieth anniversary of its foundation, 881  
 Societies, Conjoint Board of Scientific, annual report, 725  
 Societies, medical, international organization of, 266—Correspondence on, 272  
 Society, Assurance Medical: Resolves not to be incorporated with the Royal Society of Medicine, 137—Presidential address, 366  
 Society, Bradford Medico-Chirurgical:—H. H. White: Brief review of venereal diseases, 469—W. Campbell: Diagnosis of syphilis, 469  
 Society, Bristol Medico-Chirurgical:—Carey Coombs: The irritable heart, 404  
 Society, Cardiff Medical:—Professor Emrys-Roberts: The Welsh Mobile Laboratory, 27—Herbert Evans: The urinary system and the *Bacillus coli communis*, 438  
 Society, Child Study:—Sir Arthur Shipley: Biting insects and children, 659  
 Society, Coroners': Annual meeting, 880  
 Society, Edinburgh Obstetrical:—F. J. Browne: Hydatidiform mole, 152—Berry Hart: Puerperal sepsis, 296—Robert Robertson: Value of vaccine treatment in obstetrics and gynaecology, 437—J. W. Ballantyne and F. J. Browne: Colour in pregnancy, 438—Robert Jardine and A. M. Kennedy: Puerperal suppression of urine, 767—Eardley Holland: Fetal intracranial haemorrhage during birth, 868  
 Society, Glasgow Royal Medico-Chirurgical:—Archibald Young: Intussusception of the appendix, 365—W. S. Syme: Malignant disease of larynx, 365—Adam Patrick: Multiple oriental sore, 365—W. F. Somerville: The Bergonié chair, 365—W. H. Brown: Plea for the early recognition of syphilis, 501  
 Society, Harveian: Annual meeting and conversazione, 329—Sir Thomas Horder: Nerve symptoms in acute infections, 404  
 Society, Hunterian:—John Adams: Antenatal and post-natal syphilis, 603  
 Society, Illuminating Engineering, discussion on illumination in mines, 327  
 Society, Italian, of Pediatrics: Next meeting September, 590  
 Society, Jenner, 842  
 Society, Lancaster Gate Medical, to be called in future the Psycho-Neurological Society, q.v.  
 Society, Linnean, to increase its subscription, 454  
 Society, London and Counties Medical Protection: Annual meeting, 475—Deputation re protection of medical officers of venereal disease clinics, 691





STYLER, Assistant Surgeon Henry Thomas, V.C., obituary notice of, 456  
 SYME the discoverer of waterproofing, 521  
 SYME, W. B.: Malignant disease of larynx, 365  
 SYMES, J. O.: Prognosis and treatment of chronic nephritis, 494. (O)  
 SYMONDS, Sir Charters: Surgery of the chest, 401  
 Symptoms, mechanism of (leading article), 547  
 Syphilis, ante-natal and post-natal, 603  
 Syphilis, arseno-benzol compounds in, comparison of two methods of administering (H. E. Gibson), 114. (O)  
 Syphilis, arseno-benzol compounds used in treatment of, causing poisoning, 864. (O)  
 Syphilis, complement fixation test in, 877  
 Syphilis, diagnosis of (W. Campbell), 469  
 Syphilis, early diagnosis of (K. Harrison), 364—Correspondence on, 416, 486, 620, 688, 753  
 Syphilis, early recognition of (W. H. Brown), 501  
 Syphilis, inherited (Frederic H. Haynes), 765  
 Syphilis insontium (J. C. McWalter), 827. (O)  
 Syphilis in Western Australia, number of cases notified, 724  
 Syphilis, review of books on, 366, 541, 869  
 Syphilis, sites of inoculation lesions in, 388  
 Syphilis, treatment of (parliamentary question), 346  
 Syphilis, trifling with, 613

## T.

Tabes, visceral analgesia in, 480  
 Table waters, duty on (parliamentary question), 615  
 Tachycardia, simple paroxysmal, 867  
 Tagliacotian doctrine, 72, 104, 174, 352  
 Taxation, direct, 686. *See also* Budget  
 Taxation of invalid chairs (motor driven) (parliamentary question), 346  
 TAYLOR, Charles Louis, obituary notice of, 33, 101—Book presented to the Library of Royal College of Surgeons in memory of, 346—Elected a member of the French Medical History Society, 387  
 TAYLOR, C. E.: Sandfly fever in Mesopotamia, 620  
 TAYLOR, H. F. Lechmere: An opportunity for invalids, 786  
 TAYLOR, J. A.: Routine treatment of malaria in Uganda, 113. (O)  
 TAYLOR, James: Neurological jottings, 282 (O)  
 TAYLOR, James, presentation to, 849  
 TELLING, W. H. Maxwell: Diverticulitis, 82  
 Territorial force. *See* Army, British  
 Territorial general hospital staffs, 238. *See also* Army, British  
 Tertium quid, 206  
 THANE, Sir George, proposed portrait of, 525  
 Theatres, insanitary conditions at, 346  
 THOMAS, J. Lewis: Clinical centres, 520  
 THOMPSON, G. B.: Circumcision—a barbarous and unnecessary mutilation, 436  
 THOMSON, Lieut.-Col. D. G., presentation to, 95  
 THOMSON, G.: Apparatus for a man without arms, 20  
 THOMSON, J. W.: An ectopic ovarian cyst, 437  
 THOMSON, Sir StClair, awarded the Médaille de la Reconnaissance Française, 691  
 THOMSON, T. Harvey: Fatal poisoning by water dropwort (*Oenanthe crocata*), 795  
 Thoracoplasty in pulmonary tuberculosis, 717  
 THORNE, Charles Augustus, obituary notice of, 690  
 THORPE, Major Llewellyn Lancelot Graeme, obituary notice of, 690  
 Throat, diphtheria bacilli in, 796  
 Throat diseases, review of books on, 830  
 Throat infections, naked-eye diagnosis of (H. Drinkwater), 259  
 Throat operations, anaesthesia, 295  
 Thyroid administration in hibernating dormice, 424  
 Thyroid extract in myxoedema, life-history of the first case of, 359. (O)  
 Thyroid gland, papilliferous carcinoma of (Basil Hughes), 362. (O)—Correspondence on, 454  
 Thyroid operations, anaesthesia for, 635  
 TIBBLES, Sydney: Ocular conditions in influenza, 72  
 Ticks and relapsing fever, 97, 132, 200, 235, 273, 310  
 TILLEY, Herbert: *Diseases of Nose and Throat*, rev., 830  
 Time for speech. *See* Speech  
 Tinea, x rays and chrysophanic acid in treatment of (C. J. Glasson), 219. (O)  
 Tissue, faucial and post-nasal lymphoid, in children, chronic infection of, 217. (O)  
 Toasts, *Rakes and Otis*, rev., 870  
 Tobacco smoke, asphyxia from inhalation of, 692  
 Tobacco smoke, experiments on the effect of on frogs, 178  
 TOMKINS, Harding H.: Circumcision—a barbarous and unnecessary mutilation, 621  
 Tonsil bayonet, 472  
 Tonsils, a plea for, 199, 722, 851  
 TOPLEY, W. W. C. (and others): Pyrexia of uncertain origin and enteric fever, 373  
 Toxio idiopathies (John Freeman), 403  
 Toxicological investigation of acute alcoholism in man, 411  
 Toxin of eclampsia, path of, 469  
 Toxins and antitoxins (leading article), 266  
 Tramp, a record, 692, 726  
 Travancore (South) Medical Mission, report, 822  
 Travelling facilities for men under treatment. *See* Ex-service  
 Treatment allowances. *See* Pensions Ministry  
 Treatment, review of books on, 188  
 TREVEL YAN, Janet Penrose: *Evening Play Centres for Children*, rev., 262  
 TREVES, W. W.: Ticks and relapsing fever, 235  
 Trials, notable, publication of to be resumed, 173, 299  
 TRIBOULET, Henri, obituary notice of, 690  
 TRICOIRE: Epidemic of hemeralopia, 480  
 Trinidad: Report of Tuberculosis Prevention Association, 815  
 Tropical Diseases Bureau, new address, 122  
 Tropical Medicine, Calcutta School of, 550  
 Tropical Medicine, London School of: Pass lists, 34, 659—New building, 54—Post-graduate teaching "elements," 194—Lectures, 717  
 Tropical medicine, review of books on, 639  
 Trophoneurosis, facial, with deformity of the hand (I. H. Lloyd), 735  
 TROTTER, Wilfred (and Charles BOLTON): Jejuno-colic fistula following gastro-jejunosomy, 757. (O)  
 Tubal sterility. *See* Sterility  
 TUBB-THOMAS, J., presentation to, 241  
 Tubercle bacilli, direct cultivation of from tissues (G. Haswell Wilson), 146. (O)  
 Tubercle vaccine, an attenuated, 538. (O)  
 Tuberculosis, abdominal, some clinical types of (K. W. Monsarrat), 5 (O)  
 Tuberculosis as affected by the war, 585  
 Tuberculosis, bovine (parliamentary question), 414  
 Tuberculosis conference in Sweden, 632  
 Tuberculosis, deaths from in Boston in 1919, 213  
 Tuberculosis, epidemiology of (leading article), 444, 478—(William Gordon), 594. (O)  
 Tuberculosis, fibroid, 482  
 Tuberculosis, Friedmann's remedy for, Prussian Committee of inquiry into, 315  
 Tuberculosis in Germany and the Rhine Provinces, 837  
 Tuberculosis, institution accommodation for (parliamentary question), 450  
 Tuberculosis institutions, ventilation and heating of (Leonard Hill), 797  
 Tuberculous prevention: Reports of Poplar Borough Dispensary, 44—Experiment at Framlingham (Massachusetts), 206—Proposed law for in Germany, 315—Appeal from National Association for, 423—in Trinidad, 815  
 Tuberculosis, pulmonary, duration of, 206  
 Tuberculosis, pulmonary, early diagnosis of (Thomas Beattie), 111. (O)—Correspondence on, 753  
 Tuberculosis, pulmonary: Experimental production of, 162; thoracoplasty in, 717; treatment of in private practice, 552  
 Tuberculosis sanatoriums. *See* Sanatoriums  
 Tuberculosis settlements, village: Deputation to Minister of Health, 476—Correspondence on, 552—Circular letter from Scottish Board of Health, 654  
 Tuberculosis, surgical, post-graduate courses in, 457  
 Tuberculosis treatment in London, 782—Report of London Insurance Committee, 782  
 Tuberculosis, treatment of (Sir R. Philip), 704—Discussion, 704  
 Tuberculosis in workshops (A. Trimble), 737  
 Tuberculous cow (J. E. Scales), 400  
 Tuberculous ex-service men (parliamentary question), 450—Discussion on, 737  
 Tuberculous infection, mode of infection in (Thomas Campbell), 185  
 Tuberculous meningitis, with complete recovery (Hugh Barber), 601. (O)  
 Tuberculous patients, clothing for, 482  
 Tuberculous soldiers: In Sydney, 271—Treatment of, 720—Discussion on, 737  
 TUFFIER, Professor: British honour for, 304, 413  
 TUKER, John Batty, obituary notice of, 588  
 Tumour, acoustic, familial form of, 496. (O)  
 Tumour, cerebellar, simulated by cervical caries (Richard R. Armstrong), 499. (O)  
 Tumours complicating pregnancy, labour, and the puerperium (Herbert R. Spencer), 179, 246, 320. (O)—Leading article on, 373  
 Tumours, origin of, 53, 132  
 Tumours of spine, surgical aspects of, 37. (O)  
 TURNBULL, Hubert M.: Report on hypernephroma of kidney, 133  
 TURNER, A. Logan: *Sir William Turner*, rev., 439  
 TURNER, Dawson, reappointed extra medical electrician to Edinburgh Royal Infirmary, 855  
 TURNER, E. B.: Prevention of venereal disease, 99  
 TURNER, G. Grey: Uses of free transplants of the fascia lata in surgery, 79. (O)  
 TURNER, John: Physical basis of mental disorders, 415  
 TURNER, J. G.: Tuberculosis sanatoriums, 619

TURNER, Philip: *Inguinal Hernia; the Imperfectly-descended Testicle and Varicocele*, rev., 15  
 TURNER, Philip D.: Traumatic rupture of pedicle of a subperitoneal fibroid, 829  
 TURNER, Sir William, review of his life, 439  
 Turtle vaccine. *See* Vaccine  
 TWEEDY, Hastings: Tubal sterility, 604—Treatment of ante-partum haemorrhage, 672  
 TWEEDY, Sir John: Rats and plague, 856  
 TYSON, W. J.: Diagnosis and treatment, 619

## U.

Uganda, routine treatment of malaria in (J. A. Taylor), 113. (O)  
 Ulcer, duodenal, acute perforation of: laparotomy: recovery (W. Huntley), 362. (O)  
 Ulcer, duodenal, new views on the pathology, diagnosis, and treatment of (Arthur F. Hurst), 559. (O)—Correspondence on, 655  
 Ulcer, duodenal, and the hypertonic stomach, 655, 688  
 Ulcer, gastric, after gastro-jejunosomy (F. Bolton Carter), 13—(Hushton Parker), 47  
 Ulcer, gastric, new views on the pathology, diagnosis, and treatment of, 559. (O)  
 Ulcer, gastric, ruptured, in an old man: laparotomy: recovery, 218. (O)  
 Ulcers, gastric and pyloric, and hour-glass stomach (Donald M. MacLeod), 115  
 Umberto I prize, 423  
 UNITED STATES OF AMERICA:  
 Alcoholic liquor, supply of to doctors, 623  
 American Hospital in London, progress of, 650, 779  
 American surgeons mentioned in British dispatches, 725  
 Army Medical Museum, 163  
 Athens (New York) requires a permit from local health officer before unlicensed people can sell medicines, etc., 725  
 Carnegie Corporation of New York intends to give five million dollars to the National Academy of Sciences and the National Research Council, 249  
 "Chiropractors, osteopaths, and other healers" required to submit to State medical examination in South Carolina, 623  
 Dogs' bill in America, 512  
 Fees increased in Chicago, 725  
 Food, clothing, and medical aid for the countries devastated by the war, sum required, 46  
 Graduate education in (Sir Humphry Rolleston and H. J. Waring), 833  
*Handicapped Worker*, 829  
 Mary Putnam Jacobi Fellowship, 173, 205  
 Medical ambassadors to, 410  
 Medical education, mission from France and Great Britain to visit America to study system of, 525  
 Medical endowments in, 342  
 Medical schools in, 481  
 New York State Hospital Commission report, 165  
 Paper shortage, 659  
*Pennsylvania, Tenth Annual Report of the Commissioner of Health for the Commonwealth*, of, rev., 831  
 Tuberculosis in Boston, deaths from in 1919, 213  
 Tuberculosis control, experiment in, 206  
 Universities, biochemistry in, 841  
 Universities, state grants to (parliamentary question), 879  
 University of Aberdeen: Appointments, 422—Degrees and pass lists, 312, 488—Honorary degrees, 312  
 University of Adelaide: Appointments, 526  
 University of Birmingham: Post-graduate courses on venereal diseases, 103  
 University of Bristol: Degrees and pass lists, 275  
 University of Brussels: Medals of honour awarded, 786  
 University of Cambridge: Chair of anatomy, 780—Biochemistry endowment, 815—Degrees and pass lists, 171, 203, 275, 312, 384, 422, 658, 724, 785, 854—Diploma of psychological medicine, 102, 814—Diploma in radiology and electrology, 456—Honorary degrees, 854—Honorary Fellows, 384—M.B. examinations, 240—War list, 240  
 University of Cologne: Number of students, 525  
 University of Dublin: Degrees and pass lists, 34, 422, 525—Honorary degrees, 422  
 University of Durham: *Calendar*, rev., 118—Degrees and pass lists, 488, 554  
 University of Edinburgh: Annual report, 27—Degrees and pass lists, 456—Extensions, 617—Honorary degrees, 456—"Liberton," 810—Spring term examinations, 456  
 University of Ghent: Proposed course of psychiatry at, 725  
 University of Glasgow: Accommodation for students, 456—Asher Asher medal awarded, 622—Bellahouston medal awarded, 622—Degrees and pass lists, 488, 622, 724—Faulds Fellowships, 587—History of medicine prize, 587—Honorary degrees, 724—Medical curriculum, 658

University Grants Committee, 53—Total estimate, 608—Memorandum on clinical units in medical schools, 775  
 University of Ireland, the National, roll of honour, 234  
 University of La Plata, riot at, 725  
 University of Leeds, appeal, 613  
 University of Leyden, new buildings open to public, 885  
 University of Liège, proposed course of stomatology at, 725  
 University of Liverpool: Appeal, 446, 725—Degrees and pass lists, 456, 524—Diploma in public health, 102—School of Tropical Medicine, 524  
 University of London: Appointments, 63, 171, 315, 557, 854—Degrees and pass lists, 785—Examiners, 854—Joel bequest, 275, 315—Lectures, 422—Matriculation passes, 387—Meeting of Senate, 63, 275, 422, 557, 854—Military education, 488—M.S. degree, new branches, 524—Physiology, advanced lectures in, 658—Recognition of teachers, 63, 422, 854—Remuneration of professors and teachers, 275—Site offered, 754, 780, 808—Parliamentary questions, 808—University College, 488—University medal, 422—University studentship in physiology, 275—War memorial, 384  
 University of Louvain, reopening of, 557  
 University of Lyons: Appointments, 725  
 University of Manchester: Appeal, 549—Chair of physiology, 203—Degrees and pass lists, 488  
 University of Oxford: Appointments, 203—Biochemistry professorship, 658—Degrees and pass lists, 171, 275, 854—Gifts to, 658—Greek compulsory no longer, 351—Honorary degrees, 854—Philip Francis Walker studentship, 854—Radcliffe travelling fellowship, 488—Regius chair of medicine, 344  
 University of St. Andrews: Degrees and pass lists, 34, 785—Appointments, 658—Honorary degrees, 785  
 University of Sheffield: Clinical demonstrations, 34  
 University of South Australia: Appointments, 27  
 University of Sydney: Roll of honour, 233  
 University of Toronto: Calendar, 44  
 University units: At St. Thomas's, 26—At University College Hospital, 26, 161—At London School of Tropical Medicine, 194—At St. Bartholomew's, 228  
 UNWIN, Stanley (editor): *The Work of V.A.D. London I During the War*, rev., 574  
 Ureter, constriction of (Miles H. Phillips), 540  
 Urethra, review of books on, 406, 541  
 Urethroscopic tube, 771  
 Urinary system and *Bacillus coli communis* (Herbert Evans), 438  
 Urine, puerperal suppression of (Robert Jardine and A. M. Kennedy), 767  
 Urology, review of books on, 225, 470  
 Utero-placental apoplexy. *See* Haemorrhage, accidental  
 Uterus, rupture of (Ford Anderson), 829  
 Uterus, spontaneous rupture of following pituitrin (A. W. Bourne), 829

## V.

Vaccination and panel practitioners, 883  
 Vaccination, public, cost of (parliamentary question), 615  
 Vaccination against small-pox and enteric fever made compulsory in Madrid, 586  
 Vaccination statistics (parliamentary question), 306  
 Vaccination, value of (parliamentary question), 720  
 Vaccine, Friedman's turtle, 94  
 Vaccine, tubercle (Nathan Raw), 538, (O)  
 Vaccines in gynaecology and obstetrics (Robert Robertson), 437  
 Vagasthenia (James A. W. Watts), 669, (O)—Correspondence on, 813  
 Vagina, rupture of (A. C. Palmer), 602  
 VAN BENEDEN of Liège, statue to, 781  
 VANGHETTI, Dr., awarded Riberi prize, 885  
 VAN SOMEREN, E.: Mode of quinine administration, 756  
 Varicella and herpes (Claude Wilson), 828  
 VAZIRIDAR, N. J.: *Physiology of the Central Nervous System and Special Senses*, rev., 870  
 Venereal clinic, the needs of (leading article), 92—Legislation re professional secrecy for medical officers of, 691—Ministry of Health circular, 815  
 Venereal clinics in London, 414  
 Venereal disease (H. H. White), 469  
 Venereal Disease, National Council for Combating, annual meeting, 835  
 Venereal disease in the Portsmouth area (leading article), 680—Correction, 726—In the British army (parliamentary question), 751—In Scotland, treatment of, 752  
 Venereal disease, post-graduate course in, 55, 103, 315, 623. *See also* Post-graduate  
 Venereal disease, prevention of, 28, 61, 98, 128, 166, 241, 273, 311, 352, 623, 686, 725, 836, 837—Meeting at the Mansion House, 241—Deputation, 725—Letter from Society for Prevention of Venereal Disease to county councils, etc., 623—Report by A. Mearns Fraser, 686—

Annual meeting of National Society for Combating, 835—Annual meeting of Society for Prevention of, 836  
 Venereal disease and prophylaxis amongst the Ansacs, 202  
 Venereal disease, review of books on, 190, 331, 638  
 Venereal disease and the State, 155—Policy of the Medical Women's Federation, 155  
 Venereal disease, tests of cure in, memorandum by Ministry of Health, 89—Leading article on, 92  
 Venereal disease treatment boards (parliamentary question), 414  
 Venereal disease, unqualified treatment of, 63  
*Venereal Diseases and their Treatment: How not to do it*, 613  
 Venereal "Professor" sentenced (A. S. Eastburn), 384  
 Ventrifixation before the menopause (George Norman), 571  
 Ventilation and heating of tuberculosis institutions (Leonard Hill), 797  
 VERCO, Sir Joseph, 27  
 Vermin Repression Society. *See* Society  
 Veronal poisoning, case of, 691  
 VERRALL, Sir Jenner: Appreciation of Sir Robert Morant, 421  
 Veterinary Surgeons Act Amendment Bill (parliamentary question), 414, 844  
 VICKERMAN, Colonel P. S.: Eusol in subtertian malaria, 303  
 Vienna: Distress in, 29—Deficiency diseases in (leading article), 477—Medical literature for, 484, 516—Influenza made notifiable, 589—American medical men's donations to Food Fund, 619—Decline of population, 885  
 Village Centres Council: Increased donation from town of Southampton, 264  
 Village tuberculosis settlements. *See* Tuberculosis  
 VILVANDRE, G. E.: X-ray treatment of neoplasms, 215 (O)  
 VINCENT, Thomas Swale, appointed to University chair of physiology at Middlesex Hospital Medical School, 163  
 Viscera, solid, skiagraphy of, 511  
 Visceral analgesia in tabes, 480  
 Vision, relief, an unrecognized factor in, 412  
 Vision, review of books on, 502  
 Vital statistics for England and Wales, 163, 457, 752, 775, 802, 836, 874  
 Voluntary hospitals. *See* Hospitals  
 Volvulus of caecum, double obstruction (R. Eccles Smith), 289, (O)  
 Volvulus of the whole jejunum-ileum (B. P. Habawala), 221  
 Volvulus of stomach (leading article), 548  
 Vulvo-vaginitis in a newborn infant (Margaret Rorke), 671

## W.

WALDO, Dr.: Inquests in the City of London and Southwark, 451  
 Wales: Early care of mental cases in, 348—Medical services in, future provision of, 781, 809—National Medical Schools, inaugural meeting, 616—Nursing organization in, 233—Pathological department opened at Swansea, 722—Welsh Board of Health, 345, 809—Welsh Consultative Council's report, 781, 809—Welsh mobile laboratory, 27  
 WALKER, Kenneth: Sterility in the male, 10, (O)—Letter on, 349  
 WALKER, Norman, appointed Inspector of Anatomy for Scotland, 617  
 WALLACE, G. D. H., called to the Bar, 659  
 WALLACE, J. Sim.: *Child Welfare and the Teachings of certain Dentists, School Medical Officers, Medical Officers of Health, and other Medical Men*, rev., 607  
 WALLER, A. D.: Measurement of emotion, 259—Physiological cost of muscular work, 537, (O)  
 WALTON, George Lincoln: *Oscar Montague, Paranotac*, rev., 471  
 WAPIER, Ph. (and P. ARMAND-DELLILLE): *L'Ecole de Plein air et L'Ecole au Soleil*, rev., 154  
 War Emergency Fund. *See* Fund, Royal Medical Benevolent  
 War, end of. *See* Fee, notification  
 War methods in civil practice (Sir Anthony Bowlby), 86  
 War neuroses, 36  
 War pensions. *See* Pensions  
 War rewards, 723  
 WARD, E.: Cardiac massage in asphyxia neonatorum, 257—Familial form of acoustic tumour, 496, (O)  
 Ward, Rev. John, and medicine (Sir D'Arcy Power), 674  
 WARING, H. J. (and Sir Humphry ROLLESTON): Graduate education in the United States, 833  
 Warning, 316, 624  
 Water charges for car washing, 195  
 Water, cold, and antipyretic drugs, 206  
 Water dropwort. *See* Dropwort  
 WATERHOUSE, Rupert: Meningitis treated by intrathecal injections of the patient's blood serum, 45 (O)  
 Waterproofing, the discoverer of, 521  
 WATSON, Captain Allan, obituary notice of, 314

Watson, Chalmers: Enteroptosis and associated conditions, 797  
 WATSON, C. R., obituary notice of, 239  
 WATSON, H. Ferguson: The mentally defective, 554  
 WATSON, John B.: *Psychology from the Standpoint of the Behaviorist*, rev., 771  
 WATT, Henry J.: *The Foundation of Music*, rev., 407  
 WATTS, James A. W.: Vagasthenia, 669, (O)  
 WAUGH, John, obituary notice of, 102  
 WEBB, G. Lowell: Circumcision, a barbarous and unnecessary mutilation, 620  
 WEBB, Helen: Treatment of mental disorder, 851  
 Week:  
 Académie de Médecine, 161  
 Aeroplane in medical investigation, 230  
 Allbutt, Sir Clifford, 779—Presentation portrait of, 876  
 American hospital in London, 779  
 American medical schools, 481  
 Annual dinner, 645  
 Annual meeting at Cambridge, 340, 410, 511, 551, 579, 612, 645, 681, 714, 840, 843  
 Ante-natal respiratory movements, 877  
 Anthrax infection by brushes, 25, 53  
 Army Medical Department, services of, 807  
 Arterial embolism, operation for, 805  
 Association of Surgeons of Great Britain and Ireland, 445, 714  
 Asylum medical service, improvements in the, 550  
 Atropine in pylorospasm and pyloric hypertrophy, 551  
 Atropine in sea-sickness, 23  
 Auxiliary R.A.M.C. Fund, 685  
 Baths of old London, 807  
 Biochemistry in the universities, 841  
 Birthday honours, 805  
 Bland-sutton, Sir John, 780  
 Blind masseurs, 232  
 British honour for Professor Tuffier, 304  
 British Medical Association lecture, 551  
 British Medical Association, President for 1921, 551  
 British Science Guild, 195  
 Bronze medico-surgical instruments, 268  
 Calcutta School of Tropical Medicine, 550  
 Cambridge, chair of anatomy at, 780  
 Cambridge Natural Science Club, 163  
 Cancer and chrome ulceration, 122  
 Cancer of cervix rendered operable by radium therapy, 806  
 Cavell monument, 413  
 Census, the next, 842  
 Cerebro-spinal fever, treatment of, 750  
 Chadwick lectures and medals, 305  
 Circumlocution office of to-day, 513  
 Clinical teaching "elements" at work, 161, 228. *See also* Post-graduate  
 Cocos butter, 446  
 Complement fixation test in syphilis, 877  
 Coroner on what the soldier said, 716  
 Cremation, progress of, 513  
 Dentists' registration, future of, 549  
 Diplomas in medical radiology and electrology, 55  
 Diplomas, special, 303  
 Dogs' Bill in America, 512  
 Dublin Radium Institute, 550  
 Encephalitis, epidemic, virus of, 646  
 Eusol in subtertian malaria, 303  
 Federations of brain workers, 229  
 Fellowship of Medicine, 779  
 French army medical school, 55  
 French pharmacopoeia, additions to, 613  
 Friedman's turtle vaccine, 94  
 Fundus of the eye after death, 878  
 Gastric pain, origin of, 163  
 Geneva Red Cross Congress, 377  
 Government policy as to municipal general hospitals, 612, 647  
 Greek science and modern science, 748  
 Hard hit, 303  
 Health surveys, 267  
 Hemeralopia, epidemic of, 480  
 Historical surgical instrument cases, 54  
 Home ambulance service, 716  
 Honorary degrees at the annual meeting, 840  
 Hospital survey, 684  
 Hospital units, 161  
 Hours of labour, 446  
 Human metabolism, recent work on, 877  
 Hygiene institute in Paris, 878  
 Hyperglycaemia in mental disorders, 193  
 Hyperpyrexial heat-stroke, nature and treatment of, 343  
 Hypothesis as to the organic basis of functional nervous disease, 231  
 Income tax and service gratuities, 479  
 Indian Medical Service, temporary commissions in, 93  
 Influenza, 163, 232, 267, 342—Experimental production of, 267  
 Influenza, vaccinal prophylaxis of, 23  
 Insanity, prevention and treatment of, 749  
 International good fellowship, 779  
 International Society of Surgery, 305  
 Intracarotid salvarsan injections, 162  
 Intramuscular injections of quinine, 25  
 Jameson, 779  
 Jenner Society, 842  
 Joel chair of physics, 194  
 Johns Hopkins University, first superintendent of, 232  
 League of Red Cross Societies, 267

**Week (continued):**

Leicester University College, 715  
 Leprosy problem in India, 749  
 Lethargic encephalitis, 193, 481, 512  
 Leukaemia, acute, 231  
 Liverpool University, 446  
 Loege, Dr., centenary of, 717  
 London School of Tropical Medicine, 54, 717  
 Lymphocyte, biology of the, 123  
 MacAlister, Sir John, dinner to, 447  
 Mackenzie Davidson Memorial Fund, 341  
 Mackenzie Davidson Memorial Lecture, 581  
 Magic and medicine, 612  
 Makins, Sir George, dinner to, 684  
 Manchester University, 549  
 Manicure infection, 376  
 Maudsley courses in medical psychology, 376  
 Medical ambassadors to United States, 410  
 Medical endowments in America, 342  
 Medical inspection in secondary and continuation schools, 581  
 Medical inspection and treatment of school children, 481  
 Medical Insurance Agency, 842  
 Medical Register, 514, 841—Change of address, 841  
 Medical Research Council, 447  
 Medical sickness assurance, 94  
 Medical societies, international organization of, 266  
 Medical Society of London, 447  
 Medical Students' Register, 581  
 Medical terms in the *New English Dictionary*, 683  
 Medicine in Bolshevik Russia, 54  
 Medicine and government, 52  
 Mercier, Charles, 342  
 Middlesex Hospital, 580  
 Military medicine at the Imperial War Museum, 841  
 Milk for children and mothers, 124  
 Milk, clean, 876  
 Milk, dried, and vitamins, 580  
 Milk sterilized by electricity, 682  
 Morrison of Peking, 781  
 Naval Medical Service, 304  
 Naval medicine at the Imperial War Museum, 807  
 Nerve lesions, voluntary movements in, 684  
 New Year honours, 26  
 No. 14 General Hospital, 195  
 Notification fee and the end of the war, 344  
 Nyctalopia or hemeralopia, 514  
 Ophthalmological Congress, annual, 582  
 Ophthalmology and the public, 647  
 Ophthalmology, teaching of, 340  
 Optical instruments, 230  
 Osler, Sir William, 121—Oxford memorial to, 304, 374—At the Bodleian, 411—Memorial volumes, 614  
 Oxford, Regius chair of medicine at, 344  
 Pellagra in a refugee camp, 805  
 Pensioners, operations on, 482  
 Pensioners' records, 304  
 Pensioners for senior surgeon commanders, R.N., 269  
 Peritonitis, treatment of, 376  
 Physical therapy in the navy, 683  
 Physiological action of intravenous injections, 375  
 Physiological study at the Naples zoological station, 268  
 Plant response, 412, 512, 716  
 Poliomyelitis, acute, the portal for, 343  
 Polymorphonuclear leucocytes, origin of, 93  
 Poor Law infirmaries and clinical education, 92  
 Post-graduate courses, 715  
 Post-graduate course in venereal disease, 55  
 Post-graduate education in London, 580  
 Post-graduate teaching "elements," 161, 194, 228  
 Psychiatry, courses in, 258  
 Psychology and mental pathology, 805  
 Public opinion and preventive medicine, 646  
 Puerilism of war, 194  
 Quinine, price of, 124  
 Radiology, teaching of, 341  
 Radio-therapy in cancer of uterus, 480  
 Rarity, 374  
 Red Cross Societies, League of, 267  
 Regius Chair of Medicine at Oxford, 344  
 Relief vision, an unrecognized factor in, 412  
 Research Defence Society, 121  
 Research institute, proposed all India, 344  
 Retrograde absorption by the kidney, 878  
 Rewards for medical discovery, 26  
 Riviera, the, 24  
 Rockefeller benefactions, 24  
 Royal Academy, 645  
 St. Thomas's Hospital, 123  
 Salaries of medical officers of local authorities, 230  
 Sanatorium for merchant seamen, proposed, 229  
 Scandinavian medical journals, 55  
 Sections. See Annual Meeting

**Week (continued):**

Smoke abatement, 303  
 Stewart prize, 748  
 Syphilis, bridling with, 613  
 Territorial army, 192  
 Thoracoplasty in pulmonary tuberculosis, 717  
 Time for speech, 579  
 Toxicological investigation of acute alcoholism in man, 411  
 Tropical Diseases Bureau, 122  
 Tuberculosis, pulmonary, experimental production of, 162  
 Tumours, origin of, 53  
 Type cultures, national collection of, 682  
 Typhus fever in Poland, 122, 614  
 United States Army Medical Museum, 163  
 University Grants Committee, 53  
 University of Leeds, 613  
 University quarter for London, 780  
 University unit: At St. Thomas's, 26—At University College Hospital, 26  
 Van Beneden of Liège, 781  
 Visceral analgesia in tabes, 480  
 Water charges for car washing, 195  
 Welch, Professor, of Baltimore, 514  
 West London Medico-Chirurgical Society, 647  
 What the soldier said, 716  
 White man in West Africa, 411  
 Yellow fever, etiology of, 375  
 WEEKS, Courtenay C.: *The Scientific Authority for Total Abstinence. Part II: Alcohol in Relation to the Nervous System, with Special Reference to its Action on the Brain*, rev., 503  
 Weight, height, and longevity, 678  
 WEIN, Emanuel: *Feststellung und Behandlung der Tuberkulösen, Infektion mittels Antitoxischer Heilkörper*, rev., 16  
 Weir Mitchell treatment, review of books on, 367  
 WELCH, W. H. (of Baltimore), 70th birthday of, 514  
 Wellcome Bureau of Scientific Research, new address of, 525  
 WELLS, Major Norman Septimus, obituary notice of, 622  
 WELLS, Russell: Medical missions, 623—(and others) Ten thousand recruits with doubtful health conditions, 730. (O)  
 Welsh mobile laboratory. See Laboratory Welsh.  
 WELSH, Sibyll I.: The nervous system and the endocrine glands, 769  
 WENCKEBACH, K. F. (and W. FALTA): *Wiener Archiv für Innere Medizin*, rev., 574  
 WENDELL, Lehman: *Systematic Development of X-ray Plates and Films*, rev., 770  
 WERTHEIM, Ernst, obituary notice of, 455  
 WEST, Samuel, obituary notice of, 385  
 WESTCOTT, Wynn, resignation of, 885  
 Wexford County, meeting of practitioners, 783  
 WHARRY, H. G.: Jamaica as a holiday resort, 590  
 What the soldier said, 716. See also Coroner  
 WHEELER, Sir W. I. de C.: Compression of lower brachial trunk by first dorsal rib, 519—Arthroplasty of knee-joint, 768  
 Whisky, importation of (parliamentary question), 650  
 Whitaker's *Almanack* for 1920, rev., 49  
 WHITE, Charles F. (and W. Herbert Brown): *Atlas of the Primary and Cutaneous Lesions of Acquired Syphilis in the Male*, rev., 541  
 WHITE, H. H.: Brief review of venereal disease, 469  
 WHITE, E. E.: Sterility, 274—Early mental treatment and the rights of the subject, 689  
 WHITEHEAD, Major E. C.: Case of acute yellow atrophy of liver, 400  
 WHITELOCKE, R. H. Anglin: Appendicectomy by a new route, 211, 223. (O)  
 Whooping-cough, investigation into the periodicity of epidemics of by the periodogram (Matthew Young), 366  
 WIGNALL, Thomas H.: Poisoning by arseniuretted hydrogen gas, 826. (O)  
 WILKINSON, A. G.: 85th birthday of and presentation to, 691  
 WILKINSON, W. Camac: Preventive inoculation against influenza, 309—Proposed memorial to Sir Victor Horsley, 350  
 WILKS, Sir Samuel, story of (a soft answer), 72—More stories, 104  
 WILLCOX, W. H.: Mode of quinine administration, 28, 168—Treatment and management of diseases due to deficiency of diet, scurvy and beri-beri, 73. (O) Typhus and relapsing fever in Mesopotamia and Northern Persia, 222—Nature, prevention, and treatment of heat hyperpyrexia, 392. (O)  
 WILLEY, C. H.: Etiology of diverticulitis, 603. (O)  
 WILLIAMS, D. J., obituary notice of, 350  
 WILLIAMS, Evan, obituary notice of, 524

WILLIAMS, H. Lloyd, appointed J.P. for county of Middlesex, 785  
 WILLIAMS, Llewellyn, appointed medical member of the Welsh Board of Health, 785  
 WILLIAMS, Robert Morris, obituary notice of, 387  
 WILLIAMS, R. Stenhouse: Bacteriology of milk, 365—Production of clean milk, 876  
 WILLIAMS, W. J., obituary notice of, 386  
 WILLIAMSON, D. J.: Village tuberculosis settlements, 552  
 WILLIAMSON, Herbert: Blood transfusion before operation, 603  
 WILLIAMSON, R. T.: Dietetic treatment of diabetes mellitus, 399. (O)  
 WILLOT, Joseph, bust erected at Roubaix, 704  
 WILLOUGHBY DE BROKE, Lord: Prevention of venereal disease, 61, 623  
 WILLS, E. F.: Value of legumes in beri-beri, 816  
 WILSON, Claude: Herpes and varicella, 828  
 WILSON, G. Haswell: Direct cultivation of tubercle bacilli from tissues, 146. (O)  
 WILSON, James C. (and Nathaniel B. Porter): *Internal Medicine: a Work for Practising Physicians on Diagnosis and Treatment*, rev., 676  
 WILSON, R. M. (and W. M. T. Wilson): *War Diseases and Pensions*, rev., 504  
 WILSON, W. R.: Appreciation of Alexander Ferguson, 622  
 WILSON-SMITH, W. A.: Arsenic in lethargic encephalitis, 655  
 WINDSOR, C. W., appointed J.P. for County of Cambridge, 885  
 Wines, light and heavy prices, 590  
 Women and Children Employment Bill, 844  
 Women, employment of before and after childbirth (parliamentary question), 879  
 Women Sanitary Inspectors' Association. See Association  
 Wood, Percival: *Moses the Founder of Preventive Medicine*, rev., 607  
 WOOD, W. Q.: *Textbook of Surgery*, rev., 799  
 WOODCOCK, H. M.: Ticks and relapsing fever, 310  
 WOODS, Hugh: Rare accidents presumed due to negligence, 554  
 Worcestershire, whole-time medical appointments in, 880  
 Worcestershire County Council. See Council  
 Workmen's Compensation Act, medical fees under (parliamentary question), 879  
 WORSTER-DRACHT, C., exhibits series of cases, 605  
 WRIGHT, A. J.: Treatment of the running ear, 382  
 WRIGHT, Garnett: Diverticulitis, 86  
 WRIGHT, George Arthur, obituary notice of, 556  
 WRIGHT, J. Aldren: Treatment of psoriasis, 756  
 WÜRDEMANN: Fundus of the eye after death, 878  
 WYLIE, James, his action for slander, 454  
 WYNN, W. H.: Protective inoculation against influenza, 254. (O)

## X.

X-ray prints, exhibition of, 138  
 X-ray treatment of acne vulgaris, 700. (O)  
 X-ray treatment of neoplasms, 215. (O)  
 X-rays and chrysophanic acid in tinea, 219. (O)  
 X rays as immunity-raising agents before and after operation for cancer, 793. (O)  
 X rays, review of books on, 153

## Y.

*Yearbook of Pharmacy*, rev., 226  
 Yellow fever. See Fever  
 YELLOWLEES, Henry: Acute suffocative catarrh, 257  
 YOUNG, Archibald: Intussusception of the appendix, 365—Ischaemic contracture of forearm, 636  
 YOUNG, Matthew: Investigation into the periodicity of epidemics of whooping-cough by means of the periodogram, 365  
 YOUNG, Ruth: *Maternity and Child Welfare*, 483

## Z.

ZEILER, Karl: *Die Geschlechtskrankheiten. Ihr Wesen, Ihre Erkennung und Behandlung*, rev., 870  
 ZUNTZ and LOEWY: *Lehrbuch der Physiologie des Menschen*, rev., 154  
 Zurich, increase of non-alcoholic restaurants in, 443

For List of Illustrations see back of Title.

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# INDEX TO SUPPLEMENT FOR VOLUME I, 1920.

## A

Admiralty surgeons and agents, 65  
 Air Force, Royal, 8, 12, 23, 32, 34, 43, 55, 79, 81, 92, 96, 101, 145, 150, 165, 177, 186, 205  
 Arbitration, some thoughts on (H. B. Brackenbury), 65  
 Arbitration. *See also* Fees, medical, and Insurance  
 Army, British, 7, 11, 23, 28, 32, 34, 43, 55, 63, 79, 84, 91, 95, 101, 145, 149, 154, 165, 177, 186, 193, 205  
 Army, British: Army Medical Service, 7, 11, 23, 32, 34, 43, 55, 84, 95, 101, 145, 154, 165, 177, 186, 193, 205  
 Army, British: British West Indies Regiment, 34  
 Army, British: Exchange, 8, 12  
 Army, British: General Reserve of Officers, 32, 34, 84, 101, 177, 205  
 Army, British: Overseas Contingents, 34, 44, 150, 177, 193  
 Army, British: Queen Mary's Army Auxiliary Corps, 12, 34, 80, 96  
 Army, British: Royal Army Medical Corps, 7, 11, 23, 28, 32, 34, 43, 55, 63, 79, 84, 91, 95, 101, 145, 149, 154, 165, 177, 186, 205—Retired pay, 26  
 Army, British: South African Medical Corps, 34, 44, 150, 177, 193  
 Army, British: Special Reserve of Officers, 8, 12, 24, 34, 43, 55, 79, 92, 96, 97, 101, 145, 150, 177, 194, 205—Note on, 97  
 Army, British: Temporary officers and permanent commissions, R.A.M.C., 57  
 Army, British: Territorial Force, 8, 12, 24, 25, 43, 55, 79, 92, 96, 101, 146, 150, 152, 166, 178, 205—Army Medical Service, 101—Deputation to Director-General, Army Medical Service, 152—Reconstruction of, 25, 61, 93—Royal Army Medical Corps, 8, 12, 24, 43, 79, 92, 96, 102, 146, 166, 178, 205  
 Army, British: Territorial Force Reserve, 12, 55, 79, 92, 96, 102, 146, 150, 178  
 Army, British: Volunteer Force, 8, 12, 24, 34, 55, 64, 79, 92, 96, 146  
 Army, Indian, 12, 24, 34, 55, 96, 146, 150, 177, 193, 205—Temporary commissions, 1—Individual aid, 13—Commuted furlough, 45—Consolidated rates of pay, 97  
 Assistants in panel practice, 180  
 Association, British Medical: Annual meeting at Cambridge (1920), 37, 77, 88, 149, 161, 174, 195, 207—Freemasons at, 37—Programme, 77, 88, 161, 195  
 Association, British Medical: Annual Representative Meeting, Notices of Motion, 143, 164, 180, 188  
 Association, British Medical: What it is and What it Means to its Members, 193  
 Association, British Medical: Its Work and its Critics (Alfred Cox), 1  
 Association, British Medical: Council election, 25, 37, 174, 180, 187, 203—Council meeting, 57—Annual report of Council, 105—Council attendances, 148—Supplementary report of Council, 167—Reasons for recommending an increased subscription, 179  
 Association, British Medical: General expenses, 148  
 Association, British Medical: Lectures, 87  
 Association, British Medical: Membership of, 93, 187  
 Association, British Medical: In Victoria, 9

## B.

Bath Insurance Committee: Resolution re insured persons on lists of deceased practitioners, 36  
 Battle of the lodges in Victoria. *See* Victoria  
 BELL, J. A.: Transfer of practices, 36  
 BENSON, Philip L.: The arbitrators' award, 83  
 BENSTED-SMITH, W. F.: Remuneration, 21  
 Birmingham, meeting of panel practitioners, 54  
 Bournemouth district, increase of fees, 10  
 BRACKENBURY, H. B.: The Panel Conference, 5—Some thoughts on the arbitration, 65—Unity and trade unionism, 89—Proposed testimonial to, 90, 98—Dinner and presentation to, 95 The general practitioner and the health services, 155—As a parliamentary candidate, 187  
 Bradford Division: Dinner and presentation, 149  
 Brighton, trade union question at, 78  
 British Medical Association, its work and its critics (Alfred Cox), 1. *See also* Association

## C.

Caithness and Sutherland Division Annual dinner, 160  
 Carnarvon, North, and Anglesey Division: Dinner and presentation, 81  
 Certifying factory surgeons. *See* Factory  
 Chester, County Palatine of, Local Medical and Panel Committee: Disapproval of remuneration, 27—Terms of service, 27—Goodwill of practice, 27  
 Chichester, trade union question at, 94  
 Cinematograph films, medical, 87  
 CLARKE, Sidney: Limitation of panel lists, 31  
 Cleveland Division: Annual dinner, 29  
 Colonial commissions for venereal propaganda, 173  
 Colonial medical services, 10, 37  
 Conferences of various medical bodies, 39  
 Contract practice in Scotland, development of, 207  
 COUNCIL, GENERAL MEDICAL: Committees, 200  
 Dental Education and Examination Committee, 199  
 Election of Junior Treasurer, 200  
 Executive Committee, 83  
 Midwifery, teaching of practical, 198  
 Penal cases, 200  
 Pharmacopoeia Committee, 199  
 President's address, 183  
 Preventive medicine, teaching of, 189  
 Professional examinations, 199  
 Public Health Committee, 199  
 Reports of committees, 199  
 Students' Registration Committee, 199  
 Vote of thanks, 200  
 Cox, Alfred: The British Medical Association, its work and its critics, 1—The proposed testimonial to Dr. Brackenbury, 98  
 CREW, H. C.: Insurance medical records, 51  
 CROMIE, J.: A call to order, 16  
 Cross, Edward J.: Net capitation fee, 27

## Current Notes

Acknowledgement of assistance, 29  
 Action by Panel Committees and insurance practitioners, 13  
 Admiralty surgeons and agents, 65  
 Annual meeting, Cambridge, 1920, 37  
 Arbitration, 29, 33, 45, 57—On disputed medical charges, 45  
 Assistants in panel practice, 180  
 Association lecture at Edinburgh, 38  
 Association in Victoria, 9  
 Battle of the lodges in Victoria, 33  
 Brackenbury, Dr., as a parliamentary candidate, 187  
 British Medical Association lectures, 86  
 Colonial commissions for venereal disease propaganda, 173  
 Colonial medical services, 10, 37  
 Contract practice in Scotland, development of, 207  
 Council attendances, 148  
 Council election, 25, 37, 174, 180  
 Council meetings, 57  
 Degrees for London medical students, 25  
 Ebbw Vale dispute, 148  
 Fee for administration of gas to pensioners, 26  
 Fee for notification of infectious disease, 1  
 Fees for juvenile club patients, 202  
 Fees for medical examination for life assurance, 1, 45  
 Fees for St. John Ambulance lectures, 38  
 Freemasons at the annual meeting, 37  
 General Association expenses, 148  
 Gratuity, the £60, 46  
 Hospital reconstruction, 81  
 Hospital survey, 147  
 Hospitals and pension work, 187, 201  
 Hospitals, voluntary, State-aided patients in, 207  
 Income tax of civilian doctors on war work, 87  
 Indian Medical Service: Temporary commissions, 1—Commuted furlough, 45  
 Individual advice to members of the Association, 160  
 Individual aid, 13, 151  
 Insurance practitioners' right of appeal to High Court, 159  
 Insurance regulations and remuneration, 9  
 Insurance remuneration, the Government's decision, 13  
 Insurance statistics, 93  
 Library books, surplus, 87  
 Library, hours of opening of, 160  
 Medical cinematograph films, 87, 201  
 Medical fees in criminal courts, 201  
 Medical profession and local elections, 29  
 Medico-Political Committee, work of, 159  
 Membership of the Association, 93, 187  
 Morant, the late Sir Robert, 97  
 Motor cars, preferential delivery, 38, 65—Taxation of, 147, 151, 173  
 "New Poor," 65  
 Newcastle practitioners and a garage fire, 65  
 Nurses' registration, 57  
 Panel Committee expenses, 201  
 Panel lists in Glasgow, 160, 173  
 Part-time prison medical officers, 97  
 Payment of hospital staffs for treatment of disabled men, 45, 148  
 Pensions Boards, appointments, 23



**Current Notes (continued):**

Pensions of medical officers retired from the colonial services, 160  
Pensions Ministry, 65  
Pensions for senior medical officers R.N., 9  
Poor Law hospitals, utilization of, 151  
Postal medical service, 81, 99  
Postal rates, increased, 147  
Praise and blame for Insurance Acts Committee, 29  
R.A.M.C. retired pay, 26  
Representative Body, 13, 23  
Rewards for medical discovery, 37, 57  
Right of appeal against removal from the panel, 93  
Salaries of medical officers of local authorities, 57, 180  
Salaries, minimum, of public medical officers, 159  
Salary of a medical officer of health, 173  
Salvarsan and allied products, control of, 147  
Scientific meetings: North of England Branch, 87  
Senior Surgeon Commanders R.N., 93, 173  
Special intermediate insurance certificate, 99  
Special Reserve, R.A.M.C., 97  
State aided patients in voluntary hospitals, 207  
Statistics of practice, income and expenditure, 201  
Temporary officers and permanent commissions, R.A.M.C., 57  
Territorial Medical Force, reconstruction of, 25, 81, 93  
Visitation of Divisions, 99

**D.**

Darlington Division:—W. E. Hume: Lessons learnt at the Pensions Boards and their bearings on cases of heart trouble met with in private and insurance practices, 99  
DAWSON, H. G. W.: Reduction of panels, 43  
Degrees for London medical students, 25  
Divisions, visitation of, 99  
Dorset, West, Division: Increase in fees, 30  
Dorset and West Hants Branch: Annual meeting, 189—Election of officers, 189—Presidential address, 189  
Dundee Branch: Address by Dr. A. F. Hurst, 26  
DUNLOP, J. Beattie, presentation to, 149

**E.**

EATES, A. R.: Register of insured persons, 145  
Ebbw Vale dispute, 148  
England and Wales, notification statistics in, 76  
Essex, North-East, Division: Annual report of Council, 189—Ethical rules, 189  
Essex, South-West, Division: Annual meeting, 202—Election of officers, 202—Lecture, 202  
Exeter Division: Annual meeting, 100—Election of officers, 100

**F.**

Factory surgeons, certifying: Abolition of the sixpenny fee for examination, 91  
FARMAN, Robert J.: Testimonial to Dr. Brackenbury, 90—Proposal for a complimentary dinner, 144  
Fee for administration of gas to pensioners, 26  
Fee for examination, the sixpenny, abolition of, 91  
Fee for notification of infectious disease, 1  
Fees for juvenile club patients, 202  
Fees, medical, 204  
Fees, medical, arbitration on disputed, 45  
Fees, medical, in criminal courts, 201  
Fees for medical examination for life assurance, 1, 45, 85  
Fees for St. John Ambulance lectures, 38  
FENWICK, Collingwood: The profession and the Government, 10  
FOLEY, C. H. (and others): Irish dispensary doctors and the proposed new motor taxes, 185  
FOTHERGILL, E. Rowland: Council election, 203  
FOX, Adam: New regulations and arbitration, 20—Publicity of inquiries, 76—Appeals to the High Court, 101—Right of appeal to the Courts, 177

**G.**

GARRATT, G. C.: New regulations and arbitration, 20—Statistics of panel attendances in Manchester and Scotland, 42  
General Medical Council. See Council  
General practitioner and the health services (H. B. Brackenbury), 155  
Glasgow Eastern Division: Report on Conference of Panel Committees, 87—Revised ethical rules, 87—Medical club, 87—Annual meeting, 99—Election of officers, 99  
Glasgow, panel lists in, 160, 173  
Glasgow and West of Scotland Branch: Annual meeting, 99—Election of officers, 99—Demonstrations, 99  
GORDON, W. I.: Limitation of lists, 27  
GOULD, H. U.: Remuneration and rural practice, 35  
GRAY, J. Pereira: The Panel Conference, 5, 10  
National insurance, 177  
Gratuity, the £60, 46  
Greenwich and Deptford Division: Annual meeting, 189—Election of officers, 189

**H.**

HAMILTON, James: The capitation fee, 157—Remuneration of medical practitioners, 176  
HARRIS, R. W.: Insurance remuneration, terms of settlement, 15  
Harrow Division: Ethical rules, 4—Increase of medical fees, 4—Fees for life insurance, 4  
HARVEY, P. G.: New regulations in rural practice, 35  
Health Ministry: New medical appointments, 165—National Insurance Act, 1920, 177  
HEDLEY, A. S.: An appreciation and a suggestion, 83  
Herts (West) and Watford Medical Society:—H. B. Brackenbury: The general practitioner and the health services, 155  
HODDER, A. E.: The profession and arbitration, 35  
Hong Kong and China Branch: Annual meeting, 38—Election of officers, 38  
Horsham Division: Annual meeting, 203—Election of officers, 203—Matters referred to Divisions, 203  
Hospital reconstruction, 81  
Hospital survey, 147  
Hospitals and pension work, 187, 201  
Hospitals, Poor Law, utilization of, 151  
Hospitals, voluntary, State aided patients in, 207  
Huddersfield Division: Annual meeting, 203—Election of officers, 203—Matters referred to Divisions, 203

**I.**

Income tax of civilian doctors on war work, 87  
Indian Medical Service. See Army, Indian  
Individual advice to members of the Association, 160  
Individual aid, 13, 151  
Insurance Acts Subcommittee, Scotland: Election of officers, 4—Draft Medical Benefit Regulations (Scotland), 4—Conference with Insurance Committees, 4  
Insurance appeal, a successful, 5—London and Counties Medical Protection Society v. East Sussex Insurance Committee, 5  
INSURANCE, NATIONAL:  
Acknowledgement of assistance, 29  
Advisory Committee re medical records, 74  
Amending Bill, 74, 177  
Appeal, a successful, 5  
Arbitration, 25, 29, 33, 46, 57, 58, 67—Memorandum by Sir Clifford Allbutt, 46—Case presented on behalf of profession by Insurance Acts Committee, 46—Memorandum by Professor A. L. Bowley, 53—Observations on behalf of Government in case presented to arbitrators on behalf of insurance practitioners, 58—Award of the arbitrators, 67  
Board of Arbitrators re remuneration, 25—Terms of reference, 25  
Contributions and benefits, the new, 20—Ministry of Health announcement, 20  
Correspondence, 5, 10, 15, 20, 27, 30, 32, 42, 75, 82, 89, 98, 101, 144, 157, 176, 185  
Insurance terms and conditions, 6  
Intermediate certificate, 205  
Limitation of lists, 42  
Medical records, appointment of Advisory Committee, 74, 83  
Mileage grant, distribution of, 153  
New terms and conditions of service for Scotland. See Scotland  
Panel Committee expenses, 201

**INSURANCE, NATIONAL (continued):**

Panel Committees and insurance practitioners, action by, 13  
Panel lists in Glasgow, 160, 173  
Panel practitioners and vaccination, 204  
Practice income and expenditure, statistics, 201  
Praise and blame for Insurance Acts Committee, 29  
Range of service by panel doctors, 76  
Regulations and remuneration, the new, 9  
Remuneration, the Government's decision, 13, 15, 17—Terms of settlement, 15—The Government's offer, 17—Reply by Insurance Acts Committee, 18—The proposal for arbitration, 19—The settlement, 19—Statement by the Ministry of Health, 20  
Right of appeal against removal from the panel, 93  
Right of appeal to High Court, 159  
Scotland, new terms and conditions of service for, 149  
Scottish Panel Conference, 41  
Special intermediate insurance certificates, 99  
Statistics, 93

Inverness Division: Action in national emergencies, 153—Fees for life insurance, 153—Salaries of prison medical officers, 153—Remuneration in the Highlands, 153  
Irish dispensary doctors and the proposed new motor taxes, 185  
Irish Medical Committee: Irish Public Health Council, 14—Medical treatment for discharged disabled men, 14—Medical certification under the Insurance Act, 14—Medical attendance on the Royal Irish Constabulary, 15—Payments for attendance on post office employees, 15  
Isle of Ely Division: Annual meeting, 202—Election of officers, 202—Ethical rules, 202—Matters referred to Divisions, 202—Increase of fees, 202

**J.**

JONES, W. Black: Insurance remuneration, 15

**K.**

Kensington Division: Increase of fees,

**L.**

Lanarkshire Division: Annual meeting, 202—Election of officers, 202—Matters referred to Divisions, 202  
Lancaster Division: Address by Medical Secretary, 157  
LARKING, Arthur E.: Proposed increase of subscription, 204  
LAWRANCE, M. C. S.: Payments for 1918, 6  
LAWSON, William: Panel practitioners and vaccination, 205  
Leinster Branch: Annual meeting, 202—Election of officers, 202—Presidential address, 202—Pensions for Poor Law medical officers, 202—Fees for medical examination, 202—Salaries of Poor Law medical officers, 202—Salaries of prison medical officers, 202  
Lewes and East Grinstead Division: Annual meeting, 203—Election of officers, 203—Matters referred to Divisions, 203  
Life insurance fees. See Fees  
Library books, surplus, 87  
Library, hours of opening, 160  
Lincoln Division: Address by Dr. Alfred Cox, 157  
London Insurance Committee: Remuneration of medical practitioners, 165—Pharmaceutical service, 165—Limitation of lists, 165  
London Panel Committee: Election of Panel Committee, 165  
London County Panel Committee: Terms of service for 1920, 27—Model scheme of remuneration, 27—Brackenbury testimonial, 91—Administrative expenses, 91—Complaints against practitioners, 91  
London County Insurance Committee: Payment of practitioners, 54—Colindale Hospital, Hendon, 55—Special clinics for venereal disease, 55—The late Sir Robert Moran, 95—Large panel lists, 95—Venereal diseases, 95  
London Panel Committee: Post-graduate instruction, 145  
LYTH, J. C.: Sickness benefit claims, a fallacious index, 75—Medical fees, 204

## M.

Malaya Branch: Annual meeting and dinner, 202—Election of officers, 202—Discussion on eligibility for membership of the Association, 202  
Matters referred to Divisions, 85  
Medical cinematograph films, 87, 201  
Medical discovery, rewards for, 37, 57  
Medical fees. *See* Fees  
Medical officer of health's salary. *See* Salary  
Medical profession and local elections, 29  
Medico-Political Committee, work of, 159  
Middlesex, North, Division: New capitation fee, 57—Middlesex formulary, 57—Fees for life insurance, 57—Lecture, 160  
Midwives, training of, 86  
MORANT, the late Sir Robert, 97  
Motor cars: Preferential delivery, 38, 65—Taxation of, 147, 151, 173, 185  
Motor drivers, standards of vision for, report of committee, 6  
Munster Branch: Annual meeting, 203—Election of officers, 203—Ethical rules, 203

## N.

Navy, Royal, Medical Service of, 7, 11, 23, 28, 32, 34, 43, 55, 63, 79, 84, 91, 95, 101, 145, 149, 154, 165, 186, 193, 205—Pensions for senior medical officers, R.N., 9, 93, 173  
Navy, British: Royal Naval Volunteer Reserve, 149  
"New poor," 65  
Newcastle practitioners and a garage fire, 65  
NOBLE, J. A.: Insurance remuneration, 10  
Norfolk Branch: British Medical Association lecture, 4  
North of England Branch: Post-graduate courses, 82—Scientific meeting, 87  
Notification statistics in England and Wales, 76  
Nurses' Registration, 57—Vote of thanks to British Medical Association, 57

## P.

Panel Committees. *See* Insurance  
PAULLEY, Legge: Testimonial to Dr. Brackenbury, 90  
Payment of hospital staffs for treatment of disabled men, 45, 86, 148  
Pensions Boards, appointments, 23  
Pensions of medical officers retired from the Colonial Services, 160  
Pensions Ministry, 65  
Pensions for senior medical officers R.N., 9  
*See also* Navy  
Perth Branch: Report of Treasurer, 10—Increase of fees, 10  
PIGON, Lionel Jas.: Unity and trade unionism, 89  
PINEO, Ernest D.: Insurance remuneration, 90  
Plymouth Division: Appointment of Representative, 182—Raising of subscription, 182—Right of appeal, 182—School medical officers' fees, 182

Poor Law hospitals utilization of, 151  
Postal Medical Service, 81, 99  
Postal rates, increased, 147  
Presentations, 95, 149  
Preston Division: Annual meeting, 160—Election of officers, 160—Ethical rules, 160—Fees for life insurance, 160—Payment of medical staffs of hospitals, 160—Training of midwives, 160  
PRICE, Geoffrey: Arbitration, 6  
PRING, Frederick Arthur, penal case of, 200  
Prison medical officers, part-time, 97

## Q.

QUINE, R. H.: The regulations in rural practice, 75

## R.

Remuneration. *See* Insurance  
Representative Body, 13, 23  
Rewards for medical discovery. *See* Medical  
RICHMOND, B. A.: Testimonial to Dr. Brackenbury, 90—Proposal for a complimentary dinner, 144  
Rochdale Division: Address by Dr. Cox, 153—Annual meeting, 153—Election of officers, 153  
Rotherham Division: Increase of fees, 26  
RYAN, S. H.: The dispensing fee, 30

## S.

St. Helens Division: Increase of fees, 10—Annual meeting, 182—Election of officers, 182—Annual report of Council, 182  
Salaries of medical officers of local authorities, 57, 180  
Salaries of public medical officers, 159  
Salary of a medical officer of health, 173  
Salisbury Division: Annual meeting, 189—Election of officers, 189—Annual report of Council, 189  
Salvarsan and allied products, control of, 147  
SASUN, Pandit Devi Dayal, penal case of, 200  
Scotland, development of contract practice in, 207  
Scottish Board of Health: Range of services by panel doctors, 76  
Scottish Committee: Salaries of prisons' medical officers and parochial medical officers, 207—Medico-legal fees, 207—Vaccination, 207—Annual meeting of Scottish secretaries, 207  
Scottish Panel Conference, 41  
SHOYER, A. F.: Success and freedom, 76  
South-Eastern Counties Division: Annual meeting, 189—Election of officers, 189—Medical Parliamentary Fund, 189—Annual Report of Council, 189  
SOWDEN, George Smith: Taxation of motor cars, 185

Staffordshire (South) Division: Increase of fees, 38  
State aided patients in voluntary hospitals. *See* Hospitals  
STORMONT, J. Henry: Rural mileage grant, 89  
Subscription, increased, reasons for an, 179—Correspondence on, 204  
Suffolk (South) Division: Increase of fees, 26  
Suffolk (West) Division: Increase of fees, 33—Amalgamation of clubs, 30  
Sussex, East, Medical and Panel Committee: Brackenbury testimonial, 91—Mileage accounts, 91—Record cards, 91

## T.

Tasmanian Branch, appointments in the Commonwealth, 82  
Territorial Force. *See* Army, British  
Trade union question at Chichester, 95  
Trowbridge Division: Raising of fees, 33—Revised ethical rules, 33

## V.

Venereal disease propaganda, Colonial commissions for, 175  
Victoria, battle of the lodges in, 23  
Victorian Branch: Annual report, 9  
Vision of motor drivers, 6. *See also* Motor

## W.

Wakefield, Pontefract and Castleford Division: Annual meeting, 203—Election of officers, 203—Annual report of Council, 203  
Wales (South-West) Division: General meeting of profession re Insurance Acts, 26  
Warrington Division: Annual meeting, 182—Election of officers, 182  
Westminster Division: Ethical rules, 203—Increase of fees, 203—Subscriptions, 203  
Willesden Division: Increase of fees, 78—G. F. Buchan: Municipal hospitals and clinics, 78—Meeting of members and non-members, 100—Policy of the Association, 100  
WILLIAMS-FREEMAN, J. P.: Small urban areas and the mileage fund, 75  
Wiltshire Branch: General meeting, 33—Raising of fees, 33, 182—Need for maternity hospitals, 33  
Winchester Division: Increase of fees, 100  
WOOD, Alexander John: Penal case of, 200  
Worcester Division: Special meeting, 26—Address by Medical Secretary, 26—Dinner to colleagues who had served with the Forces, 78  
WRIGHT, Thomas: Insurance remuneration, 30  
WRIGHT, T. Stretchill: The capitation fee, 6—Proposal for a complimentary dinner, 158



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# INDEX TO THE EPITOME FOR VOLUME I, 1920.

READERS in search of a particular subject will find it useful to bear in mind that the references are in several cases distributed under two or more separate but nearly synonymous headings—such, for instance, as Brain and Cerebral; Heart and Cardiac; Liver and Hepatic; Renal and Kidney; Cancer and Carcinoma, Epithelioma, Malignant Disease, New Growth, Sarcoma, etc.; Child and Infant; Bronchocele, Goitre, and Thyroid; Diabetes, Glycosuria and Sugar; Eye, Ophthalmia, and Vision, etc.

*The Figures in this Index refer to the Number of the Paragraph, NOT the Page.*

## A.

Abdomen, palpation of, 271  
Abdomen, radiography of after the introduction of oxygen into the peritoneal cavity, 641  
Abdominal aorta, spontaneous rupture of, 369, 488  
Abdominal disease, tender spots at root of neck in, 439  
Abdominal enlargement in war prisoners, 494  
Abdominal palpation, 69  
Abdominal pregnancy. *See* Pregnancy  
Abdominal symptoms simulated by encephalitis lethargica, 460  
ABOULANAGE, G.: Case of circumscribed traumatic serous peritonitis, 122  
ABRAND, H.: Primary or true rhinoliths, 668  
Abscess, cerebellar, of otitic origin with complete homolateral hemiparesis, 42  
Abscess, cerebral, metastatic solitary, 427  
Abscess, fixation, in treatment of influenza, 631  
Abscess, fixation, typhoid bacilli in, 662  
Abscess, hepatic, treatment of, 659  
Abscess of lungs in infants and children, 358  
Abscess, perinephritic, x-ray sign of, 384  
Abscess of prostate, 504  
Abscess of tonsil, acute mixed leukaemia, leukaemic tubal infiltration, 717  
Abscesses caused by typhoid bacilli, 720  
Acetone bodies, elimination of during infectious fevers, 436  
Acetonuria in influenza, 750  
Achyilia and cholelithiasis, 411  
Achyilia, chronic gastric, etiology of, 615  
Acids, carboxylic organic, 27  
ACOSTA, A. B.: Dakin's fluid in chronic suppurative otitis, 413  
Acrodermatitis, continuous suppurative, 622  
Addison's disease, lymphatic foci in the thyroid in, 203  
Adenoids and tonsils in children, 264  
Adenomyoma invading the ileum, 387  
Adrenal rests in hernial sacs, 92  
Adrenalin hyperglycaemia, influence of ovaries on, 719  
Adrenalin in diagnosis of latent malaria, 234  
Adrenalin in old age, action of, 371  
Adrenalin in spastic bronchitis, 114  
AEM: Prodromal sign of tuberculosis, 561  
AIMES, A.: Conservative treatment of sarcomata of long bones, 703  
Air, expired, temperature of in febrile cases, 366  
Air, hot, in treatment of naevi, 607  
Air passages, foreign bodies in, 381  
AKERMAN, J.: Kondoleon's operation for elephantiasis, 274  
ALBECK: Retention of placenta by Bandl's ring, 21  
ALBRE, F. H.: Studies in bone growth, 197, 412  
Albuminuria in tuberculosis, 497  
Alcohol in nerve regeneration, 584  
ALEXANDER, G.: Treatment of laryngeal carcinoma by radium and x rays, 226  
ALEXANDERSCO-DERSCA: Intravenous injections of camphorated oil, 139  
ALIVISATOS, A.: Case of emetine idiosyncrasy, 185  
ALLEN: Renal glycosuria, 49  
Alopecia, influenzal, pathogenesis of, 267  
ALS, E.: Artificial pneumothorax with a pleural effusion on the other side, 213  
Alum in treatment of whooping-cough, 80  
AMELUNG, W.: Influenza and pulmonary tuberculosis, 468  
Amenorrhoea, war, 254, 255

Amoebiasis, hyperacute intestinal, 6  
Anaemia, autohaemotherapy in, 627  
Anaemia, pernicious, a long remission in, 3—  
In a child, 342—Transfusion of blood in, 630  
Anaesthesia, spinal, in pelvic operations, 682  
Anaesthetics, local, 11  
Anaphylactic deaths in asthmatics, 140  
Anaphylactic nature of asthma, 549  
Anaphylaxis, danger of with antitoxic serums, 73  
Anaphylaxis and arsenobenzol, 432  
Anatomy of snapping hip, 418  
ANDRE, P.: Sarcoma of scrotum and spermatic cord, 62  
Aneurysm, aortic, pleuritic type of, 525  
Aneurysm, aortic, rupture of into superior vena cava, 238  
Aneurysm of liver, 117  
ANGELETTI: Humerus varus, 219  
Angina pectoris and syphilis, 163  
Angina, Vincent's, simulating tonsillar chancre, 316—Treated by chromic acid, 671  
Angioma of stomach, 363  
Angio-melano-sarcoma of leg, 181  
Angio neurotic oedema, 210  
Ankylosis, bony, after war wounds, 118  
Ano-rectal syphiloma, pathogenesis of the so-called, 583  
Antigens in the Wassermann reaction. *See* Wassermann  
Antidiphtherial horse serum. *See* Serum  
Antitoxic chemotherapy, the phenololipoids, 127  
Antitoxic serums, danger of anaphylaxis with, 73  
Aorta, abdominal, spontaneous rupture of, 369, 488  
Aorta, hypertrophic lymphangioma of, 99  
Aorta, neo-salvarsan in syphilitic disease of, 317  
Aortic aneurysm. *See* Aneurysm  
Aortic compression for haemorrhage, 389  
Aortic disease, 434  
Aortic incompetence, double crural murmur in, 562  
Aortic incompetence, functional, 563  
APERLO: Necrosis of clavicle, 192  
APERT: Acute aseptic purulent arthritis, 32  
Aplasia of internal genitals, 280  
Appendicitis, acute, with ileo-caecal ectopia, 471  
Appendicitis, acute, indications for operation in, 196  
Appendicitis, chronic, due to small shot, 325  
Appendicitis, oxyuris, 302  
Appendicitis simulated by mesenteric or retro peritoneal suppuration, 147  
Appendicitis simulating strangulated hernia, 191  
Appendicitis, torsion of omentum diagnosed as, 193  
Appendix, cancer of, 276  
Appendix, the "normal," 320  
Appendix, tuberculosis of, 536  
ARANGELL, U.: Perforation of typhoid ulcers, 323  
ARLOING: Vital staining of diphtheria bacilli, 394  
ARONSON: Cardiospasm, 732  
ARRIGO, V.: Hypertrophic lymphangioma of the aorta, 99  
ARROWSMITH: Oesophageal diverticulum, 503  
Arsenobenzol and anaphylaxis, 432  
Arsenobenzol and jaundice, 112  
Arterial disease in syphilis and tobacco poisoning, 262  
Artery, pulmonary, bullet in, 675  
Arthritis, acute aseptic purulent, 32

Arthritis deformans in children, etiology of, 378  
Arthritis diagnosed by microscopical examination of a regional lymphatic gland, 537  
Arthritis, foreign body, of twenty years' standing, 17  
Arthritis, gonorrhoeal, arthrotomy in, 70  
Arthritis, multiple, with acute meningococcal meningitis, 567  
Arthritis, rheumatoid, treated by autogenous vaccine prepared from the endometrium, 731  
Arthrotomy in gonorrhoeal arthritis, 70  
Artificial pneumothorax with a pleural effusion on the other side, 213  
Artificial pneumothorax in pulmonary tuberculosis, 18  
Ascaris lumbricoides in the Fallopian tube, 680  
Asthenic tuberculosis, 560  
Asthma, anaphylactic nature of, 549  
Asthma, protein sensitization in, 585  
Asthmatics, anaphylactic deaths in, 140  
Astragalus, fracture-dislocations of, 189  
ATHIAS: Autohaemotherapy in anaemia, 627  
ATV: Exophthalmic goitre, 56  
Auricular fibrillation, action of digitalis in, 368  
Auriculo-ventricular heart-block in children, 566  
Autogenous serum, treatment of secondary meningitis by intraspinal injection of, 623  
Autogenous vaccine prepared from the endometrium in treatment of rheumatoid arthritis, 731  
Autohaemotherapy in anaemia, 627  
Auto-serotherapy in cancer, 327  
Avian leukaemia, 747  
AYER: Encephalitis lethargica, 1  
AZZI, A.: Causes of oedema, 285—Temperature of expired air in febrile patients, 366

## B.

BABCOCK, R. H.: Chronic cholecystitis and heart disease, 292  
BABER, H. M.: Incidence of protein sensitization in the normal child, 487  
B. coli, enumeration of in water, 287  
Bacteria of conjunctiva in dacryocystitis, 335  
BAESLACK: Diagnosis of primary syphilis by culture, 311  
BAILLON: Influence of ovaries on adrenalin hyperglycaemia, 719  
BANG, O.: Transfusion of blood in pernicious anaemia, 630—Convalescent serum in treatment of influenzal pneumonia, 658  
Banti's disease, Tansini's operation for, 249. *See also* Splenectomy  
BAR: Diagnosis of pregnancy, 229  
BARÁNY, E.: Primary suture in brain wounds, 447  
BARBIER: Gastric ulcer in pulmonary tuberculosis, 344  
BARD: Heat sensation, 79  
BARFOD, H. P. B.: Alum in whooping-cough, 80  
BARJON, F.: Atony of the digestive tract in nervous individuals, 437  
BARKER: Chemical urethritis, 299  
BAROLIN: Haemorrhage from the ovaries, 708  
BARTHELEMY: Nerve regeneration after impregnation with alcohol, 584  
Basophil cell, the haemic, 337  
Baths, hot, in treatment of gonorrhoea, 360

- BAUD: Radiography of abdomen after introduction of oxygen into the peritoneal cavity, 641
- BAUZA: Froin's syndrome in tuberculous meningitis, 5
- BAYLISS: Toxicity of haemolysed blood, 392
- BAYNE-JONES, S.: Hypertrophic osteoarthropathy in carcinoma of pleura, 490
- Beef-bone splints. *See* Splints
- BEILBY: Surgical treatment of goitre, 575
- BELFIELD: Vasostomy in gonorrhoea, 667
- BELGRANO, C. R.: Vaginal myomectomy, 515
- BENEDICT: Intracapsular extraction of cataract, 124
- BENEKE, R.: Arterial disease in syphilis and tobacco poisoning, 262
- BENEDETTI, U.: Annular pancreas, 603
- BENLIANS: An inagglutinable form of Shiga's bacillus, 361
- BENNETT: Form of war haematuria, 429
- BERGHOF: After-effects of gassing on the respiratory tract, 137
- BERNARD, R.: Multiple chancres, 442
- BERSON: Varices of upper limbs, 635
- BERTOIN: Spontaneous rupture of abdominal aorta, 369
- BERTOLINI: Clinical notes on influenza in 1918-19, 698
- BERTOYE: Chlorotic form of trichoccephalitis, 265
- BETTI, L.: Bacteria of conjunctiva in dacryocystitis, 335
- BEUF: Magnesium sulphate in tetanus, 699
- BIANCHI: Trench nephritis, 158
- Biceps ruptured by direct force, 173
- BIE, V.: Prognosis in influenzal pneumonia, 340
- BIFFIS: Haemolytic familial splenomegaly, 653
- BIGNAMI, A.: Cholesterin in a pleural effusion, 23
- Bilharziosis, urinary, treated by emetine hydrochloride, 211, 499
- Biliary retention, dissociated, 406
- BINET: Practical applications of ocular compression, 57—Experimental haemorrhagic pancreatitis, 617
- BINET, L.: Resistance to poisons according to age, 77
- BING, H. I.: Polycythaemia in juxta-pyloric ulcer, 625
- BISGAARD, A.: Parathyroid epilepsy, 484
- BITTER: Botulism, 395
- BLAC Y FORTACIN: Surgical complications of influenza in children, 273
- Blackwater fever. *See* Fever
- Bladder, gunshot wounds of, 576
- Bladder, hour-glasses, 251
- Bladder injuries in war, 143
- BLAKELY: Rupture of uterus with peritoneal encystment, 150
- BLAND, Brooke: Vulvo-vaginitis of children, 514
- BLEGVAD, N. R.: Laryngeal tuberculosis treated with carbon arc light, 590
- BLOCH: Meningococcal septicaemia, 312—Sugar content of the cerebro-spinal fluid in lethargic encephalitis, 426—Pseudo-malarial gonococcal fever, 571
- BLONDEL, R.: Sterility and Graves's disease, 47
- Blood changes in influenza, 577
- Blood changes in T.N.T. poisoning, 152
- Blood changes in typhus. *See* Fever, typhus
- Blood films, new method of staining, 179
- Blood, haemolysed, toxicity of, 392
- Blood platelets in immunity, 338
- Blood pressure and heliotherapy, 141
- Blood pressure after intravenous novarsenobenzol, 498
- Blood pressure in pulmonary tuberculosis, 530
- Blood serum in nephritis, protein and lipin content of, 486
- Blood sugar in nephritis, 232
- Blood transfusion in obstetrics, 478—In pernicious anaemia, 630
- Blood and urine, comparative investigations on the Wassermann reaction in, 458
- BOAS, H.: Gonorrhoea of rectum in women, 48—Etiological relation of pyloric obstruction to gastric tetany, 309—"Silver salvarsan" in syphilis, 349
- BOBBIO: Carcinoma of appendix, 276
- BODIN, E.: Continuous suppurative acrodermatitis, 622
- BOERT: Abdominal palpation, 69
- BOGGS, T. R.: Acute suppurative hypophysitis as a complication of purulent phenoidal sinusitis, 586
- BOHMANNSON: Primary sarcoma of stomach, 440
- BOISSERIE-LACROIX, J.: Cerebellar abscess of otitic origin with complete homolateral hemiparesis, 42
- BOISSONAS, L.: Codeine poisoning, 293
- BOK, S. T.: Luetic reactions of Sachs and Georgi, 751
- BOLTEN, H.: Angio neurotic oedema, 210
- Bone disease, tuberculin treatment of, 501
- Bone grafts in treatment of ununited fractures, 300
- Bone growth, studies in, 197, 412
- Bones, long. *See* Long
- BONNARD: Abscesses caused by typhoid bacilli, 720
- BONNAMOUR: Spontaneous rupture of abdominal aorta, 369
- BONNEFON: Treatment of the vascular form of tuberculous keratitis, 640
- BONNET: Parotitis in typhus, 695
- Bony ankylosis. *See* Ankylosis
- BORRIES, G. V. T.: Influenzal pharyngodysnia, 58
- Botulism, 395
- BOUCHUT: Dissociated biliary retention, 406
- BOUGET: Changes in uterine muscle during involution, 359
- BOULOS: Treatment of general paralysis by tuberculin, 34
- BOUQUIER: Congenital cyanosis with large ductus arteriosus, 523
- BRAASCH: Surgical renal tuberculosis, 351
- Bradycardia and immunity in influenza, 588
- Brain, foreign bodies in, 321
- Brain wounds, primary suture in, 447
- BRAINOS, A.: Sporotrichosis of genitals, 541
- BRANDT, R.: Colloidal gold test in the cerebro-spinal fluid in syphilis, 208
- BRET, J.: Functional aortic incompetence, 563
- BRETTE: Syphilitic stenosis of trachea, 268—Primary cancer of lung, 469
- BREWITT: Conservative operation for chronic pyosalpinx, 738
- BROCQ: Experimental haemorrhagic pancreatitis, 617
- BRODIN: Blood sugar in nephritis, 232
- Bromoseltzer habit causing methaemoglobinemia, 405
- Bronchitis, spastic, adrenalin in, 114
- BROSSMANN: Bilateral tubal pregnancy, 580
- BROUGHTON, Harris: Anaphylactic deaths in asthmatics, 140
- BROWN: Blood changes in influenza, 577
- BRUN, A.: Observations on 300 cases of sterility, 176
- BRUTSCH, P.: Slow evolution of peritonitis following perforation of typhoid ulcer, 289
- BUCHHOLTZ, J.: Artificial acquired immunity to influenzal pneumonia, 582
- BULL, P.: Treatment of cancer of rectum, 40—Thoracoplasty in pulmonary tuberculosis, 116
- Bullet in pulmonary artery, 675
- BURNAND: Digitalis in pulmonary tuberculosis, 288
- BURNAND, R.: Influenza and tuberculosis, 558
- Burns, early death in, 20
- Burns, facial, plastic surgery in, 639
- Burns, treatment of, 65
- BURROWS: Quinine dihydrochloride in influenza, 373
- BUSINCO, A.: Septic necrobiotic infarct of lung, 365
- BYFIELD, A. H.: Etiology of arthritis deformans in children, 378

## C.

- CABANNES: Periosteal tuberculoma of orbit, 123—Subconjunctival lipoma, 367
- CADE: Syphilitic stenosis of trachea, 268
- CADE: Tender spots at root of neck in abdominal disease, 439
- CADENAT, F. M.: Thrombo-phlebitis of the upper limb, 476
- Caesarean section followed by primary abdominal pregnancy, 126
- CAESARON, U.: Tuberculous hip with congenital dislocation, 272
- Calculi, pyelotomy versus nephrotomy for, 252
- Calculi, silent renal, 89
- Calculi, ureteric, 534
- Calculus, renal, in spinal injuries, 207
- Calomel inunctions, 9
- CALVY, P. J.: Teeth extraction and heart disease, 705
- CAMBASSEDÈS: Acute aseptic purulent arthritis, 32
- Camphor oil, intravenous injections of (especially in shock and heart failure), 139
- Camphor oil in sciatica, subcutaneous injections of, 111
- Camphor oil tumours, 718
- Cancer of appendix, 276
- Cancer, auto-serotherapy in, 327
- Cancer of breast, post-operative prognosis for, 120, 441
- Cancer of cervix, implantation of graft in an intracorporeal polypus, 611
- Cancer of cervix, radical operation for, 149
- Cancer, conjugal, 281
- Cancer, early gastric, and generalized pulmonary cancerous lymphangitis, 473
- Cancer, juvenile, 689
- Cancer of larynx treated by radium and x rays, 226
- Cancer of lung, primary, 469
- Cancer of ovary, primary, in a girl of 13, ablation, cure, 742
- Cancer of pleura with hypertrophic osteoarthropathy, 490
- Cancer of rectum, treatment of, 40
- Cancer of stomach, false, 275
- Cancer and tuberculosis, association of, 154
- Cancer of uterus, radium in, 256
- Cancer, x ray, 544
- CAPONE, G.: Agglutinability of micro-organisms cultivated on acid and alkaline media, 550
- Carbon arc light in treatment of laryngeal tuberculosis, 590
- Carcinolytic organic acids, 27
- Carcinoma. *See* Cancer
- Cardiac. *See* Heart
- Cardiospasm, 732
- CARDOT: Corpus luteum in pernicious vomiting of pregnancy, 646
- CARNOT, P.: Plastic linitis, 133—"Vermilion" proctitis in secondary syphilis, 542—Recurrent haematemesis in chronic obliterative phlebitis, 696
- CARRARO, N.: Hypertrophy of prostate, 354
- CARULLA: Chronic pancreatitis and late hereditary syphilis, 30
- Caruncle, urethral, 388
- CARVE, L. P.: Double ureters, 734
- CASTAIGNE: Renal adequacy, 428
- CASTELLANI: Sodium taurocholate in the prophylaxis of gonorrhoea, 606
- CASTEX, M. R.: Various manifestations of late hereditary syphilis, 7
- Castor oil seeds, poisoning by, 377
- Cataract, intracapsular extraction of, 124
- CAULI: Contusion and rupture of spleen, 250
- CAULK: Hour-glass bladder, 251
- CAUSSADE, L.: Myositis and meningitis in puerperal pyaemia, 46
- CAVARRA: Congenital orbital cyst, 502
- CAVAZZANI, A.: Diagnosis of metallic râles in infancy, 656
- Cerebellar abscess. *See* Abscess
- Cerebral haemorrhage, pathogenesis of, 746
- Cerebro-spinal fluid in acute diseases, 29
- Cerebro-spinal fluid in multiple sclerosis, 308
- Cerebro-spinal fluid in syphilis, colloidal gold test in, 208
- Cerebro-spinal fluid in whooping-cough, 485
- Cerebro-spinal meningitis, treatment of, 628
- Cervical, vagus, and sympathetic, experiments in (Schafer), 74
- Cervix, cancer of. *See* Cancer
- Cervix, tuberculosis of, 609
- CHABROL: Jaundice and arseno-benzol, 112—Familial epidemic of catarrhal jaundice, 162
- CHALIER, J.: Haemophilia treated by injection of the mother's blood serum, 403
- Champetier de Ribes's bag for vaginal dilatation during labour, 613
- Chancre, dental, 443
- Chancre of little finger, 477
- Chancre, tonsillar, polypoid form of, 444
- Chancre, tonsillar, simulated by Vincent's angina, 316
- Chancres, multiple, 442
- Chancres, soft, extragenital inoculation of, 121
- CHARLANNE: Tuberculosis of cervix, 609
- CHARRIER, A.: Sarcoma of small intestine, 665
- CHAUVIN: Primary melanomas of male breast, 22—Cancer of cervix, implantation of graft on an intracorporeal polypus, 611—Tuberculosis of ovarian cysts, 651
- CHELLÉ: Toxicology of hydrocyanic acid, 236
- Chemiotherapy, antitoxic, the phenololipoids, 127
- CHÉRY: Ocular paralysis of otic origin, 353
- Chest wound followed by pulmonary tuberculosis, 724
- CHICKERING: Secondary pneumonia, 240
- CHIPOLIAN: Uterine fibroids and x rays, 679
- Chilblains treated with diathermy, 245
- Cholecystectomy, subperitoneal, 638
- Cholecystitis, chronic, and heart disease, 292
- Cholecystitis, acute typhoidal in children, 382
- Cholelithiasis and achylia, 411
- Cholesterin in a pleural effusion, 23
- Chondrodysplasia, 535
- Chordoma, malignant, 178
- Chorea, chronic, clinical varieties of, 500
- Chorion-epithelioma in the male, 100
- Chorion-epithelioma of testis, 608
- Chronic acid in treatment of Vincent's angina, 671
- CIGNOZZI, O.: Treatment of puerperal infections with normal serum, 421
- Cirrhosis, latent, in tuberculosis, 531
- CLAUDE, H.: Meningeal symptoms and lethargic encephalitis, 463—Myotonic form of lethargic encephalitis, 694
- Clavicle, necrosis of, 192
- CO poisoning, myocarditis from, 102
- COBB: Radical operation for cancer of cervix, 149
- Codeine causing scarlatiniform erythema, 105
- Codeine poisoning, 293
- COGLIEVINA: Treatment of typhus, 55
- COLARD, A.: Diaphragmatic hernia, 63
- COLE: Calomel inunctions, 9—Kaposi's sarcoma, 456
- Colectomy, partial, two-stage operation of, 572
- Colic, violent attacks of caused by calcified mesenteric glands, 190
- Colles's fracture, 223
- Colloidal gold reaction, 453, 687—Technique of, 649
- Colloidal gold test, 453, 454
- Colloidal gold test in the cerebro-spinal fluid in syphilis, 208
- Colloidal silver in typhus, 55; in cystitis, 643
- Colloidal tin, intrathecal injections of in staphylococcal meningitis, 727
- Colon dilatation in children, 633
- Colostomy, closure of, 601
- Coma, epidemic, 660
- Compression neuritis. *See* Neuritis
- Conjunctiva, bacteria of in dacryocystitis, 335

Conjunctiva, primary sore of, 417  
 Conjunctivitis, swimming bath, 86  
 Connective tissue, loose, macrophages of, 51  
 Convalescent serum in treatment of influenzal pneumonia, 290, 658  
 Convolution, fourth horizontal frontal, criminological value of, 748  
 COPE: Thigh rotation or obturator test, 673  
 CORDIER: Gastric ulcer in pulmonary tuberculosis, 344  
 CORNAZ, G.: Vincent's angina simulating tonsillar chancre, 316  
 CORNIOLEY: Acute appendicitis with ileo-caecal ectopia, 471  
 CORONE, A.: Diagnosis of pulmonary tuberculosis by radiology, 529  
 Corpus luteum in pernicious vomiting of pregnancy, 646, 647, 648  
 Corpus luteum and pregnancy 708  
 Corrosive sublimate, intravenous injections of in severe infections, 2  
 COTTIS: Surgical treatment of goitre, 574  
 COTTON: Colles's fracture, 223  
 COUDERT: Sterility, 175  
 COULONJOU, E.: Trophoedema in chronic mania, 624  
 COVA: Treatment of septic puerperal endometritis, 304  
 Cranio-meningeal wounds, generalized loss of reflexes in, 416  
 CREADICK: Omphalitis, 423  
 CRENSHAW: Urethral caruncle, 388  
 CRESPIN: Autohaemotherapy in anaemia, 627  
 CREYX: Some clinical forms of pulmonary hydatid cysts, 474  
 Criminological value of a fourth horizontal frontal convolution, 748  
 CRISTINA, G. DI: Vaccine treatment of Mediterranean fever, 372  
 CROWE: Pfeiffer's bacillus in the accessory nasal sinuses, 25  
 Crucial ligaments, rupture of, 676  
 CRUMP: Kaposi's sarcoma, 456  
 Culture media, reaction of, 364  
 CUMMING: Transmission of tubercle bacilli by table utensils, 691  
 CURSCHMANN, H.: Chronic lead poisoning after a bullet wound, 96  
 Cuti-reaction in children, regional, 657  
 Cyanosis, congenital with large ductus arteriosus, 523  
 Cyst, primary hydatid, of spinal meninges, 618  
 Cyst of mesentery, 419  
 Cyst of orbit, congenital, 502  
 Cyst of vagina with mixed epithelial lining, 684  
 Cystitis treated with colloidal silver, 643  
 Cystoma, bilateral malignant ovarian, and pregnancy, 712  
 Cystocele, pessary for, 743  
 Cysts of neck, congenital, 174  
 Cysts, pulmonary hydatid, some clinical forms of, 474  
 Cysts of thyroglossal tract, 573

D.

Dacryocystitis, bacteria of conjunctiva in, 335  
 DAGUET: Pulmonary tuberculosis following a chest wound, 724  
 Dakin's fluid in chronic suppurative otitis, 413  
 DALCHÉ, P.: Salivary and endocrine glands, 35  
 DALE: Fracture-dislocations of astragalus, 189  
 DAMADÉ, R.: Cerebellar abscess of otitic origin with complete homolateral hemiparesis, 42—Typhoid bacilli in a fixation abscess, 662  
 DANNENBERG: Cerebro-spinal fluid in acute diseases, 29  
 DAZZI, A.: Adrenalin in diagnosis of latent malaria, 234  
 DE AMARAL, Zephirino: Bilateral mammary hypertrophy, 741  
 Death, a sign of impending, 347  
 DEAYER: Prostatic surgery, 385  
 DEBBAS, E.: Emetine in urinary bilharziosis, 499  
 DE BLOEME, P. J. L.: Blood pressure in pulmonary tuberculosis, 530  
 DE BORD: Poisoning by ripe olives, 652  
 DE GRAAF, J. G.: Aplasia of internal genitals, 280  
 DEJUST, H.: Treatment of diarrhoea and mucous colitis by zinc oxide, 431  
 DEKEUWER: Sugar content of the cerebro-spinal fluid in lethargic encephalitis, 426  
 DE LEVIE, D. J.: Peculiar case of foreign body in the throat, 735  
 DELL'AMORE: Blood pressure after intravenous novarsenobenzol, 498  
 DE MASSARY: Osteitis deformans affecting a single long bone, 415  
 DE MATTA, A.: Ruoss's test for glycosuria, 517  
 DEMMER, F.: Foreign bodies in the brain, 321  
 DE NABIAS: Parotitis in typhus, 695  
 DENNIS: Pulmonary fibrosis after gassing: x-ray evidence, 159  
 Dental chancre, 443  
 DEBECUM: Luminal in epilepsy, 142  
 DE STEFANO, S.: Statistics of Parrot's pseudo-paralysis, 470

DE STELLA, H.: Treatment of parotid fistula by resection of auriculo-temporal nerve, 449  
 DE TOMMASI, P.: Wound of uterus in eighth month of pregnancy, 125  
 DE TRÉVISE: Liquefaction of gelatin by streptococci, 282  
 DEUSCH, G.: Post-influenzal dyspepsia, 243  
 DE WESSELOW: Testing of renal efficiency, 362  
 Dextrocardia, isolated congenital, 688  
 Diabetes following extirpation of pancreas, glycogen in, 650  
 Diabetes, significance of hyperglycaemia in, 518  
 Diabetes mellitus, 136  
 Diabetes, rules for combating, 493  
 Diabetes in war, 33  
 DIAMANTIS: Treatment of urinary bilharziosis by emetine hydrochloride, 211  
 Diarrhoea, zinc oxide in treatment of, 431  
 Diathermy in treatment of chilblains, 245  
 Diazo reaction in epilepsy, 749  
 DICK: Diphtheroid bacillus meningitis, 259  
 Digestive tract, atony of in nervous individuals, 437  
 Digitalis, action of in auricular fibrillation, 368  
 Digitalis, inhibition of diuresis by, 348  
 Digitalis in pulmonary tuberculosis, 288  
 Diphtheria antitoxin, intramuscular injection of, 370  
 Diphtheria bacilli in the lungs, 72  
 Diphtheria bacilli, vital staining of, 394  
 Diphtheria, eosinophilous myocarditis in, 231  
 Diphtheria mortality, 520  
 Diphtheria in the newborn, 167  
 Diphtheria of nose and ear in an infant aged 30 days, 113  
 Diphtheria, wound, 261  
 Diphtheritic paralysis. *See* Paralysis  
 Diphtheroid bacillus meningitis, 259  
 Diseases, acute, cerebro-spinal fluid in, 29  
 Disseminated sclerosis. *See* Sclerosis  
 Diuresis, inhibition of by digitalis, 348  
 Diverticula of large intestine, acquired, 409  
 Diverticula of oesophagus, 503  
 DOBBIE, W. J.: Prevention of tuberculosis, 663  
 DODGE: Sterilization of lipo-vaccines, 307  
 DORN, K.: Is normal horse serum as effective as antidiphtherial horse serum? 36  
 DORSETT: Rupture of rectum during labour, 479  
 DOUGLAS: Leucocytes in influenza, 24  
 DOWD, C. H.: The two-stage operation of partial colectomy, 572  
 DRAGO: Myositis ossificans, 215  
 DRISCOLL: Erosive vulvitis, 305  
 DRYSDALE: Hysterical hemiplegia, 14  
 DUBOFF: Tuberculous empyema, 528  
 DUBOIS: Lymphatic foci in the thyroid in Addison's disease, 203  
 DUBOURG, E.: Purulent pneumococcal meningitis in influenza, 81—Diphtheria mortality, 520  
 DUBREUILLE, W.: Treatment of Vincent's angina by chromic acid, 671  
 DUCASTANG, R.: Fibrous tumours of hand, 512  
 Ductus arteriosus, large, with congenital cyanosis, 523  
 DUCUING: Penetrating wounds of thorax, 303—Round ligament tumours, 678  
 DUFOUR: Serum treatment of haemorrhage, 87  
 DUHOT, E.: Spontaneous rupture of abdominal aorta, 488  
 DUJARIER: Reattachment of fibroid, 424—Pseudarthrosis of humerus, 510  
 DUMAS: Atypical dysentery bacilli, 177—Diagnosis of pulmonary tuberculosis by radiology, 529  
 DUMONT: Familial epidemic of catarrhal jaundice, 162  
 Duodeno-jejunal flexure, stenosis of by ulcer, 674  
 Duodenum, parts of the, 170  
 DUPÉRIÉ: Periosteal tuberculosis of orbit, 123—Subconjunctival lipoma, 367  
 DUPUY: Sham feeding test in stomach diseases, 726  
 DURAND, G.: Treatment of diarrhoea and mucous colitis by zinc oxide, 431—Precipitin reaction in tuberculosis, 551  
 DURUP: Comparison of antigens in the Wassermann reaction, 205  
 DUVAL: Rupture of crucial ligaments, 676  
 DWYER, H. L.: Chondrodysplasia, 535  
 Dysentery bacilli, atypical, 177  
 Dysentery bacillus, Shiga's: Toxins of, 206—An inagglutinable form of, 361  
 Dyspepsia, post-influenzal, 243

E.

ÉCALLE: Diagnosis of pregnancy, 228  
 Eclampsia, starvation in, 200  
 Eclampsia, treatment of, 97  
 Ectopia, ileo-caecal, acute appendicitis with, 471  
 Ectopic pregnancy. *See* Pregnancy  
 Ecuador, yellow fever in, 597  
 Eczema and tuberculosis, 527  
 Eczema, varicose, and perivascular sympathetic nerves, 634

EDELMANN: Pulmonary emphysema due to syphilis, 730  
 EDGAR: Diabetes mellitus, 136  
 EDLAVITCH, B. M.: Cutaneous reaction to quinine in quinine idiosyncrasy, 212  
 EDMONDSON: Poisoning by ripe olives, 653  
 EGGLESTON: Local anaesthetics, 11  
 Egypt, rhinoscleroma in, 472  
 Elepbantiasis, Kondoleon's operation for, 274  
 ELLERMANN, V.: Avian leukaemia, 747  
 ELLIOTT, C. A.: Yellow fever in Ecuador, 597  
 Embolism, operations for, 599  
 Embolism, pulmonary, remarkable case of, 98  
 EMERY: Arsenobenzol and anaphylaxis, 432  
 Emetine hydrochloride in urinary bilharziosis, 211 499  
 Emetine idiosyncrasy, 185  
 Emphysema, pulmonary, due to syphilis, 730  
 Emphysema, surgical, in influenza, 295  
 Empyema acute, following influenza, surgical treatment, 145  
 Empyema, influenzal, treatment of, 319  
 Empyema, tuberculous, 528  
 Empyema in the first year of life, 220  
 Encephalitis, acute myoclonic, 459  
 Encephalitis, epidemic, simulating acute abdominal disease, 460  
 Encephalitis, haemorrhagic, in influenza, 457  
 Encephalitis lethargica, 1, 425, 568  
 Encephalitis lethargica, abortive forms of, 402  
 Encephalitis lethargica in Austria, 721  
 Encephalitis lethargica, etiology of, 482  
 Encephalitis lethargica, involuntary movements following influenza and, 461  
 Encephalitis lethargica, meningeal symptoms and, 463  
 Encephalitis lethargica, morbid anatomy of, 481  
 Encephalitis lethargica, myotonic form of, 694  
 Encephalitis lethargica, ocular changes in, 134  
 Encephalitis lethargica with relapse, 462  
 Encephalitis lethargica, sugar content of the cerebro-spinal fluid in, 426  
 Encephalitis lethargica, treatment of, 464  
 Encephalitis lethargica treated by neo-salvarsan, 661  
 Encephalitis lethargica, virus of, 455  
 Endocarditis, primary trieu-pid, 596  
 Endocarditis, septicaemic, 616  
 Endocranial complications of acute otitis media, 93  
 Endocrine disturbance causing late epilepsy, 522  
 Endocrine and salivary glands, 35  
 Endometritis, septic puerperal, treatment of, 304  
 Endothelioma of the right and leiomyoma of the left pleura, 28  
 Enteric fever. *See* Fever  
 EPARRIER, H.: Acute meningococcal, meningitis with multiple arthritis, 567  
 Epididymectomy, technique of, 605  
 Epilepsy, cause of, 619  
 Epilepsy, diagnosis of, 296, 376  
 Epilepsy, diazo reaction in, 749  
 Epilepsy, late, due to endocrine disturbance, 522  
 Epilepsy, luminal in, 142  
 Epilepsy, parathyroid, 484  
 Epileptic fits produced by suprarenal preparations, 4  
 Epileptics, weakness of the right facial nerve in, 466  
 Epithelioma developing into a fibroid polypus of uterus, 685  
 Epithelioma and oriental sore, resemblance between, 552  
 ERDMAN: Hypertrophic pulmonary osteoarthropathy, 94  
 ERKES, L. E.: Osteo-chondroma of stomach wall, 12  
 Erythema nodosum and tuberculosis, 54, 313  
 Erythema, scarlatiniform, caused by codeine, 105  
 ESMEIN: Isolated congenital dextrocardia, 688  
 ESTES, W. L.: Causes of delayed union and non-union in fractures of the long bones, 248  
 ESTOR, E.: Conservative treatment of sarcomata of long bones, 703  
 ESTRADA, A. T.: Syphilis as a factor in the ocular complications of typhoid fever, 239  
 Ether as an anaesthetic for short operations, 172  
 ÉTIENNE, G.: Late epilepsy due to endocrine disturbance, 522—Serum treatment of tuberculous meningitis, 559  
 EVANS, Newton: Malignant myoma of uterus, 422  
 Exophthalmic goitre. *See* Goitre  
 Eye diseases, injections of cow's milk in, 475  
 EYSTER: Auriculo-ventricular heart-block in children, 566

F.

FABER, A.: Treatment of chronic polyarthritis, 692  
 FABER, K. P.: Pituitary dwarfism, 109—Raynaud's disease with suprarenal insufficiency, 166—Etiology of chronic gastric achylia, 615

FABRY: Salvarsan treatment of syphilis, 446  
 Fallopian tube, *Ascaris lumbricoides* in, 680  
 Fallopian tubes, test of the patency of, 610  
 FAURE: After-results of extended hysterectomy, 612  
 Febrile patients, temperature of the expired air in, 366  
 FERMI, F.: Spina bifida in adults, 414  
 FERRÉ, E.: Subarachnoid meningeal haemorrhage, 595  
 Fever, blackwater, 168  
 Fever, enteric, atypical forms of, 315  
 Fever, enteric, intussusception in, 642  
 Fever, enteric, syphilis as a factor in the ocular complications of, 239  
 Fever, Mediterranean, vaccine treatment of, 372  
 Fever, pseudo-malarial gonococcal, 571  
 Fever, scarlet, a second attack of, 103  
 Fever, scarlet, influence of on vaccinia, 620  
 Fever, scarlet, complicated with pneumonia, 182  
 Fever, scarlet, renal function in, 654  
 Fever, typhus, with relapse, 401  
 Fever, typhus, changes in the blood and cerebro-spinal fluid in, 53, 75  
 Fever, typhus, incubation period in, 593  
 Fever, typhus, Mexican form of, 715  
 Fever, typhus, parotitis in, 695  
 Fever, typhus, presence of certain bodies in, 339  
 Fever, typhus, in Rotterdam, 314  
 Fever, typhus, treatment of, 55  
 Fever, yellow, in Ecuador, 597  
 Fibroid, reattachment of, 424  
 Fibroid polypus of uterus, epithelioma developing into, 685  
 Fibroids of uterus and x rays, 679  
 Fibrosis, pulmonary, after gassing, x-ray evidence, 159  
 Fibula, recurrent dislocation of the head of, 386  
 FICAI, G.: Presence of certain bodies in typhus, 339  
 FINOCHIETTO, R.: Hyperacute intestinal amoebiasis, 6  
 FISCHER, A.: Anomalous case of Pott's disease, 224  
 Fistula, parotid, 144—Treated by resection of auriculo-temporal nerve, 449  
 Fistula, uretero-cervical, after forceps delivery, incision, spontaneous cure, 709  
 Fistulae, thoracic, 169  
 Fistulae, vesico-vaginal, transvesical suture of, 547  
 Flail joints, 13, 43  
 FLOECKINGER: Decompression of spinal cord in tuberculosis of spinal column, 701  
 Fluorescent substances reinforcing quinine, 318  
 Fog: Relapsing myositis due to *Micrococcus crassus*, 383  
 FOGES, A.: Severe post-dysenteric disease of rectum, 253  
 FÖRNS, A. L.: Lupus erythematosus and tuberculosis, 269  
 Food passages, foreign bodies in, 381  
 FOOT: Macrophages of the loose connective tissue, 51  
 Foreign bodies in the brain, 321—In the air and food passages, 381  
 Foreign body arthritis. *See* Arthritis  
 Foreign body in throat, peculiar case of, 735  
 FORGUE: Primary melanomas of male breast, 22—Tuberculosis of ovarian cysts, 651  
 FOTT, P.: Treatment of cerebro-spinal meningitis, 628  
 FOURRIER, M.: Treatment of lethargic encephalitis by neo-salvarsan, 661  
 Fracture, Colles's, 223  
 Fracture-dislocations of astragalus, 189  
 Fractures, compound, non-union in, 539  
 Fractures, compound, treatment of, standard splints, 733  
 Fractures of long bones, causes of delayed union and non-union in, 248  
 Fractures of long bones: Intramedullary beef-bone splints in, 88  
 Fractures, Pott's, reconstruction and after-care of old unreduced, 16  
 Fractures, ununited treatment of with special reference to use of bone grafts, 300  
 FRANCONI: Influenza and the exanthems, 263  
 FRANKAU: Form of war haematuria, 429  
 FRANKENSTEIN: Accidental perforation of uterus, 452  
 FRASSI, L.: Gunshot wounds of bladder, 576  
 FRAZIER: Peripheral nerve injuries, 195  
 FREUDENBERG, A.: Pathogenesis of disturbances of micturition in babes, 38  
 FREUND: Carcinolytic organic acids, 27—Treatment of lupus vulgaris, 328  
 FRIEDEL, G.: "Vermilion" proctitis in secondary syphilis, 542  
 Friedmann's turtle vaccine in tuberculosis, 8  
 FRIS-MÖLLER, V.: Immunity and bradycardia in influenza, 588  
 Froin's syndrome in tuberculous meningitis, 5  
 FROMME: Endemic osteomalacic disease, 37  
 Frontal convulsion, fourth horizontal, criminological value of, 748  
 FUCHS: Turpentine injections for salpingitis, 645  
 FUSANO: Metastatic pleurisy, 430  
 FUSSELL: X-ray sign of perinephritic abscess, 384

## G.

GAERTNER, G.: Reflected sunlight in treatment of whooping-cough, 59  
 GAGLIO, G.: Presence of vitamins in the urine, 76  
 Gall stones, frequency of, 555  
 Gall stones and urobilinuria, 513  
 GALLAVARDIN: Angina pectoris and syphilis, 163  
 GALLI, G.: Heredity in cardiac disease, 396  
 GALLOTTI: Exophthalmic goitre and tuberculosis, 725  
 GAMMA, C.: Primary lymphogranulomatosis of intestine, 393  
 GANE, T.: Typhus fever with relapse, 401  
 GARDNER: Hysterical hemiplegia, 14  
 Gas, mustard, pulmonary sequelae of, 209  
 Gas, poison, organic hemiplegia after, 496  
 Gaseous disinfectants and fumigations in infectious disease, prophylactic value of, 83  
 Gassing, after-effects of on the respiratory tract, 137  
 Gassing followed by pulmonary fibrosis, x-ray evidence, 159  
 GASTAMINI: Vaccine-therapy during the war, 164  
 Gastric achylia, chronic, etiology of, 615  
 Gastric tetany. *See* Tetany  
 GAUTIER, P.: Slow evolution of peritonitis following perforation of typhoid ulcer, 289  
 Gelatin liquefied by streptococci, 282  
 Geniculate ganglion, the syndrome of, 495  
 Genitals, internal, aplasia of, 280  
 Genitals, sporotrichosis of, 541  
 GENOËSE, G.: Cerebro-spinal fluid in whooping-cough, 485  
 GERBER, I.: Early gastric cancer and generalized pulmonary cancerous lymphangitis, 473  
 Germicidal value of potassium mercuric iodide, 669  
 Germicide, a new "mercurochrome 220," 131  
 GERY: A malignant chordoma, 178  
 Gestation, tubal, an early, 391  
 GILBERT: Treatment of cavernous sinus thrombosis, 148  
 GILLIES, H. D.: Tubed pedicle in plastic surgery, 298—Plastic surgery of facial burns, 639  
 GINESTOUS: Congenital paralysis of right external rectus, 565  
 GIOSEFFI, M.: Poisoning by castor oil seeds, 377  
 GIRALD: Primary hydatid cyst of spinal meninges, 618  
 GIROU: Conjugal cancer, 281  
 Glands, enlarged hilus, combined method of percussion and auscultation for detecting, 598  
 Glands, calcified mesenteric, causing violent attacks of colic, 190  
 Glands, endocrine and salivary, 35  
 Glands, enlarged intercostal, diagnostic significance of, 655  
 Glucose in urine, detection of, 553  
 Glycogen in diabetes following extirpation of pancreas, 650  
 Glycosuria, renal, 49  
 Glycosuria, Buoss's test for, 517  
 GOEBEL: Rare herniae, 511  
 Goitre and the psychoses, 135  
 Goitre, surgical treatment of, 574, 575—Mode of anaesthesia, 574—Relation existing between the amount of gland removed and the permanence of relief, 575  
 Goitre, exophthalmic, 56  
 Goitre, exophthalmic, with myasthenia gravis, 214  
 Goitre, exophthalmic, and tuberculosis, 725  
 Goitre. *See* Graves's disease  
 GOLDSCHMIDT, W.: Appendicitis simulated by mesenteric or retroperitoneal suppuration, 147  
 GOLDSTEIN: Palpation of abdomen, 271  
 Gonococcal fever, pseudo-malarial, 571  
 Gonococcus, culture of, 336  
 Gonorrhoea, infarct of testicle in, 198  
 Gonorrhoea of rectum in women, 48  
 Gonorrhoea treated with hot baths, 360  
 Gonorrhoea, sodium taurocholate in prophylaxis of, 606  
 Gonorrhoea, vasostomy in, 667  
 GOODALL: Vaccination by subcutaneous injection, 50  
 GOODMAN: Dental chancre, 443—Wassermann test in pregnant women, 614  
 GORIS, C.: Cicatricial stenosis of oesophagus, 666  
 GOTTI, G.: Epidemic of hiccough, 465  
 GOVAERTS: Blood platelets in immunity, 338  
 Graafian follicle, ripe human, 546  
 Gradenigo's syndrome, 446  
 GRAEFFE, M.: Chronic appendicitis due to small shot, 325  
 Grafts, tissue, from immunized animals, 334  
 GRAHAM: Haemic basophil cell, 337  
 GRAHAM, E. E.: Foreign bodies in the air and food passages, 381  
 GRAPICOL, F. L.: Chorion-epithelioma of testis, 608  
 GRAVES: Ovarian residue, 228  
 Graves's disease, familial and hereditary, 104  
 Graves's disease and sterility, 47  
 Graves's disease, thyroidectomy for, 90, 91  
 Graves's disease, x-ray treatment of, 78  
 Graves's disease. *See also* Goitre, Exophthalmic, and Hyperthyroidism

GREELEY: Vaccine as a prophylactic against influenza, and local reaction as a guide to immunity, 345  
 GRIGAUT: Blood sugar in nephritis, 332  
 GRILLET: Influenza in pregnancy, 227  
 GRÖN, F.: History of syphilis, 507  
 GROSSE: Corpus luteum in pernicious vomiting of pregnancy, 648  
 GROSZ, K.: Lethargic encephalitis, 425  
 GROVES, Hey: Treatment of ununited fractures, with special reference to use of bone grafts, 300  
 Growth, backward, stimulated by x rays, 322  
 GRÜNBAUM, R.: Treatment of chilblains with diathermy, 245  
 GRYZEZ: Enumeration of *B. coli* in water, 287  
 GUARINI: Abdominal enlargement in war prisoners, 494  
 GUÉNARD, F.: Diphtheria mortality, 520  
 GUÉRIN: Stenosis of duodeno-jejunal flexure by ulcer, 674  
 Guinea-pigs, spirochaetes in urine of, 331  
 GUIZZETTI, P.: Morbid anatomy of lethargic encephalitis, 481  
 GUNSETT: Death following the application of sinusoidal currents, 132  
 GUYON: Regeneration of striated muscle, 180  
 Gynaecological operations followed by venous thrombosis, pulmonary infarction, and embolism, 644  
 Gynaecology and obstetrics, significance of Rieder's cells in, 683

## H.

HADDOW: Cause of epilepsy, 619  
 Haematemesis, recurrent, in chronic obliterative phlebitis, 696  
 Haematuria, war, form of, 429  
 Haemic basophil cell, 337  
 Haemophilia treated by injection of the mother's blood serum, 403  
 Haemorrhage, aortic compression for, 389  
 Haemorrhage, cerebral, pathogenesis of, 746  
 Haemorrhage from the ovaries, 708  
 Haemorrhage, serum treatment of, 87  
 Haemorrhage, subarachnoid meningeal, 595  
 Haemorrhage, traumatic cerebellar, 356  
 Haemorrhage in urethral stricture, 448  
 Haemorrhagic encephalitis. *See* Encephalitis  
 Haemorrhoids, internal, 39  
 HAGEDORN: Juvenile carcinoma, 689  
 HAINES: Detection of glucose in urine, 553  
 HALL: Detection and treatment of pneumococcus carriers, 156  
 HALL, H. O.: Influenza immunity, 557  
 HAMBURGER, F.: Oral auscultation, 629  
 HAMBURGER, W.: Preventive inoculation against rabies, 491  
 HAMPTON: Venous thrombosis, pulmonary infarction and embolism following gynaecological operations, 644  
 Hand, fibrous tumours of the, 512  
 HANNEMA, S.: Violent attacks of colic caused by calcified mesenteric glands, 190  
 HANSEN, S.: Urobilinuria and gall stones, 513  
 HANSON, B.: Influenzal tendo-vaginitis, 67  
 HANSTEEN: Membranous tracheo-bronchitis in influenza, 438—Haemorrhagic encephalitis in influenza, 457  
 HARBITZ, F.: Fatal influenzal myelitis, 230  
 HART, D. Berry: Causes of puerperal septicaemia, 451  
 HARTMANN: Hypernephroma of uterus, 579  
 HARVIER, P.: Familial and hereditary Graves's disease, 104—Virus of encephalitis lethargica, 455  
 HASS, Julius: Osteopsathyrosis idiopathica, 71  
 BASSON, J.: Pleuro-peritoneal form of chronic tuberculous peritonitis, 217  
 HATCHER: Local anaesthetics, 11  
 HAUG, K.: Erythema nodosum and tuberculosis, 313  
 Hay fever, protein sensitization in, 585  
 HAYWARD, E.: Friedmann's turtle vaccine in tuberculosis, 8  
 Head, artificial rotation of in persistent occipito-posterior positions, 329  
 Heart and aorta, neo-salvarsan in syphilitic disease of, 317  
 Heart, congenital abnormal mobility of, 341  
 Heart-block, auriculo-ventricular, in children, 566  
 Heart disease and chronic cholecystitis, 292  
 Heart disease, heredity in, 396  
 Heart disease, affection of the peripheral vessels in, 26  
 Heart disease and teeth extraction, 705  
 Heart failure, intravenous injections of camphor oil in, 139  
 Heart failure, renal manifestations of, 532, 621  
 Heat sensation, 79  
 HÉBERT: Meningococcal septicaemia, 312—Pseudo-malarial gonococcal fever, 571  
 HEINDL, A.: Epidemic of throat disease due to the pneumococcus, 626  
 Heliotherapy and blood pressure, 141  
 HELLO: Serum treatment of haemorrhage, 87  
 Hemiplegia, infantile spastic, 632  
 Hemiplegia following wound of upper thoracic region, 509  
 Hemiplegia, hysterical, 14

Hemiplegia, malarial, in an infant, 242  
Hemiplegia, organic, after poison gas, 496  
Hemiplegia, spastic, partial resection of motor nerves in, 420  
HERNIA, K.: Artificial pneumothorax in pulmonary tuberculosis, 18  
Hernia, diaphragmatic, 63  
Hernia, inguinal, 225  
Hernia, stomach, strangulation in, 670  
Hernia, strangulated, simulated by appendicitis, 191  
Hernia, strangulated obturator, 68  
Herniae, rare, 511  
Hernial sac, tuberculosis of in a child, 704  
Hernial sacs, adrenal rests in, 92  
Herpes, febrile, virus of, 286  
HERRICK: Cerebro-spinal fluid in acute diseases, 29—Sarcoma of prostate, 543  
HERRICK, J. B.: Rupture of aortic aneurysm into superior vena cava, 238  
HESSE: The fat soluble vitamins in rickets, 258  
HESSE, E. and M.: Frequency of gall stones, 555  
HESSELGREN, C.: Congenital abnormal mobility of the heart, 341  
HEYMAN, J.: Radium in cancer of uterus, 256  
HICCOUGH, epidemic of, 465  
HILLET: Unusual case of disseminated sclerosis, 10  
Hip, snapping, anatomy of, 418  
Hip, tuberculous, with congenital dislocation, 272  
HIRSCH, M.: Foreign body arthritis or twenty years' standing, 17  
HIRST: Frenatal care, 739  
HOCHSINGER: Decline of congenital syphilis during the war, 376  
HOFFER, G.: Vaccine treatment of ozaena, 138  
HOFFMANN: Association of cancer and tuberculosis, 154  
HOLLANDER: Renal calculus in spinal injuries, 207  
HOLMBERG, G.: War amenorrhoea, 254  
HOLST, S. F.: Post-operative prognosis of cancer of the breast, 441  
HOOGSLAG, W.: Rules for combating diabetes, 493  
HOOK: Camphor oil tumours, 718  
HÖFFNER, H.: Acute suppurative thyroiditis, 19  
Horse serum. *See* Serum  
Hot air treatment of naevi, 607  
HOULBERT: Vitamines and growth, 129  
HUBERT, G.: Aortic disease, 434  
HUSE, J. F. O.: Remarkable case of pulmonary embolism, 98—Progressive infective perichondritis, 246  
HUGGINS: Post-operative tetanus, 637  
HUGUET, L.: Complicated twin pregnancy, 151  
HULL, G. R.: Arthritis diagnosed by microscopical examination of a regional lymphatic gland, 537  
HUMBERT: Intraspinal treatment of neurosyphilis, 216  
Humerus, pseudarthrosis of, 510  
Humerus varus, 219  
HURST: Hysterical vomiting, 435  
HUTINEL, V.: Influence of acute infections on hereditary syphilis, 42  
Hydatid cysts. *See* Cysts  
Hydramnios treated by uterine puncture, 713  
Hydrocyanic acid, toxicology of, 236  
Hyperglycaemia, adrenalin, influence of ovaries on, 719  
Hyperglycaemia in diabetes, significance of, 518  
Hypernephroma of uterus, 579  
Hyperthyroidism, constant sign of, 107—Tuberculosis complicated by, 526. *See also* Graves's disease  
Hypophysitis, acute suppurative, as a complication of purulent sphenoidal sinusitis, 586  
Hysterectomy, extended, after-results of, 612  
Hysteria in childhood, 294  
Hysterical hemiplegia, 14  
Hysterical vomiting, 535

## I.

ICHOK, G.: The tuberculous psychoneurosis, 374  
Ictero-haemorrhagic spirochaetosis and the rat, 332  
Icterus neonatorum, familial, with fatal course, 84  
Ileo-caecal ectopia with acute appendicitis, 471  
Immunity, blood platelets in, 338  
Immunity in influenza. *See* Influenza  
Immunized animals, tissue grafts from, 334  
Infancy, diagnosis of metallic râles in, 656  
Infantilism, intestinal and pancreatic, 396  
Infections, acute, influence on in hereditary syphilis, 82  
Infectious disease, prophylactic value of gaseous disinfectants and fumigations in, 83  
Infectious fevers, elimination of acetone bodies during, 436  
Influenza in 1918-19, clinical notes on, 698  
Influenza, abortive and early treatment of, 346  
Influenza, acetoneuria in, 750

Influenza, action of on tuberculosis, 589  
Influenza bacilli, classification of, 519  
Influenza, blood changes in, 577  
Influenza in children, 165—Surgical complications of, 273  
Influenza and the exanthems, 263  
Influenza, facial paralysis in, 467  
Influenza, haemorrhagic encephalitis in, 457  
Influenza and immunity, 557  
Influenza, immunity and bradycardia in, 588  
Influenza in an institution, control of, 218  
Influenza and lactation, 556  
Influenza and lethargic encephalitis, involuntary movements following, 461  
Influenza, leucocytes in, 24  
Influenza masks, 728  
Influenza, membranous tracheo-bronchitis in, 438  
Influenza, sign of the palato-glossal arch in, 524  
Influenza pneumonia treated by serum from convalescent patients, 230  
Influenza in pregnancy, 227  
Influenza, psychoses following, 729  
Influenza and pulmonary tuberculosis, 468  
Influenza, purulent pneumococcal meningitis in, 81  
Influenza, quinine dihydrochloride in, 373  
Influenza, surgical emphysema in, 295  
Influenza treated by fixation abscess, 631  
Influenza and tuberculosis, 558, 589  
Influenza, vaccination against, 160  
Influenza, vaccine as a prophylactic against, 345  
Influenza, vaccine treatment of, 106  
Influenza alopecia, pathogenesis of, 267  
Influenza or diphtheritic paralysis of soft palate, 61  
Influenza emphysema, treatment of, 319  
Influenza metastatic ophthalmia, 194  
Influenza myelitis, fatal, 230  
Influenza pharyngodynia, 58  
Influenza pneumonia, artificial acquired immunity to, 582  
Influenza pneumonia, prognosis in, 340  
Influenza pneumonia treated by serum from convalescent patients, 230, 658  
Influenza pseudo-vaginitis, 67  
Intestinal obstruction caused by submucous lipoma of caecum, 602  
Intestine, large, acquired diverticula of, 409  
Intestine, primary lymphogranulomatosis of, 393  
Intestine, small, sarcoma of, 665  
Intradermal reaction with extract of tuberculous urine, 237  
Intrapleural perforation of stomach, sudden death from, 380  
Intraspinal treatment of neuro-syphilis, 216  
Intussusception in typhoid fever, 642  
IONESCO, D.: Influence of scarlet fever on vaccination, 620  
IVY, A. O.: Experimental gastric ulcer, 310  
IZAR, G.: Acetonuria in influenza, 750

## J.

JACOB: An early tubal gestation, 391  
JAGIC, N.: Adrenalin in spastic bronchitis, 114  
JAKSCH, R.: Epidemic coma, 660  
JANSSEN H.: Treatment of chronic polyarthritis, 693  
JARISOH, A.: Inhibition of diuresis by digitalis, 348  
JASCHKE, R. T. von: Treatment of eclampsia, 97  
Jaundice and arsenobenzol, 112  
Jaundice, catarrhal, familial epidemic of, 162  
JELLINEK, S.: Diagnosis of epilepsy, 296, 376  
JENSEN, S.: Subcutaneous injections of camphor oil in sciatica, 111  
JERSILD: Pathogenesis of the so-called ano-rectal syphiloma, 583  
JOANNOVICS: Cicatricial tuberculous stenosis of trachea, 183  
JOANNOVITCH, J.: Endocranial complications of acute otitis media, 93—Rhinoscleroma in Egypt, 472  
JOHNSTON, M. R.: Elimination of acetone bodies during infectious fevers, 436—Renal function in scarlet fever, 654  
Joints, flail, 13  
JONES, Wood: Anatomy of snapping hip, 418  
JØRGENSEN: Action of influenza on tuberculosis, 589—Subcutaneous injections of sodium bromide in mental disease, 591  
JOSEFSON, A.: Influenza masks, 728  
JOSÉ, O.: Renal manifestations of cardiac failure, 532, 621  
JUDD, E. S.: Ureteric calculi, 534

## K.

KAHN, M.: Protein and lipid content of the blood serum in nephritis, 488  
KAMNER: Carcinolytic organic acids, 27  
KAPFERER: Gonorrhoea treated with hot baths, 360  
Kaposi's sarcoma, 456  
KANE: Diagnosis of primary syphilis by culture, 311

KELLERT: Colloidal gold reaction, 454  
KEMPF: Mechanistic classification of neuroses and psychoses, 110  
Keratitis, tuberculous, treatment of the vascular form of, 640  
KHAN: Reattachment of fibroid, 424  
KHOURY: Jaundice and arsenobenzol, 112  
KICKHEFEL, G.: Influenza or diphtheritic paralysis of soft palate, 61  
Kidney, primary tuberculosis of, 45  
Kidneys in chronic malaria, chronic enlargement of, 153  
KINSCHERF: Closure of colostomy, 601  
KINSELLA: Blood changes in influenza, 577  
KISSMEYER, A.: "Silver salvarsan" in syphilis, 349  
KLEBLATT, F.: Indications for splenectomy, 95  
KLEINBERG: Tuberculin treatment of bone disease, 501  
KLIEBER: Toxins of Shiga's dysentery bacillus, 206  
KLOPF: Strangulated obturator hernia, 68  
KLOSE, H.: Arthroscopy in gonorrhoeal arthritis, 70—Thymus stenosis in children, 188  
KLOTZ, M.: Is normal horse serum as effective as antidiphtherial horse serum? 36  
KORTTLITZ: Sarcoma of stomach, 64  
KOLLER: Treatment of cystitis with colloidal silver, 643  
Kondolson's operation for elephantiasis, 274  
KORNITZER: Leiomyoma of the left and endothelioma of the right pleura, 28  
KORSBERG, A.: "Silver salvarsan" in syphilis, 350  
KORZNY, K.: Neo-salvarsan in syphilitic disease of heart and aorta, 317  
KRAMER, P. H.: Typhus in Rotterdam, 314—Incubation period of typhus, 593  
KUDELAKI: Acute myoclonic encephalitis, 459—Lethargic encephalitis with relapse, 462  
Kyphosis, dorsal juvenile, 736  
KYRLE, J.: Colloidal gold test in the cerebro-spinal fluid in syphilis, 208

## L.

LAAN, H. A.: Congenital absence of the tibial antici, 44  
Labour, radiography of the third stage of, 711  
Labour, rupture of rectum during, 479  
Labour, vaginal dilatation by Champetier de Ribes's bag during, 513  
LACKIE, Lamond: Artificial rotation of the head in persistent occipito-posterior positions, 329  
LACOURBE: Corpus luteum in pernicious vomiting of pregnancy, 647  
LACOUTURE, J.: Primary abdominal pregnancy following Caesarean section, 126  
Lactation and influenza, 556  
LAGOUTTE: Unusual variety of hour-glass stomach, 554  
LAGUESSE: Internal secretion of the pancreas, 400  
LAHEY, F. H.: Thyroidectomy for Graves's disease, 91  
LALOR: Cause of epilepsy, 619  
LAMSON, O. F.: Recurrent nephrolithiasis, 278  
LAMY: Dissociated biliary retention, 406  
LANDE, P.: Hemiplegia following wound of upper thoracic region, 509  
LANDES: Criminological value of a fourth horizontal frontal convolution, 748  
Lane plates, 41  
LANGER: Chorion-epithelioma in the male, 100  
LAROUCHE, G.: Typhoid meningitis, 521  
Laryngeal stenosis, cicatricial, in children, 379  
Larynx in pregnancy, oedema of, 330  
LATHAM: Lumbar puncture: a warning, 186  
LAUBRY: Isolated congenital dextrocardia, 688  
LAURENT, C.: Case of syphilitic reinfection, 505  
LAWEN, A.: Oxyuris appendicitis, 302  
Lead poisoning, chronic, after a bullet wound, 96  
LECHELLE: Osteitis deformans affecting a single long bone, 415  
LEGAGNEUX: Skin disease caused by a pedicoid in a cargo of barley, 533  
LEGGETT, T. H.: Etiological relation of pyloric obstruction to gastric tetany, 309  
LEGURE: Value of pyelography, 545  
Leiomyoma of the left and endothelioma of the right pleura, 28  
LEMON: Angioma of stomach, 363  
LEOBARDY, J.: Recurrent haematemesia in chronic obliterative pyelophlebitis, 696  
LEONCINI, D.: Hidden death from intrapleural perforation of stomach, 380  
Leprosy, treatment of, 697  
LEREBOLLETT, P.: Chronic rheumatism with dislocation following acute articular rheumatism, 410  
LÉRI, A.: Localized forms of vertebral rheumatism, 690  
LERICHE, R.: Varicose eczema and perivenous sympathetic nerves, 634  
LESNE, E.: Resistance to poisons according to age, 77



Leucocytes in influenza, 24  
 Leucocytes in malaria, 157  
 Leukaemia, avian, 747  
 Leukaemia, deep irradiation in, 244  
 LEVADITI: Virus of encephalitis lethargica, 455  
 LEVY, C. S.: Congenital absence of one lung, 483  
 LEVY, G.: Involuntary movements following influenza and lethargic encephalitis, 461  
 LEVY-LENZ: "Silver salvarsan" in syphilis, 508  
 LEWIN, C.: Auto-serotherapy in cancer, 327  
 LEWIS: Sterilization of lipo-vaccines, 307  
 LEWY: A third form of paratyphoid, 52  
 LICHTENSTEIN, A.: Treatment of pylorospasm, 161  
 LIEBMANN, E.: Myocarditis from CO poisoning, 102  
 LIGNAC, G. O. E.: Urethral polypus, 171  
 LILIENTHAL: Thoracic fistulae, 169  
 LINDBERG, G.: Empyema in the first year of life, 220  
 LINDBLOM, S.: Significance of hyperglycaemia in diabetes, 518  
 Linitis, plastic, 133  
 LINTZ J.: Etiological relation of pyloric obstruction to gastric tetany, 309  
 Lipoma of caecum, submucous, causing intestinal obstruction, 602  
 Lipoma, subconjunctival, 367  
 Lipo-vaccines, sterilization of, 307  
 LITTMAN: Calomel injections, 9  
 Liver, aneurysm of, 117  
 Liver, acute atrophy of, pregnancy, salvarsan treatment, 260  
 LOBELL: Scarlet fever complicated with pneumonia, 182  
 LOIR: Skin disease caused by a pediculoid in a cargo of barley, 533  
 LOMBY: Diphtheria bacilli in the lungs, 72  
 Long bones, causes of delayed union and non-union in fractures of, 248  
 Long bones, intramedullary beef-bone splints in fractures of, 88  
 Long bones, conservative treatment of sarcomata of, 703  
 LONGO, L.: Submucous lipoma of caecum causing intestinal obstruction, 602  
 LONNE, F.: Diphtheria in the newborn, 167  
 LOOSER: Blood transfusion in obstetrics, 478  
 LÖWENSTEIN: Virus of febrile herpes, 286  
 Luetin reaction of Sachs and Georgi, 751  
 Lumbar puncture, site of, 187  
 Lumbar puncture, a warning, 186  
 Luminal in epilepsy, 142  
 Lung, congenital absence of one, 483  
 Lung, primary cancer of, 469  
 Lung, septic necrotic infarct of, 365  
 Lungs, abscess of. *See Abscess*  
 Lungs, diphtheria bacilli in, 72  
 Lupus erythematosus and tuberculosis, 269  
 Lupus vulgaris, treatment of, 328  
 Lymphangioma of aorta, hypertrophic, 99  
 Lymphangitis, generalized pulmonary cancerous and early gastric cancer, 473  
 Lymphatic foci in the thyroid in Addison's disease, 203  
 Lymphogranulomatosis of intestine, 393

## M.

MACADAM: Resemblance between oriental sore and epithelioma, 552  
 MACCABRUNI, F.: Significance of Rieder's cells in gynaecology and obstetrics, 683  
 MACCALLUM, W. G.: Etiological relation of pyloric obstruction to gastric tetany, 309  
 MCCOY: Detection and treatment of pneumococcus carriers, 156  
 MACELLROY, W. S.: Methaemoglobinæmia due to the bromoseltzer habit, 405  
 "Maceration of the living child," 710  
 MACFARLAN: Germicidal value of potassium mercuric iodide, 669  
 MCGEARY: Treatment of burns, 65  
 MCJUNKIN: New method of staining blood films, 179  
 MCKIBBEN: Round worm infection clinically simulating pneumonia, 241  
 MACLEAN: Testing of renal efficiency, 362  
 MCINTOSH: Reaction of culture media, 364  
 MACLENNAN: Adrenal rests in hernial sacs, 92  
 Macrophages of the loose connective tissue, 51  
 MADERNA, C.: Extragenital inoculation of soft sores, 121  
 MAGGIORA: The etiology of encephalitis lethargica, 482  
 MAGGIORE, S.: Vaccine treatment of Mediterranean fever, 372  
 Magnesium sulphate in tetanus, 699  
 MAGNUS-LEVY: Diabetes in war, 33  
 Malaria, chronic, chronic enlargement of the kidneys, 153  
 Malaria, diagnosis of, 723  
 Malaria, combined quinine and methylene blue treatment of, 297  
 Malaria, intravenous quinine in, 397  
 Malaria, latent, adrenalin in diagnosis of, 234  
 Malaria, paraplegia in, 564  
 Malaria, leucocytes in, 157  
 Malaria, prophylactic quinine in, 266

Malaria, treatment of, 235  
 Malarial hemiplegia in an infant, 242  
 Malarial orchitis, 324  
 MALLET: Radiography of the abdomen after the introduction of oxygen into the peritoneal cavity, 641  
 MALLIE, H.: Pulmonary sequelae of mustard gas, 209  
 Mammary hypertrophy, bilateral, 741  
 Mammary hypertrophy treated by subcutaneous injections of human milk, 740  
 MANALANG: Growth forms of the Pfeiffer bacillus, 155  
 MANCINI: Influenza in children, 165  
 Mania, chronic, trophodema in, 624  
 MANINI, L.: Medical treatment of hepatic abscess, 659  
 MANSILLA, S. G.: Injections of cow's milk in eye diseases, 475  
 MANTOVANI: Etiology of encephalitis lethargica, 482  
 MARANON, G.: Constant sign of hyperthyroidism, 107  
 MARASPINI: Cicatricial tuberculous stenosis of trachea, 183—Rhinoscleroma in Egypt, 472  
 MARGESON: Placental tumour, 306  
 MARIE, P.: Involuntary movements following influenza and lethargic encephalitis, 461  
 MARINUCCI: Pernicious anaemia in a child, 342  
 MARION: Ureteral papillomata, 15—Transverse suture of vesico-vaginal fistulae, 547—Chronic vesiculitis and enlarged prostate, 578  
 MARSHALL, H. W.: Treatment of spinal injuries, 700  
 MARSMAN, M. W.: Second attack of scarlet fever, 103  
 MARTIN: Danger of anaphylaxis with antitoxic serums, 73  
 MARTINO, P. J.: Tonsils and adenoids in children, 264  
 MASPARINI, H.: Endocranial complications of acute otitis media, 93  
 MASOIN, P.: Diazo reaction in epilepsy, 749  
 Massage of prostate, 199  
 MASSIAS, C.: Abortive forms of lethargic encephalitis, 402  
 MASSARI, C.: Epidemic encephalitis simulating acute abdominal disease, 460  
 MASSART: Bilateral malignant ovarian cystoma and pregnancy, 712  
 MATHIEU, C.: Tuberculosis of the hernial sac in a child, 704  
 MAURIAC, P.: Subarachnoid meningeal haemorrhage, 595  
 MAYER, A.: Abortive and early treatment of influenza, 346  
 MAYER, L.: Recovery from acute haemorrhagic pancreatitis, 357  
 MAZZOLINI: Albuminuria in tuberculosis, 497  
 MEANS: Exophthalmic goitre, 56  
 MECQUET, P.: Spontaneous rupture of abdominal aorta, 488  
 Medication by subcutaneous injection, dangers of, 577  
 Mediterranean fever. *See Fever*  
 Melanomas, primary, of male breast, 22  
 MELLO, S.: Intravenous injections of corrosive sublimate in severe infections, 2  
 Meningeal symptoms and lethargic encephalitis, 463  
 Meningeal syphilis. *See Syphilis*  
 Meningitis, cerebro-spinal, treatment of, 628  
 Meningitis, acute meningococcal, with multiple arthritis, 567  
 Meningitis, diphtheroid bacillus, 259  
 Meningitis, experimental, 714  
 Meningitis, ventricular puncture for, 221  
 Meningitis and myositis in puerperal pyaemia, 46  
 Meningitis, purulent pneumococcal, in influenza, 81  
 Meningitis, circumscribed spinal, cured by operation, 119  
 Meningitis, secondary, treated by intraspinal injections of autogenous serum, 623  
 Meningitis, staphylococcal, treated by intrathecal injections of colloidal tin, 727  
 Meningitis, tuberculous, Froin's syndrome in, 5—Serum treatment of, 559  
 Meningitis, typhoid, 521  
 Meningitis, ventricular puncture for, 221  
 Meningococcal meningitis. *See Meningitis*  
 Meningococcal septicaemia, 312  
 Meningococcal septicaemia with petechial eruption, 108  
 Menstrual equivalents in tuberculosis, 201  
 Mental disorders associated with old age, 722  
 Mental disease, subcutaneous injections of sodium bromide in, 591  
 "Mercurochrome-220," 131  
 Mercury, permeability of placenta to, 681  
 MERZWEILER: Sachs-Georgi and Meinicke reactions in syphilis, 101  
 Mesenteric cyst, 419  
 Mesenteric or retro-peritoneal suppuration simulating appendicitis, 147  
 Metallic râles in infancy, diagnosis of, 656  
 Methaemoglobinæmia due to the bromoseltzer habit, 405  
 Methylene blue and quinine combined in treatment of malaria, 297  
 MEUNIER, M.: Lethargic encephalitis, 563  
 MEYER, C.: Spinal cord tumour and pregnancy, 548

MEYER-RUEGG: "Maceration of the living child," 710  
 MEYERS, A. E.: Dilatation of colon in children, 633  
 MICHE, F.: Intradermal reaction with extract of tuberculous urine, 237  
 MICHON: Ascending uretero-pyelitis, 222  
*Micrococcus crassus* causing relapsing myositis, 383  
 Micro-organisms cultivated on acid and alkaline media, agglutinability of, 550  
 MIDDLETON, W. S.: Auriculo-ventricular heart-block in children, 566  
 MILES: Internal piles, 39  
 MILIAN, G.: Eczema and tuberculosis, 527  
 Milk, cow's, injections of in eye diseases, 475  
 Milk, human, subcutaneous injections of in treatment of mammary hypertrophy, 740  
 MINOT: Blood changes in T.N.T. poisoning, 152  
 MINVILLE: Primary tricuspid endocarditis, 596  
 MITTERSTILLER, S.: Post-influenzal suppuration, 60  
 MOCHI, A.: Metastatic solitary cerebral abscess, 427  
 MOENCH: Round ligament tumours, 677  
 MOLIN DE TEYSSEU: Traumatic cerebellar haemorrhage, 356  
 MOMM: Pregnancy and body weight, 581  
 MONDOLFO, E.: Atypical forms of typhoid fever, 315  
 Mongolian idiocy in brothers, 404  
 Mongolism, etiology of, 257  
 MONRAD: Hysteria in childhood, 294  
 MONTEFASCO, A.: Treatment of tetanus, 600  
 MONTGOMERY: Acute typhoid cholecystitis in children, 382  
 MORETON: Intussusception in typhoid fever, 642  
 MOORE, J. E.: Cerebro-spinal fluid in multiple sclerosis, 308  
 MOORHEAD, J. G.: Infantile, intestinal and pancreatic, 398  
 MORGAN: Spinal anaesthesia in pelvic operations, 682  
 MORIN, A.: Arsenobenzol and anaphylaxis, 432  
 MORINI: Culture of gonococcus, 336  
 Morphine poisoning, 407  
 MORRISON: Studies in bone growth, 412  
 MORSE, J. Lovett: Congenital stricture of oesophagus, 355  
 Morton's method for rapid diagnosis of tuberculosis, 130  
 Motor nerves. *See Nerves*  
 MOTZFELDT, K.: Dietetic treatment of renal insufficiency, 399  
 MOUCHET: Hot-air treatment of naevi, 607  
 MOUISSET: Latent cirrhosis in tuberculosis, 531  
 MOURE: Abdominal pregnancy of six months, 202  
 MOURE, E. J.: Cicatricial laryngeal stenosis in children, 379  
 MOURIQUAND, G.: Chlorotic form of trichoccephalitis, 265  
 MOUZON, J.: Chronic rheumatism with dislocation following acute articular rheumatism, 410  
 MRAS, F.: Colloidal gold test in the cerebro-spinal fluid in syphilis, 208  
 Mucous colitis, zinc oxide in treatment of, 431  
 MÜHSAM, R.: Friedman's turtle vaccine in tuberculosis, 8  
 MÜLLER: Tissue grafts from immunized animals, 334  
 MÜLLER-DEHAM, A.: Neosalvarsan in syphilitic disease of heart and aorta, 317  
 MÜNZER, E.: Septicaemic endocarditis, 616  
 MURARD: Abdominal migration of testicle, 569  
 Muscle, striated, regeneration of, 180  
 Muscle of uterus, changes in during involution, 359  
 Mustard gas. *See Gas*  
 MÜTEL, M.: Tuberculosis of hernial sac in a child, 704  
 Myasthenia gravis with exophthalmic goitre, 214  
 Myelitis, fatal influenzal, 230  
 MYGIND, S. H.: Disease of orbit originating in the nasal sinuses, 737  
 Myocarditis from CO poisoning, 102  
 Myocarditis, eosinophilous, in diphtheria, 231  
 Myoclonic encephalitis. *See Encephalitis*  
 Myoma of uterus, malignant, 422  
 Myomectomy, vaginal, 515  
 Myositis and meningitis in puerperal pyaemia, 46  
 Myositis, relapsing, due to *Micrococcus crassus*, 383  
 Myositis ossificans, 215  
 Myotonic encephalitis. *See Encephalitis*

## N.

NACKEN: *Ascaris lumbricoides* in the Fallopian tube, 680  
 NADAL, L.: Influence of acute infections on hereditary syphilis, 82  
 NADERNA: Primary sore of conjunctiva, 417  
 NAESSENS, W. M.: Combined method of percussion and auscultation for detecting enlarged hilus glands, 598  
 Naevi, hot-air treatment of, 607

NAGEL, Käthe: Morton's method for rapid diagnosis of tuberculosis, 130  
NAGEOTTE: Regeneration of striated muscle, 180  
Narcosis, intraperitoneal, experiments with, 706  
Nasal sinuses, accessory, Pfeiffer's bacillus in, 25  
NAUWELAERS, P.: Lethargic encephalitis, 568  
NAZARI, A.: Chronic enlargement of the kidneys in chronic malaria, 153  
NEANDER, A.: Post-operative prognosis for cancer of breast, 120  
Necrosis of clavicle, 192  
NEDDERN, Zur: Treatment of affections of the vitreous, 326  
Neo-salvarsan in syphilitic disease of heart and aorta, 317—in lethargic encephalitis, 661  
Nephritis, blood sugar in, 232  
Nephritis, affections of the peripheral vessels in, 26  
Nephritis, protein and lipid content of the blood serum in, 488  
Nephritis, trench, 158  
Nephrolithiasis, recurrent, 278  
Nephrotomy versus pyelotomy for calculi, 252  
Nerve defects, results of bridging, 408  
Nerve injuries, peripheral, 195  
Nerve, right facial, weakness of in epileptics, 466  
Nerve regeneration after impregnation with alcohol, 584  
Nerves, cervical, vagus and sympathetic, experiments on, 74  
Nerves, motor, partial resection of in spastic hemiplegia, 420  
Nerves, perivascular sympathetic, and varicose eczema, 634  
NETTER: Sugar content of the cerebro-spinal fluid in lethargic encephalitis, 426  
NEUDA, P.: Early death in burns, 20  
Neuritis, compression, by first rib, 664  
Neurosis, mechanistic classification of, 110  
Neuro-syphilis, intraspinal treatment of, 216  
NICCOLAI, N.: Clinical varieties of chronic chorea, 500  
NICOLAYSEN, K.: Experimental gastric ulcer, 744  
NICOLICH: Pyelotomy versus nephrotomy for calculi, 252  
NIXON: Colloidal gold reaction, 453, 687  
NOEL: Chances in uterine muscle during involution, 359  
NORDENTORF, S.: X-ray treatment of Graves's disease, 78  
NÖRVIG, J.: Parathyroid epilepsy, 484  
Novarsenobenzol, intravenous, blood pressure after, 498  
NUZUM, F.: Eosinophilous myocarditis in diphtheria, 231  
NYULASY: Pelvic septic phlebitis, 480

## O.

Obstetrics, blood transfusion in, 478  
Obstetrics and gynaecology, significance of Rieder's cells in, 683  
Obturator test or thigh rotation, 673  
Occipito-posterior positions, artificial rotation of the head in persistent, 329  
Ocular changes in encephalitis lethargica, 134  
Ocular compression, practical applications of, 57  
Ocular paralysis of otic origin, 353  
Oedema, angio-neurotic, 210  
Oedema, causes of, 285  
Oedema of larynx in pregnancy, 330  
Oesophageal diverticulum, 503  
Oesophagus, cicatricial stenosis of, 666  
Oesophagus, congenital stricture of, 355  
OLITSKY: Toxins of Shiga's dysentery bacillus, 206  
Olives, ripe, poisoning by, 652  
O'MALLEY: Skin reaction in quinine idiosyncrasy, 31  
Omentum, torsion of, diagnosed as appendicitis, 192  
Omphalitis, 423  
ONATE, A. F.: Influenzal metastatic ophthalmia, 194  
Ophthalmia, influenzal metastatic, 194  
OPPENHEIM, M.: Rapid institutional treatment of scabies, 592  
Oral auscultation, 629  
Orbit disease originating in the nasal sinuses, 737  
Orbit, periosteal tuberculoma of, 123  
Orbital cyst, congenital, 502  
Orchitis, malarial, 324  
Oriental sore and epithelioma, resemblance between, 552  
ORR: Treatment of compound fractures, standard splints, 733  
ORTICONI, A.: Prophylactic value of gaseous disinfectants and fumigations in infectious disease, 83  
Osteitis deformans affecting a single long bone, 435  
OSTENDORF: Hypertrophic pulmonary osteoarthropathy, 94  
Osteoarthropathy, hypertrophic, in carcinoma of pleura, 490

Osteoarthropathy, hypertrophic pulmonary, 94  
Osteo-chondroma of stomach wall, 12  
Osteomalacia, senile, 115  
Osteomalacic disease, endemic, 37  
Osteopsathyrosis idiopathica, 71  
Otitis, chronic suppurative, Dakin's fluid in, 413  
Otitis media, acute, endocranial complications of, 93  
Ovarian cystoma, bilateral malignant and pregnancy, 712  
Ovarian cysts, tuberculosis of, 651  
Ovarian residue, 228  
Ovaries, haemorrhage from, 708  
Ovaries, influence of on adrenalin hyperglycaemia, 719  
Oxycephaly, 538  
Oxyuris appendicitis, 302  
Ozaena, vaccine treatment of, 138

## P.

PADERSTEIN: Swimming-bath conjunctivitis, 86  
PAGNIEZ: Anaphylactic nature of asthma, 549  
PALACIO, J.: Various manifestations of late hereditary syphilis, 7  
Palate, soft, influenzal or diphtheritic paralysis of, 61  
Palato-glossal arch in influenza, sign of, 524  
PANCOMET: X-ray sign of perinephritic abscess, 384  
Pancreas, annular, 603  
Pancreas extirpation followed by glycogen in diabetes, 650  
Pancreas, internal secretion of, 400  
Pancreas and thyroid, giant cell sarcoma of, 233  
Pancreatitis, acute, a sign of, 247  
Pancreatitis, acute haemorrhagic, recovery from, 357  
Pancreatitis, chronic, and late hereditary syphilis, 30  
Pancreatitis, experimental haemorrhagic, 617  
PAOLETTI, F.: Prophylactic quinine in malaria, 266  
Papillomata of ureter, 15  
Paraffin gravity drainage. See Wounds  
Paralysis, congenital, of right external rectus, 565  
Paralysis, facial, in influenza, 467  
Paralysis, general, treated by tuberculin, 34  
Paralysis, hysterical, of one leg, 66  
Paralysis, ocular, of otic origin, 353  
Paralysis of soft palate, influenzal or diphtheritic, 61  
Parathyroid epilepsy, 484  
Paratyphoid, a third form of, 52  
PARDEE: Mongolian idiocy in brothers, 404  
PARLETTI: Pathogenesis of cerebral haemorrhage, 746  
PARODI, F.: Acquired diverticula of large intestine, 409  
Parotid fistula, 144—Treated by resection of auriculo-temporal nerve, 449  
Parotitis in typhus, 695  
Parrot's pseudo-paralysis, statistics of, 470  
PARTURIER: Tender spots at root of neck in abdominal disease, 439  
PASTEAU, A.: Haemorrhage in urethral stricture, 448  
PASTURIER, M.: Renal manifestations of cardiac failure, 532, 621  
PATEL: Mammary hypertrophy treated by subcutaneous injections of human milk, 740  
PAUCHET: Cauterization of gastric ulcer, 702  
PAULESCO: Glycogen in diabetes following extirpation of pancreas, 650  
PEHU, M.: Acute meningococcal meningitis with multiple arthritis, 567  
PEJG, G.: Typhoid meningitis, 521  
PELLISIER, M.: Spontaneous rupture of abdominal aorta, 488—Primary cancer of ovary in a girl of thirteen, ablation, cure, 742  
Pelvic operations, spinal anaesthesia in, 682  
Pelvic septic phlebitis, 480  
PERAZZI, P.: Experiments with intraperitoneal narcosis, 706  
Pericarditis with effusion, 489  
Perichondritis, progressive infective, 246  
Perinephritic abscess. See Abscess  
Periosteal tuberculoma of orbit, 123  
Peripheral nerve injuries, 195  
Peripheral vessels, affections of in nephritis and heart disease, 26  
Peritoneal infections, acute, specific reaction of urine in, 516  
Peritonitis: Case of circumscribed traumatic serous, 122  
Peritonitis following perforation of typhoid ulcer, slow evolution of, 289  
Peritonitis, chronic tuberculous, pleuro-peritoneal form of, 217  
Pernicious anaemia. See Anaemia  
Pessary for cystocoele, 743  
PESTALLOZZA, C.: Regional cuti-reaction in children, 657  
PEYRON: Hypernephroma of uterus, 579  
PEZZI, C.: Double crural murmur in aortic incompetence, 562  
Pfeiffer's bacillus in the accessory nasal sinuses, 25

Pfeiffer's bacillus, growth forms of, 155  
Phagocytosis, studies in, 284  
Pharyngeal spasm simulating loss of appetite in children, 85  
Pharyngodynia, influenzal, 58  
Phenololipoids, the, 127  
Phlebitis, pelvic septic, 480  
PHILLIPS: Goitre and the psychoses, 175  
PIAZZA: Antitoxic chemotherapy, the phenololipoids, 127  
PIERFRANCESCO: Treatment of lethargic encephalitis, 464  
PIERRET: Enumeration of *B. coli* in water, 287  
Piles. See Haemorrhoids  
PINARD, M.: Inadequate treatment of meningeal syphilis, 506  
PINELES, F.: War amenorrhoea, 255  
PIRERA, A.: Mixed typhoid and paratyphoid infection, 594  
PIRONDINI: Examination and massage of prostate, 199  
PITRES: Criminological value of a fourth horizontal frontal convolution, 748  
Pituitary dwarfism, 109  
Placenta, permeability of to mercury, 681  
Placenta, retained, 390  
Placenta retained by Bandl's ring, 21  
PLASCHEKES, S.: Diagnostic significance of enlarged intercostal glands, 655  
Plastic linitis, 133  
Plastic surgery of facial burns, 639  
Plastic surgery, tubed pedicle in, 298  
PLATT: Flail joints, 13, 43  
PLATT, H.: Results of bridging nerve defects, 408  
Pleura, leiomyoma of the left and endothelioma of the right, 28  
Pleural effusion, cholesterol in, 23  
Pleurisy, metahepatic, 430  
Pleuro-peritoneal form of chronic tuberculous peritonitis, 217  
PLICQUE: Asthenic tuberculosis, 560  
Pneumococcus carriers, detection and treatment of, 156  
Pneumococcus causing epidemic of throat disease, 626  
Pneumonia, central, 433  
Pneumonia complicating scarlet fever, 182  
Pneumonia, influenzal, artificial acquired immunity to, 582  
Pneumonia, influenzal, prognosis in, 340  
Pneumonia, influenzal, treated by serum from convalescent patients, 290, 658  
Pneumonia, secondary, 240  
Poison gas, organic hemiplegia after, 496  
Poisoning by castor oil seeds, 377  
Poisoning, chronic lead, after a bullet wound, 96  
Poisoning, CO, myocarditis from, 102  
Poisoning, morphine, 407  
Poisoning, T.N.T., blood changes in, 152  
Poisoning by ripe olives, 652  
Poisons, resistance to according to age, 77  
Polyarthritides, chronic, treatment of, 692, 693  
Polycythaemia in juxta-pyloric ulcer, 625  
Polypus, urethral, 171  
POND: Detection of glucose in urine, 553  
POROT, A.: Facial paralysis in influenza, 467  
PORTMANN, G.: Polypoid form of tonsillar chancre, 444  
Potassium mercuric iodide, germicidal value of, 669  
POTTERAT: X-ray carcinoma, 544  
Pott's disease, anomalous case of, 224  
Pott's fractures, reconstruction and after-care of old unredressed, 16  
Precipitin reaction in tuberculosis, 551  
Pregnancy, abdominal, of six months, 202  
Pregnancy, primary abdominal, following Caesarean section, 126  
Pregnancy and bilateral malignant ovarian cystoma, 712  
Pregnancy and body weight, 581  
Pregnancy and the corpus luteum, 707  
Pregnancy, diagnosis of, 229  
Pregnancy, ectopic, 450  
Pregnancy, double ectopic with a living seven months fetus, 279  
Pregnancy, influenza in, 227  
Pregnancy, oedema of larynx in, 330  
Pregnancy and spinal-cord tumour, 548  
Pregnancy, bilateral tubal, 580  
Pregnancy, complicated twin, 151  
Pregnancy, pernicious vomiting of, corpus luteum in, 646, 647, 648  
Pregnancy, wound of uterus in eighth month of, 125  
Pregnant women, Wassermann test in, 614  
Prenatal care, 739  
PRINS, G. A.: Familial icterus neonatorum with fatal course, 84  
Prisoners of war, abdominal enlargement in, 494  
PROBST, L.: Influenza treated by fixation abscess, 631  
Proctitis, "vermillion," in secondary syphilis, 542  
Prostate, enlarged, and chronic vesiculitis, 578  
Prostate, examination and massage of, 199  
Prostate, hypertrophy of, 354  
Prostate, sarcoma of, 543  
Prostatic abscess, 504  
Prostatic surgery, 385  
Protein and lipid content of the blood serum in nephritis, 486



Protein sensitization in asthma and hay fever, 585  
Protein sensitization in the normal child, incidence of, 487  
PROVOST: Simple ulcer of colon, 570  
PROVOST: Streptococci of war wounds, 333  
Pseudarthroses of humerus, 510  
Pseudo-malarial gonococcal fever, 571  
Pseudo-paralysis, Parrot's, statistics of, 470  
Psycho-neurosis, the tuberculous, 374  
Psychoses and goitre, 135  
Psychoses following influenza, 729  
Psychoses, mechanistic classification of, 110  
Puerperal infections treated with normal serum, 421  
Puerperal septicaemia, causes of, 451  
PULAY, E.: Pathogenesis of influenzal alopecia, 267  
Pulmonary embolism. *See* Embolism  
Pulmonary fibrosis. *See* Fibrosis  
Pulmonary sequelae of mustard gas, 209  
PUSATERI, S.: Oedema of the larynx in pregnancy, 330  
Pyæmia, puerperal, myositis and meningitis in, 46  
Pyelography, value of, 545  
Pyelotomy *versus* nephrotomy for calculi, 252  
Pyelophlebitis, chronic obliterative, recurrent hæmatemesis in, 696  
Pyloric obstruction, etiological relation of to gastrectomy, 309  
Pyloric stenosis, congenital, 492  
Pyosalpinx, chronic, conservative operation for, 738  
Pylorospasm, treatment of, 161  
Pyuria, aseptic renal, 716

## Q.

QUARELLI, G.: Diagnosis of malaria, 723  
QUEYRAT, L.: Chance of little finger, 477—Early malignant syphilis, 540  
Quinine dihydrochloride in influenza, 373  
Quinine idiosyncrasy, skin reaction in, 31, 212  
Quinine in malaria, 266, 397—Intravenous injection of, 397  
Quinine and methylene blue combined in treatment of malaria, 297  
Quinine reinforced by fluorescent substances, 318

## R.

Rabies, preventive inoculation against, 491  
Radiography of the abdomen after the introduction of oxygen into the peritoneal cavity, 641  
Radiography of the third stage of labour, 711  
Radioscopy in diagnosis of pulmonary tuberculosis, 529  
Radium in cancer of uterus, 256  
Radium and x rays in laryngeal carcinoma, 226  
RANDALL, A.: Prostatic abscess, 504  
Rat and iatrogenic haemorrhagic spirochaetosis, 332  
RATHERY, F.: Abscesses caused by typhoid bacilli, 720  
RAUTENBERG, E.: Morphine poisoning, 407  
RAUZIER: Primary hydatid cyst of the spinal meninges, 618  
Raynaud's disease with suprarenal insufficiency, 166  
Rectum, rupture of during labour, 479  
Rectum, severe post-dysenteric disease of, 253  
Rectum, sarcoma of, 146  
Rectus, right external, congenital paralysis of, 565  
REDDEN: Treatment of influenza pneumonia by serum from convalescent patients, 290  
REEMSTIERNA, J.: Serum treatment of ulcer molle, 672  
REGAN: Site of lumbar puncture, 187  
Regeneration of striated muscle, 180  
REID: Acute typhoidal cholecystitis in children, 382  
REINHARDT, A.: Oxyuris appendicitis, 302  
REITLER, R.: Combined quinine and methylene blue treatment of malaria, 297  
RÉMOND: Primary tricuspid endocarditis, 596  
REMY: Pessary for cystocoele, 743  
Renal adequacy, 428  
Renal calculi, pyelotomy *versus* nephrotomy for, 252  
Renal calculi, silent, 89  
Renal calculus in spinal injuries, 207. *See also* Calculus  
Renal efficiency, testing of, 362  
Renal function in scarlet fever, 654  
Renal glycosuria, 49  
Renal insufficiency, dietetic treatment of, 399  
Renal manifestations of cardiac failure, 532, 621  
Renal pyuria, aseptic, 716  
Renal tuberculosis, surgical, 351  
RENNIE: Exophthalmic goitre combined with myasthenia gravis, 214  
Respiratory tract, after-effects of gassing on, 137  
REYERDIN: Magnesium sulphate in tetanus, 699

Rheumatism, chronic, with dislocation, following acute articular rheumatism, 410  
Rheumatism, vertebral, localized forms of, 690  
Rheumatoid arthritis treated by autogenous vaccine prepared from the endometrium, 731  
Rhinoliths, primary or true, 668  
Rhinoscleroma in Egypt, 472  
Rib, first, causing compression neuritis, 664  
RIBIERRE: Meningococcal septicaemia, 312  
RICHARD: Vital staining of diphtheria bacilli, 394—Late epilepsy due to endocrinic disturbance, 522  
RICHEY: Skin reaction in quinine idiosyncrasy, 31  
Rickets, the fat soluble vitamins in, 258  
Rieder's cells, significance of in gynaecology and obstetrics, 683  
RIVERS: Classification of influenza bacilli, 519  
RIVIÈRE: Primary abdominal pregnancy following Caesarean section, 126  
ROBERTS, D.: Vaccine treatment of influenza, 106  
ROBERTSON: Rheumatoid arthritis treated by autogenous vaccine prepared from the endometrium, 731  
ROBINSON: Action of digitalis in auricular fibrillation, 368  
ROCAZ: Staphylococcal meningitis treated by intrathecal injections of colloidal tin, 727  
RODMAN: Contusion and rupture of spleen, 250  
ROETTER: The corpus luteum and pregnancy, 707  
ROGERS, Sir Leonard: Treatment of leprosy, 697  
ROLLANDINI, M.: Influenza and lactation, 556  
ROMANO, C.: Congenital cysts of the neck, 174  
RONCORONI, L.: Weakness of right facial nerve in epileptics, 466  
RONDONI, P.: Chemotherapy of tuberculosis, 283  
ROSENTHAL: Deep irradiation in leukaemia, 244  
ROSSI, S. C.: Psychoses following influenza, 729  
ROTHACKER: Changes in the blood and cerebro-spinal fluid in typhus, 53, 75  
Rotterdam, typhus in, 314  
ROUBIER: Primary cancer of lung, 469  
Round worm. *See* Worm  
ROUQUIER: Scarlatiniform erythema caused by codeine 105  
ROUX: Cancer of cervix, implantation of graft on an intracorporeal polypus, 611  
ROUZAUD: Blood sugar in nephritis, 232  
RUBIN: Test of the patency of Fallopian tubes, 610  
RUBINO, G.: Pleuritic type of aortic aneurysm, 525  
RÜDEL, O.: Sign of impending death, 347  
RUNEBOER, B.: Aseptic renal pyuria, 716  
RUSSA's test for glycosuria, 517  
RUSZNYAK, S.: Reinforcement of quinine by fluorescent substances, 318  
RYDGAARD, F.: Cholelithiasis and achylia, 411  
RYERSON: Intramedullary beef-bone splints in fractures of long bones, 88

## S.

SABATUCCI, F.: Paraplegia in malaria, 564  
SABOURIN: Menstrual equivalents in tuberculosis, 201  
SABRAZES, J.: Abortive forms of lethargic encephalitis, 402  
SABROE, A.: Treatment of influenzal empyema, 319  
Sachs-Georgi and Meinicke reactions in syphilis, 101  
Sachs-Georgi reaction, practical value of, 204—Luetic reaction of, 751  
SAILER: Detection and treatment of pneumococcus carriers, 156  
Salicylsulphonic acid in typhus, 55  
Salivary and endocrine glands, 35  
Salpingitis, turpentine injections for, 645  
Salvarsan in a pregnant woman with acute atrophy of liver, 260  
Salvarsan "silver" in syphilis, 349, 350, 445, 508  
Salvarsan treatment of syphilis, 445  
SANDERS, T. M.: Treatment of secondary meningitis by intraspinal injections of autogenous serum, 62  
SANFORD: Protein sensitization in asthma and hay fever, 585  
SANTY: Experimental chronic gastric ulcer, 686  
SAPHIR: Sarcoma of rectum, 146  
SAQUET, R.: Trophoedema in chronic mania, 624  
Sarcoma, Kaposi's, 456  
Sarcoma of prostate, 543  
Sarcoma of rectum, 146  
Sarcoma of scrotum and spermatic cord, 62  
Sarcoma of small intestine, 665  
Sarcoma of stomach, 64  
Sarcoma of stomach, primary, 440  
Sarcoma of thyroid and pancreas, giant cell, 233

Sarcomata of long bones, conservative treatment of, 703  
SAVAGE: Mental disorders associated with old age, 722  
SAVARIAUD: An early tubal gestation, 391  
SAVIGNAC, R.: Case of emetine idiosyncrasy, 185  
SAXE: Vaginal dilatation by Champetier de Ribes's bag during labour, 613  
Scabies, rapid institutional treatment of, 592  
SCHAFER: Experiments on the cervical, vagus, and sympathetic, 74  
SCHEEL, O.: Blood transfusion in pernicious anaemia, 630  
SCHEEL, V.: Acute atrophy of liver, pregnancy, salvarsan treatment, 260  
SCHEUERMANN, H.: Dorsal juvenile kyphosis, 736  
SCHIFF: A third form of paratyphoid, 52  
SCHLESINGER: Action of adrenalin in old age, 371  
SCHULEIN, M.: Rupture of biceps by direct force, 173  
SCHWARZ, Botho: Retained placenta, 390  
SCHWARZ, H.: Abscess of lungs in infants and children, 358  
SCHWENKENBECHER: Surgical emphysema in influenza, 295  
Sciatica, subcutaneous injections of camphor oil in, 111  
Sclerosis, disseminated, unusual case of, 10  
Sclerosis, multiple, cerebro-spinal fluid in, 308  
Scrotum, sarcoma of, 62  
SEIDEL: Recurrent dislocation of shoulder, 352  
SENGES, N.: Facial paralysis in influenza, 467  
Septicaemia, meningococcal, with petechial eruption, 108  
Septicaemia, puerperal, causes of, 451  
Serum, horse: Is the normal horse serum as effective as antidiphtherial horse serum? 36  
Serum treatment of haemorrhage, 87  
Serum treatment of tuberculous meningitis, 559  
Serum treatment of ulcer molle, 672  
SGAMBATI, O.: Specific reaction of urine in acute peritoneal infections, 516  
Shiga's dysentery bacillus, toxins of, 206—An inagglutinable form of, 361  
Shock, camphor oil in, 139  
Shoulder, recurrent dislocation of, 352  
SICARD: Acute myoclonic encephalitis, 459—Lethargic encephalitis with relapse, 462  
SIGALAS, R.: Spirochaetes in urine of guinea-pigs, 331  
"Silver salvarsan." *See* Salvarsan  
SILVESTRI: Epileptic fits produced by suprarenal preparations, 4—Treatment of malaria, 235  
SIMON, C.: Comparative investigations on the Wassermann reaction in the blood and urine, 458  
SIMON, R.: Myositis and meningitis in puerperal pyæmia, 46  
Sinusitis, purulent sphenoidal complicated by acute suppurative hypophysitis, 586  
Sinusoidal currents, death following application of, 132  
SIRECI, D.: Studies on phagocytosis, 284  
SISTRUNK, W. E.: Cysts of thyroglossal tract, 573  
Skin disease caused by a pediculoid in a cargo of barley, 533  
Skin reaction in quinine idiosyncrasy, 31, 212  
SLATER: "Normal" appendix, 320  
SMART: Reaction of culture media, 364  
SMITH: Renal glycosuria, 49  
SMEED: Reconstruction and after-care of old unreduced Pott's fractures, 16  
Sodium bromide in mental disease, subcutaneous injections of, 591  
Sodium taurocholate in prophylaxis of gonorrhoea, 606  
Soft sores. *See* Syphilis  
SOFRE: False cancer of stomach, 275—Central pneumonia, 433  
SOLI: Permeability of the placenta to mercury, 681  
SOLINA, C.: Primary tuberculosis of kidney, 45  
SORESI: Elastic closure and systematic paraffin gravity drainage for wounds, 277  
Souques, A.: Generalized loss of reflexes in cranio-meningeal wounds, 416—Syndrome of the geniculate ganglion, 495  
SPADA: Investigations on *Spirochaeta ictero-haemorrhagiae* in Buenos Aires rats, 128—Chorion-epithelioma of testis, 608  
Spermatic cord, sarcoma of, 62  
SPREGL: Strangulation of stomach in hernia, 670  
Spina bifida in adults, 414  
Spina bifida, statistics of, 184  
Spinal anaesthesia in pelvic operations, 682  
Spinal cord, decompression of in tuberculosis of spinal column, 701  
Spinal cord tumour and pregnancy, 548  
Spinal column, tuberculosis of, decompression of spinal cord in, 701  
Spinal injuries, renal calculus in, 207  
Spinal injuries, treatment of, 700  
Spinal meninges, primary hydatid cyst of, 618  
*Spirochaeta ictero-haemorrhagiae* in Buenos Aires rats, 128  
Spirochaetes in urine of guinea-pigs, 331

- Spirochaetosis, ictero-haemorrhagic, and the rat, 332  
Spleen, contusion and rupture of, 250  
Splenectomy, indications for, 95. *See also* Banti's disease  
Splenomegaly, haemolytic familial, 653  
Splints, beef-bone, intramedullary, in fractures of long bones, 88  
SPOLVERINI, L.: Diphtheria of nose and ear in an infant aged 30 days, 113—Malarial hemiplegia in an infant, 242  
Sporotrichosis of the genitals, 541  
Staphylococcal meningitis treated by intrathecal injections of colloidal tin, 727  
Starvation in eclampsia, 200  
STEARNS: Treatment of varicose ulcers, 635  
STEFANO: Erythema nodosum and tuberculosis, 54  
STEIN: Ectopic pregnancy, 450  
Stenosis, cicatricial laryngeal, in children, 379  
STEPHANI, T.: Tuberculosis complicated by hypothyroidism, 526  
Sterility, 175—Observations on 300 cases of, 176  
Sterility and Graves's disease, 47  
STERN: Plastic repair of urethral stricture, 604—Technique of epididymectomy, 605  
STETTNER, E.: Stimulation of backward growth by x rays, 322  
STEVEN, A.: Heliotherapy and blood pressure, 141  
STEWART, Clara: Adenomyoma invading the ileum, 387  
STEWART: Vaccination against influenza, 160  
STIEBER: Encephalitis lethargica in Austria, 721  
STOCKTON, C. G.: A long remission in pernicious anaemia, 3  
STOELTZNER, W.: Etiology of mongolism, 257  
Stomach, angioma of, 363  
Stomach, false cancer of, 275  
Stomach diseases, sham feeding test in, 726  
Stomach, hour-glass, 301—Unusual variety of, 554  
Stomach, sarcoma of, 64, 440  
Stomach, shape of, 291  
Stomach, sudden death from intrapleural perforation of, 380  
Stomach strangulation in hernia, 670  
Stomach wall, osteochondroma of, 12  
STOSS: Leucocytes in malaria, 157  
STRADIOTTI, G.: Intravenous quinine in malaria, 397  
STRANDGAARD: Circumscribed spinal meningitis cured by operation, 119  
Streptococci liquefying gelatin, 282  
Streptococci of war wounds, 333  
Striated muscle, regeneration of, 180  
STROZZI: Injuries of bladder and urethra in war, 143  
STUTZIN, J. J.: Infarct of testicle in gonorrhoea, 198  
Subconjunctival lipoma, 367  
Subcutaneous injection, dangers of medication by, 577  
SUDECK: Aneurysm of liver, 117  
Sugar, action of hypodermic injections of, 343  
Sugar, blood, in nephritis, 232  
Sugar content of the cerebrospinal fluid in lethargic encephalitis, 426  
SVERKEN: Aortic compression for haemorrhage, 389  
SUNDBERG, H.: Operations for embolism, 599  
Sunlight, reflected, in treatment of whooping-cough, 59  
Suppuration, post-influenza, 60  
Suprarenal preparations producing epileptic fits, 4  
Surgery, plastic, tubed pedicle in, 298  
SVITH, N.: Hysterical paralysis of one leg, 65  
SWARTZ: A new germicide—"mercurochrome-220," 131  
SWATT: Lane plates, 41  
Swimming-bath conjunctivitis, 86  
Sympathetic cervical, and vagus nerves, experiments on, 74  
Syphilis and angina pectoris, 163  
Syphilis, colloidal gold test in the cerebrospinal fluid in, 208  
Syphilis, congenital, decline of during the war, 375  
Syphilis, early malignant, 540  
Syphilis, extragenital inoculation of soft sores, 121  
Syphilis as a factor in the ocular complications of typhoid fever, 239  
Syphilis, hereditary, influence of acute infections on, 82  
Syphilis, late hereditary, chronic pancreatitis and, 30  
Syphilis, late hereditary, various manifestations of, 7  
Syphilis, history of, 507  
Syphilis, meningial, inadequate treatment of, 506  
Syphilis, primary, diagnosis of by culture, 311  
Syphilis causing pulmonary emphysema, 730  
Syphilis, Sachs-Georgi reaction, practical value of, 204  
Syphilis, Sachs-Georgi and Meinicke reactions in, 101  
Syphilis, salvarsan treatment of, 445  
Syphilis, secondary, "vermillion" proctitis in, 542  
Syphilis, "silver salvarsan" in, 349, 350, 445, 508  
Syphilis and tobacco poisoning, arterial disease in, 262  
Syphilis, Wassermann reaction in, 205. *See also* Wassermann  
Syphilitic disease of heart and aorta, neo-salvarsan in, 317  
Syphilitic reinfection, 505  
Syphilitic stenosis of trachea, 268  
Syphiloma, ano-rectal, pathogenesis of the so-called, 583  
SZIGETI: Encephalitis lethargica in Austria, 721
- T.
- Tabes, pathogenesis of disturbances of micturition in, 38  
Table utensils transmitting tubercle bacilli, 691  
TADDEI: Ether as an anaesthetic for short operations, 172  
Tansini's operation for Banti's disease, 249  
Teeth extraction and heart disease, 705  
TEILMANN, F.: Recurrent dislocation of head of fibula, 386  
Temperature of expired air in febrile patients, 366  
Tendo-vaginitis, influenzal, 67  
TERRIEN, E.: Organic hemiplegia after poison gas, 496—Trophodema in chronic mania, 624  
Testicle, abdominal migration of, 569  
Testicle, infarct of in gonorrhoea, 198  
Testis, chorion epithelioma of, 608  
Tetanus, magnesium sulphate in, 699  
Tetanus, post-operative, 637  
Tetanus, treatment of, 600  
Tetany, gastric, etiological relation of pyloric obstruction to, 309  
THACKER-NEVILLE: Pfeiffer's bacillus in the accessory nasal sinuses, 25  
THALER: Tonsillar abscess, acute mixed leukaemia, leukaemic tubal infiltration, 717  
Thigh rotation or obturator test, 673  
THOM: Poisoning by ripe olives, 652  
THOMSEN, O.: Dangers of medication by subcutaneous injection, 577  
THOMSON, A.: The ripe human Graafian follicle, 546  
Thoracic fistulae, 169  
Thoracoplasty in pulmonary tuberculosis, 116  
Thorax, penetrating wounds of, 303  
Thorax, wound of, followed by hemiplegia, 509  
Throat disease, epidemic of, due to the pneumococcus, 626  
Throat, foreign body in, peculiar case of, 735  
Thrombo-phlebitis of upper limb, 476  
Thrombosis, cavernous sinus, treatment of, 148  
Thymus stenosis in children, 188  
Thyroglossal tract, cysts of, 573  
Thyroid in Addison's disease, lymphatic foci in, 203  
Thyroid and pancreas, giant cell sarcoma of, 233  
Thyroidectomy for Graves's disease, 90, 91  
Thyroiditis, acute suppurative, 19  
Tibiales antici, congenital absence of, 44  
TILLICH: Action of influenza on tuberculosis, 589  
TISSIER: Liquefaction of gelatin by streptococci, 282  
Tissue grafts from immunized animals, 334  
TIXIER: Subperitoneal cholecystectomy, 638  
T.N.T. poisoning, blood changes in, 152  
Tobacco poisoning and syphilis, arterial disease in, 262  
TODD: Observations on Mexican typhus, 715  
Tonsillar abscess. *See* Abscess  
Tonsillar chancre simulated by Vincent's angina, 316  
Tonsillar chancre, polypoid form of, 444  
Tonsils and adenoids in children, 264  
TORREX: Inguinal hernia, 225  
TORRE Y BLANCO: Double ectopic pregnancy with a living seven months fetus, 279  
TOSSELTI: Uretero-cervical fistula after forceps delivery, incision, spontaneous cure, 709  
TOURNEUX, J. P. and G.: Vaginal cyst with mixed epithelial lining, 684—Epithelioma developing in a fibroid polypus of uterus, 685  
Toxicology of hydrocyanic acid, 236  
Trachea, cicatricial tuberculous stenosis of, 183  
Trachea, syphilitic stenosis of, 268  
Tracheo-bronchitis in influenza, membranous, 438  
Trench nephritis, 158  
Trichocephalasis chlorotic form of, 265  
Trophodema in chronic mania, 624  
Tubed pedicle in plastic surgery, 298  
Tubercle bacilli transmitted by table utensils, 691  
Tuberculin treatment of bone disease, 501  
Tuberculin treatment of general paralysis, 34  
Tuberculosis, albuminuria in, 497  
Tuberculosis of appendix, 536  
Tuberculosis, asthenic, 560  
Tuberculosis and cancer, association of, 154  
Tuberculosis of cervix, 609  
Tuberculosis, chemotherapy of, 283  
Tuberculosis, latent cirrhosis in, 531  
Tuberculosis and eczema, 527  
Tuberculosis and erythema nodosum, 54, 313  
Tuberculosis and exophthalmic goitre, 725  
Tuberculosis, Friedmann's turtle vaccine in, 8  
Tuberculosis of hernial sac in a child, 704  
Tuberculosis complicated by hypothyroidism, 526  
Tuberculosis and influenza, 558 589  
Tuberculosis of kidney, primary, 45  
Tuberculosis, laryngeal, treated with carbon arc light, 590  
Tuberculosis and lupus erythematosus, 269  
Tuberculosis, menstrual equivalents in, 201  
Tuberculosis, Morton's method for rapid diagnosis of, 130  
Tuberculosis of ovarian cysts, 651  
Tuberculosis, precipitin reaction in, 551  
Tuberculosis prevention, 663  
Tuberculosis, prodromal sign of, 561  
Tuberculosis, pulmonary, artificial pneumothorax, 18  
Tuberculosis, pulmonary, blood pressure in, 530  
Tuberculosis, pulmonary, following a chest wound, 724  
Tuberculosis, pulmonary, diagnosis of by radiocopy, 529  
Tuberculosis, pulmonary, digitalis in, 288  
Tuberculosis, pulmonary, gastric ulcer in, 344  
Tuberculosis, pulmonary, and influenza, 468  
Tuberculosis, pulmonary, thoracoplasty in, 116  
Tuberculosis, pulmonary, in war, 270  
Tuberculosis of spinal column, decompression of spinal cord in, 701  
Tuberculosis, surgical renal, 351  
Tuberculous emphysema, 528  
Tuberculous hip with congenital dislocation, 272  
Tuberculous keratitis, treatment of the vascular form of, 640  
Tuberculous meningitis. *See* Meningitis  
Tuberculous peritonitis, chronic, pleuro-peritoneal form of, 217  
Tuberculous psychoneurosis, 374  
Tuberculous stenosis of trachea, cicatricial, 183  
Tuberculous urine. *See* Urine  
TUFFIER: A malignant chordoma, 178  
Tumour, placental, 306  
Tumour of spinal cord and pregnancy, 548  
Tumours, camphor oil, 718  
Tumours of hand, fibrous, 512  
Tumours, round ligament, 677, 678  
TURNER, Grey: Sign of acute pancreatitis, 247  
Turpentine injections for salpingitis, 645  
TURRETTINI, G.: Early gastric cancer and generalized pulmonary cancerous lymphangitis, 473  
TWEEDY, Hastings: Starvation in eclampsia, 200  
Twin pregnancy. *See* Pregnancy  
Typhoid bacilli causing abscesses, 720  
Typhoid bacilli in a fixation abscess, 662  
Typhoid fever. *See* Fever, enteric  
Typhoid meningitis, 521  
Typhoid and paratyphoid infection, mixed, 594  
Typhus fever. *See* Fever
- U.
- UDAONDO: Chronic pancreatitis and late hereditary syphilis, 30  
UHLENUTH: Ictero-haemorrhagic spirochaetosis and the rat, 332  
Ulcer of colon, simple, 570  
Ulcer, gastric, cauterization of, 702  
Ulcer, gastric, experimental, 310, 744—Experimental chronic, 686  
Ulcer, gastric, in pulmonary tuberculosis, 344  
Ulcer, gastric causing stenosis of duodeno-jejunal flexure, 674  
Ulcer, juxta-pyloric, polycythaemia in, 625  
Ulcer, typhoid, slow evolution of peritonitis following perforation of, 289  
Ulcers, typhoid, perforation of, 323  
Ulcers, varicose, treatment of, 636  
Ulcus molle, serum treatment of, 672  
UNGER: The fat-soluble vitamins in rickets, 258  
Ureteral papillomata, 15  
Ureteral stricture, plastic repair of, 604  
Ureteric calculi, 534  
Uretero-cervical fistula after forceps delivery, incision, spontaneous cure, 709  
Uretero-pyellitis, ascending, 222  
Ureters, double, 734  
Urethral caruncle, 383  
Urethral injuries in war, 143  
Urethral polypus, 171  
Urethral stricture, haemorrhage in, 448  
Urethritis, chemical, 299  
Urinary bilharziosis. *See* Bilharziosis  
Urine in acute peritoneal infections, specific reaction of, 516  
Urine, comparative investigations on Wassermann reaction in, 458  
Urine, detection of glucose in, 553  
Urine of guinea-pigs, spirochaetes in, 331  
Urine in tropical climates, 745  
Urine, tuberculous, intradermal reaction with extract of, 237  
Urine, vitamins in, 76

Urobilinuria and gall stones, 513  
Urotropine in typhus, 55  
Uterine fibroids and x rays, 679  
Uterine muscle, changes in during involution, 359  
Uterus, accidental perforation of, 452  
Uterus, hypernephroma of, 579  
Uterus, malignant myoma of, 422  
Uterus, puncture of for hydramnios, 713  
Uterus, rupture of, with peritoneal encrustment, 150  
Uterus, wound of, in eighth month of pregnancy, 125

## V.

VACCAREZZA, R. F.: Hyperacute intestinal amoebiasis, 6  
Vaccination by subcutaneous injection, 50  
Vaccine as a prophylactic against influenza, and local reaction as a guide to immunity, 345  
Vaccine-therapy during the war, 164  
Vaccine treatment of influenza, 106  
Vaccine treatment of Mediterranean fever, 372  
Vaccine treatment of ozaena, 138  
Vaccinia, influence of scarlet fever on, 620  
Vaginal myomectomy, 515  
Vaginal cyst with mixed epithelial lining, 684  
Vaginal dilatation by Champetier de Ribes's bag during labour, 613  
VAGLIO, R.: Statistics of spina bifida, 184—Infantile spastic hemiplegia, 632  
Vagus, cervical, and sympathetic nerves, experiments on, 74  
VAN HAELEST: Partial resection of motor nerves in spastic hemiplegia, 420  
VAN LIER, E. H.: Shape of the stomach, 291  
VAN RIJSSEL: Giant cell sarcoma of thyroid and pancreas, 233  
Varices of the upper limbs, 635  
Varicose ulcers. *See* Ulcers  
VARIOT: Congenital cyanosis with large ductus arteriosus, 523  
Vasostomy in gonorrhoea, 667  
VECCIA, E.: Malarial orchitis, 324  
VEEDER, B. S.: Elimination of acetone bodies during infectious fevers, 436—Renal function in scarlet fever, 654  
Venous thrombosis, pulmonary infarction and embolism following gynaecological operations, 644  
Ventricular puncture for meningitis, 221  
VERATTI: Meningococcal septicaemia with petechial eruption, 108  
VERMILYE, H. N.: Etiological relation of pyloric obstruction to gastric tetany, 339  
Vesico vaginal fistulae, transvesical suture of, 547  
Vesiculitis, chronic, and enlarged prostate, 578  
VIANNAY: Bullet in pulmonary artery, 675  
VIGNAT: Hot-air treatment of naevi, 607  
VIGNES: A malignant chordoma, 178

VILLAR, R.: Parotid fistula, 144—Angio-melano sarcoma of leg, 181—Appendicitis simulating strangulated hernia, 191  
VILLARD, E.: Indications for operation in acute appendicitis, 196  
VILLEMIN: Parts of the duodenum, 170  
Vincent's angina. *See* Angina  
Vitamin, the fat-soluble, in rickets, 258  
Vitamines and growth, 129  
Vitamines in the urine, 76  
Vitrous, treatment of affections of the, 326  
Vomiting, hysterical, 435  
Vomiting of pregnancy, pernicious, corpus luteum in, 646, 647, 648  
Vos, H. B. L.: Sign of the palato-glossal arch in influenza, 524  
Vulvitis, erosive, 305  
Vulvo-vaginitis of children, 514

## W.

WADE: Growth forms of the Pfeiffer bacillus, 155  
WANDER: Camphor oil tumours, 718  
WARWICK: Colloidal gold reaction, 453—Tuberculosis of appendix, 536—Technique of colloidal gold reaction, 649  
Wassermann reaction, a comparison of antigens in, 205—Comparative investigations on reaction in the blood and urine, 458  
Wassermann test in pregnant women, 614  
WATTS, S. H.: Oxycephaly, 538  
WEBSTER: Detection of glucose in urine, 553  
WEDGEFORTH: Encephalitis lethargica, 1—Lumbar puncture, a warning, 186  
WEED: Experimental meningitis, 714  
WEIBEL: Radiography of the third stage of labour, 711  
WEILL, E.: Pharyngeal spasm simulating loss of appetite in children, 85  
WEILL-HALLÉ, B.: Intramuscular injection of diphtheria antitoxin, 370  
WEINERT, A.: Wound diphtheria, 261  
WEIS: Senile osteomalacia, 115  
WESSLER, H.: Abscess of lungs in infants and children, 358  
WHARTON: Venous thrombosis, pulmonary infarction and embolism following gynaecological operations, 644  
WHEELER: Compression neuritis by first rib, 664  
WHITE: A new germicide: "Mercurochrome-220," 131—Mesenteric cyst, 419  
WHITE, E. H.: Gradenigo's syndrome, 446  
WHITTEMORE: Surgical treatment of acute empyema following influenza, 145  
Whooping-cough, alum in treatment of, 80  
Whooping-cough, cerebro-spinal fluid in, 485  
Whooping-cough, reflected sunlight in treatment of, 59  
WIESEL, J.: Affection of the peripheral vessels in nephritis and heart disease, 26  
WILDENSKOV, H. O.: Torsion of omentum diagnosed as appendicitis, 193

WILLIAMS: "Normal" appendix, 320  
WILLIAMSON, C. S.: Pericarditis with effusion, 489  
WILLARD: Tansini's operation for Banti's disease, 249—Non-union in compound fractures, 539  
WILSON: Detection and treatment of pneumococcus carriers, 156  
WINTERITZ, M. C.: Acute suppurative hypophysitis as a complication of purulent sphenoidal sinusitis, 586  
WISHART: Renal glycosuria, 49  
WOLBACH: Observations on Mexican typhus, 715  
WOLFFENSTEIN: Practical value of the Sachs-Georgi reaction, 204  
WOOD: Control of influenza in an institution, 218  
WOODS, Hiram: Ocular changes in encephalitis lethargica, 134  
Worms, round, infection with clinically simulating pneumonia, 241  
WORMSER, E.: Puncture of uterus for hydramnios, 713  
Wounds, elastic closure and systematic paraffin gravity drainage for, 277  
Wounds of war, streptococci of, 333

## X.

X-ray carcinoma, 544  
X-ray sign of perinephritic abscess, 384  
X-ray treatment of Graves's disease, 78  
X rays and radium in laryngeal carcinoma, 226  
X rays in stimulation of backward growth, 322  
X rays and uterine fibroids, 679

## Y.

Yellow fever. *See* Fever  
YOUNG: A new germicide, "Mercurochrome-220," 131  
YOUNG, E. L.: Silent renal calculi, 89  
YOUNG, W. J.: Urine in tropical climates, 745

## Z.

ZADEK: Pulmonary tuberculosis in war, 270  
ZAGARI: Action of hypodermic injections of sugar, 343  
ZIMMERMANN: Death following the application of sinusoidal currents, 132  
Zinc oxide in treatment of diarrhoea and mucus colitis, 431  
ZINGER: Ventricular puncture for meningitis, 221  
ZLOCISTI: Blackwater fever, 168  
ZUELZER: Ictero-haemorrhagic spirochaetosis and the rat, 332

## Memoranda:

### MEDICAL, SURGICAL, OBSTETRICAL.

#### A CASE OF DIPHTHEROID SEPTICAEMIA.

THE following case is of interest, as it illustrates an unusual form of infection with a diphtheroid organism.

The patient was admitted to No. 36 Stationary Hospital, Palestine, with a temperature of 104.6° F. The sister on night duty took a blood film from his ear for examination for malaria. The slide was stained by Leishman's stain, and when it was examined many bipolar bacilli were seen. The leucocytes were not evenly distributed, but they were found in clumps with a very large number of bacilli amongst and around them. A second slide was stained by Neisser's method and the bacilli stained like typical diphtheroid bacilli.

I went immediately to the patient, but his temperature had fallen by crisis, and, although I made blood cultures and more blood films, I failed to find any more bacilli. The patient had a septic sore on the right hallux, and from it I obtained a few diphtheroid bacilli, but I failed to get them in pure culture.

There was no possibility of getting two slides contaminated with leucocytes and a pure culture of diphtheroid bacilli, the septic sore not yielding a pure culture. Therefore the bacilli must have been in the circulating blood.

This seems to have been a generalized infection with the diphtheroid bacilli of low virulence so common in Palestine. The slides were taken just when the bacilli were being overcome, as is indicated by the clumping of the bacilli with masses of leucocytes and by the fact that the temperature fell by crisis soon after the slides were taken.

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London, W.

#### GASTRIC ULCER AFTER GASTRO-JEJUNOSTOMY.

SIR BERKELEY MOYNIHAN, in his interesting paper on gastric ulcer, published in the *BRITISH MEDICAL JOURNAL* of December 13th, mentions the fact that he has operated on two cases where fresh ulcers have occurred in the stomach after gastro-jejunostomy, and he tells me that since he wrote the paper he has had a third. A few weeks ago I met with a similar case, where persistent and severe pain recurred a few years after gastro-jejunostomy for duodenal ulcer. On exploration, a large chronic ulcer was found surrounding the anastomosis but entirely confined to the stomach, the mucous membrane of the jejunum being quite healthy. I excised the ulcer freely and repaired the stoma.

Such cases as these prove that gastro-jejunostomy alone is not reliable in gastric ulcer, and that it is essential to combine it with excision of the ulcer, or, as Sir Berkeley Moynihan suggests, to perform a partial gastrectomy.

Leicester.

F. BOLTON CARTER.

#### MITRAL STENOSIS IN SOLDIERS.

In his illuminating paper on mitral stenosis in soldiers (p. 840) Dr. Cotton enumerates causes of breathlessness other than D.A.H. or cardiac failure. We may take it that in any case the exercise tolerance test will be found effective and reliable. No reference, however, is made to the condition of pulmonary emphysema, which, without any discoverable cardiac disability, gives rise to breathlessness after exercise proportionate to the degree of emphysema. I have over and over again noted the frequency with which a slight degree of emphysema is overlooked, especially if no pulmonary symptoms are complained of. In the case of the soldier this condition is far from infrequent, as may be readily understood, and either by itself produces breathlessness after the exercise test, or else makes a substantial contribution to it, when coexisting with D.A.H.

For purposes of accuracy, therefore, any signs of emphysema should be investigated, and the elasticity of the lungs tested.

London, W.

A. G. AULD.

## Reports of Societies.

### INTRATRACHEAL CHLOROFORM.

A MEETING of the Section of Anaesthetics of the Royal Society of Medicine was held on December 4th, 1919, the President, Dr. LL. POWELL, being in the chair.

Mr. CLARENCE MOTT read a paper on intratracheal insufflation of chloroform, based upon 357 cases. He showed that the insufflation method might be expected to suit chloroform particularly well, and he had not been disappointed in his expectations. At first he had worked with varying properties of chloroform and ether together, using them both intrapharyngeally and by the trachea before he arrived at pure chloroform by the trachea. A Vernon Harcourt inhaler containing chloroform was placed between the motor and Kelly's intratracheal apparatus containing ether. Finally, Down Brothers added a second chamber to Kelly's apparatus. A flow-meter has since been added which gives readings up to 30 litres of air per minute, and, thanks to the great kindness of Dr. Waller, Mr. Drew and Mr. Mott have been able to grade the dial on the chloroform tap, showing the actual percentages of chloroform vapour when the motor is delivering 10, 20, 30, or 40 litres of air per minute, with 16 ounces of chloroform in the chamber. The majority of the cases had morphine and atropine, and the catheter was passed into the trachea, whilst anaesthesia was maintained by intrapharyngeal methods. When untoward symptoms supervened—and these were on rare occasions—increased or decreased of the chloroform, more frequent or longer reductions of the air stream to zero, alterations in the volume, or pressure of air stream, or slight withdrawal of the catheter, effected the desired improvement, and at any moment ether or oxygen could be added at will.

*Regions.*—Of the 357 cases there were 135 intraperitoneal (11 gastro-enterostomy, 10 gall bladder, 10 hysterectomy), 15 limbs, 12 haemorrhoids, 10 kidney, 10 breast amputations, 7 glands of neck, 7 thyroid, 3 bladder, 3 mouth.

*Respiratory Complications.*—307 cases had no complications; in 28 they were very slight; in 22 they were more serious. One patient contracted pneumonia, and died six days after an operation for hysterectomy; this patient had a cough before operation, which lasted an hour and a half.

*Vomiting.*—114 cases did not vomit at all; 129 vomited one to three times; 60 vomited four to six times. Children appeared to take the method as well as adults.

*Deaths.*—There were 8 deaths—none of these could be attributed to the anaesthetic; 2 died from haemorrhage, fourteen hours and six days after operation respectively; 2 from heart failure, thirty-six hours and three days later; 1 from peritonitis (perforated duodenal ulcer); 1 from intestinal obstruction, five days later; 1 from pulmonary embolism, four days later; 1 from pneumonia (mentioned above).

Mr. REGINALD ALCOCK said that complete relaxation was not so uniformly found with any other anaesthetic as it was with intratracheal chloroform. The excursions of the abdomen were almost absent, a great gain in such operations as gastro-jejunostomy. Also there was absence of congestion and of haemorrhagic oozing, and the anaesthetist and apparatus were conveniently distant from the operator in head and neck cases.

Mr. W. C. ALLARDICE had operated some hundred times with the method, the ages of the patients ranging from 9 to 65 years. He had come to value Mr. Mott's administration of chloroform very greatly, but regarded it as a method solely for the expert. Mr. Mott provided him with everything that a surgeon was entitled to ask of his anaesthetist.

Mr. NORMAN PATTERSON pointed out the great value which the method should have in the treatment of malignant disease of mouth and pharynx by diathermy.

Dr. BLOMFIELD regarded Mr. Mott's work as a most valuable confirmation of the work done upon animals to determine physiologically safe percentages of chloroform vapour. He deprecated any general comparison as to the relative safety of chloroform and of ether based upon these three hundred cases.

Dr. F. E. SHIPWAY pointed out that the post-operative results compared unfavourably with those due to intratracheal ether, and he asked where, except in the matter of abdominal stillness, was there any advantage in using chloroform, particularly in mouth cases. He did not

researches was seen in the Jenner Centenary Number of the BRITISH MEDICAL JOURNAL, published in 1896. He also followed closely and systematically the activities of the antivivisectionists, and was ever ready to meet their champions with facts and arguments. Here again his accurate habit of mind and a style which could be both polite and caustic served him well. Satire, and ridicule if necessary, were among the weapons he employed to confound his antagonists, and more than one "anti" this or "anti" that has been reduced to silence as his weapon found its mark. Later on he studied "Christian Science," and could have stood a cross-examination on the writings of Mrs. Eddy. He had the forensic faculty of getting up a case, combined with the power of retaining the story in memory and of reconstructing it in detail at short notice.

In the early days of his connexion with the BRITISH MEDICAL JOURNAL he did a certain amount of literary work in other directions. Thus, he assisted the late Mr. Marcus Beck in producing the ninth edition of Erichsen's *Science and Art of Surgery* in 1888; again, when the tenth edition was published in 1895, under the editorship of Mr. Raymond Johnson, his assistance was called in, and on both occasions its value was mentioned in the preface. He also helped in the translation of Gruber's textbook of *Diseases of the Ear* by Dr. Edward Law, who made a suitable acknowledgement in the preface. He was also for a time a frequent contributor to *Truth*, but his interest lay rather in historical research than topical discussion. His liking for biography made him accept with alacrity a request to edit a set of biographies with the general title, *Masters of Medicine*, planned by the late Mr. Ernest Hart. Eight volumes were published, and one on Vesalius by Taylor was announced. The series, however, was discontinued, and the book, preparations for which had occupied much leisure time, was never written.

After his appointment to be Assistant Editor he seldom wrote except for these pages. The interest shown in some of his casual notes on historical subjects led him to suggest the establishment of the series of articles which, under the general heading "Nova et Vetera," appeared at short intervals for many years. That they were much appreciated by many readers there was ample evidence. Taylor did not write them all, but he wrote the majority. Though he never signed his name the authorship became known to some of those interested in the history of medicine, and a few years ago, on the proposal of Sir William Osler, he was elected an honorary Member of the Section of the History of Medicine of the Royal Society of Medicine. He appreciated the courtesy but did not make much use of the opportunities it afforded. His close friend the late Lord Ilkerton persuaded him to join the Reform Club, but he did not long retain his membership. This might at first seem strange; with his genial manner and fund of anecdote he might have been considered the ideal clubman. He, however, was happiest when among his books in his "den," and, above all, in his home life. Public and official functions had no attractions for him.

During the illness of the Editor, consequent on an accident in July, 1910, Mr. Taylor was responsible for the conduct of the JOURNAL during the next four or five months, which included the Annual Meeting in London that year. Amidst the pressure of other duties he found time to edit the Guide Book issued in connexion with that meeting. For this he received the thanks of the Association.

His leaning to the study of the history of medicine found an outlet in several special issues of the BRITISH MEDICAL JOURNAL, in particular in the Jubilee Number published in 1897 on the occasion of the sixtieth anniversary of Queen Victoria's reign.

Though not of robust constitution—he had intermittent glycosuria for many years—he enjoyed good general health until between six and seven years ago, when he began to suffer from symptoms which, becoming suddenly exacerbated, necessitated an abdominal operation performed by his old fellow student, Mr. Bilton Pollard. Recovery was slow, but he was eventually able to return to his post for several years. Increasing infirmities compelled him to tender his resignation, which took effect in March, 1917. Since then he had lived in retirement. His last illness, due apparently to glycosuria, began about six weeks before his death.

Mr. Taylor was a man of genial and kindly temperament which endeared him to all those with whom he worked. He was a loyal colleague, and his fund of knowledge of the past and present of medicine which he was always ready to produce in conversation made him an interesting and stimulating companion. He will long be held in kindly remembrance at the office of the Association.

Mr. Taylor married in 1882 the daughter of Mr. James Goodman of Bletchley. He is survived by his widow, two daughters, and his son, Dr. C. J. G. Taylor of Nuneaton, who served throughout the war as Surgeon R.N.V.R.

## Universities and Colleges.

### UNIVERSITY OF SHEFFIELD.

#### CLINICAL DEMONSTRATIONS.

THE Faculty of Medicine has arranged for a series of clinical demonstrations on special subjects to be given at the Royal Hospital, West Street, during the next three months of the winter session, as follows:

Mondays at 3.30 p.m.: X rays in Diagnosis and Treatment, Dr. W. H. Nutt.

Tuesdays and Fridays at 4 p.m.: Diseases of the Eye, Dr. P. J. Hay.

Wednesdays at 3.30 p.m.: Diseases of the Ear, Nose, and Throat, Dr. G. Wilkinson.

Thursdays at 3.30 p.m.: Diseases of the Skin, Dr. E. F. Skinner.

The course will begin on Monday, January 19th, and will be continued each week until the end of March. The demonstrations are open to all qualified practitioners free of charge. It will facilitate arrangements if those wishing to attend any or all of the courses will send in their names and particulars to the Registrar, the University, Sheffield, on or before January 10th. A full syllabus and time table will be forwarded on application.

### UNIVERSITY OF ST. ANDREWS.

THE following candidates have completed the Final Examination for the degrees of M.B., Ch.B.:

Mildred Clark, Andrewina Laird, Florence B. Mason.

### UNIVERSITY OF DUBLIN.

#### TRINITY COLLEGE.

THE following candidates have been approved at the examinations indicated:

FINAL M.B.—Part I, *Materia Medica and Therapeutics; Medical Jurisprudence and Hygiene; Pathology*: \*Daniel de Brulin, \*D. J. Browne, \*Dorothy A. Daly, P. Jabkovitz, Rev. E. G. Campbell, J. C. Davis, Mary Horan, F. W. Pienaar, F. W. Shegog, P. Ryan, Nora Griffith, C. S. Wilson, R. R. Baker, Elinor D. Stopford. *Materia Medica and Therapeutics; Medical Jurisprudence and Hygiene*: J. D. Leahy, W. A. Murphy, R. H. J. M. Corbet, A. D. Ward, G. S. Moran, J. M. Semple, J. R. Wills, R. W. Power, A. J. Beckett. *Pathology (in completion)*: J. C. Brennan, R. V. Dowse, H. A. Lavelle, C. W. Farr.

FINAL M.B., B.Ch., B.A.O.—Part II, *Midwifery*: \*E. H. C. Allen, \*Olive Baile, W. de Vos Scholtz, Essie S. Smyth, J. H. B. Crosbie, J. P. de Villiers, W. B. J. Pemberton, S. L. Feldman, J. B. Maguire, E. H. Frazer, W. B. Fox, W. T. Micks, B. F. Haythornthwaite, C. E. McQuade, J. Hirschmann. *Surgery*: \*L. Abrahamson, \*J. G. Holmes, T. D. Gordon, C. J. de V. Shortt, H. A. Lavelle, Doris L. Graham, W. A. Byrn, R. E. Murphy, Jessie Gilbert, Johan F. Wicht, M. Nurook, R. W. Shaw, A. I. Steyn, S. J. Laverty, H. Cohen, A. Blagoff. *Medicine*: \*L. Abrahamson, \*F. W. Robertson, F. V. Small, J. G. Holmes, W. de Vos Scholtz, W. J. Hogan, T. D. Gordon, J. F. Wicht, H. A. Burridge, J. Hirschmann, R. W. Shaw, R. Counihan, Moira M. Brown, J. R. Waugh, W. A. Byrn, H. Cohen, C. J. de V. Shortt, F. W. Godbey, T. Madill.

D.P.H.—Part I, *Chemistry, Bacteriology, Physics, and Meteorology*: V. M. Synge, R. E. Wright, G. G. P. Beckett, N. H. H. Haskins, G. F. I. Harkness, W. H. Sutcliffe, J. S. Dockrill, G. O. F. Alley. Part II, *Sanitary Engineering, Hygiene, Epidemiology, Vital Statistics, Public Health Law, Sanitary Inspection and Report*: V. M. Synge, M. McKnight, R. E. Wright, G. G. P. Beckett, N. H. H. Haskins.

DIPLOMA IN GYNAECOLOGY AND OBSTETRICS.—R. W. Chambers.

\* Passed on high marks.

### LONDON SCHOOL OF TROPICAL MEDICINE.

THE following candidates passed the examination of this school at the termination of the sixty-first session:

\*J. T. Duncan, \*W. G. Seymour, \*M. E. Barnes, \*C. C. Chesterman, \*E. C. Girling, \*M. Bequaert, \*B. Calleja, \*A. Kidd, \*E. S. Johnson, \*H. Lillie, \*G. F. Scudder, \*W. Dawson, \*W. F. Hume, \*G. M. Heydon, L. N. Lee, A. N. Bose, G. Chesney, R. Chalmers, J. H. Thomson, W. R. Young, E. C. Spaar, H. M. Pope, A. G. Fergus, J. Boodoosingh, P. P. Nunan, H. W. Webb, B. C. Briscoe, A. J. Galustian, T. D. Nair, P. W. Barnden, D. P. Jariasingha, J. I. A. Sorensen, N. Cheua.

\* With distinction.



## The Services.

### INDIAN MEDICAL SERVICE.

#### TEMPORARY COMMISSIONS.

THE Secretary of State for India makes the following announcement:

Fully qualified European medical practitioners are required for temporary service with Indian troops on special rates of pay. Applicants must be British subjects of European descent, and should not be more than thirty-five years of age. If accepted for appointment they will be required to enter into a contract to serve for two years.

The rates of pay will be Rs. 700 per mensem for a lieutenant, Rs. 750 per mensem for a captain. Three or more years' service as a medical officer in the home, colonial, or Indian forces are necessary to qualify a candidate for the higher rate. Officers will be provided with free passages both ways. Wives and families will be sent out at Government expense in the autumn of 1920, provided that shipping is available. An outfit allowance of £50 will be granted except in the case of officers who have served under the War Office or the Government of India, to whom £20 only will be issued.

Further particulars and forms of application may be obtained from the Secretary, Military Department, Room 157, India Office, Whitehall, S.W.1. Envelopes should be clearly marked in the top left-hand corner "Temporary I.M.S."

\* \* It must be remembered, first, that the price of the rupee varies and that the exchange is hardly likely to be maintained at the present rate, and, secondly, that a large part of the officer's income must be spent in India, where the rupee is worth no more, but decidedly less, than it was worth before the recent rise in the exchange. This matter is referred to in a Current Note in this week's SUPPLEMENT.

### AUXILIARY ROYAL ARMY MEDICAL CORPS FUNDS.

THE usual quarterly committee meeting was held on December 19th, 1919, at 11, Chandos Street, Cavendish Square, W.1. Three grants were made in the benevolent branch for officers, amounting to £290, and fourteen grants in the relief branch for the rank and file, amounting to £524.

These funds are for the relief of widows and orphans of commissioned officers and non-commissioned officers and men of the rank and file of the Royal Army Medical Corps, Special Reserve, Territorial Force, and New Armies, and also for the relief of the children of those who have been so severely damaged in the present war that they need help for the education of children.

Requests for relief should be addressed to the Honorary Secretary, at the offices of the funds, at 11, Chandos Street, Cavendish Square, W.1.

### HONOURS.

#### C.B.

Surgeon Commander D. W. Hewitt, O.M.G., R.N., has been appointed C.B. (Military Division) for valuable services as Senior Medical Officer on the staff of the Senior Naval Officer, White Sea.

#### C.B.E.

The distinction of C.B.E. (Civil Division) has been awarded to Dr. Cecil Henry Elmes, O.B.E., officiating health officer, Port of Calcutta, Bengal, in recognition of valuable services rendered in India in connexion with the war.

#### O.B.E.

The O.B.E. (Military Division) has been conferred upon Surgeon Lieut. Commander R. H. McGiffin, R.N., for valuable services rendered in the Archangel area of the White Sea; Surgeon Lieut. Commander A. A. Sanders, R.N., and Surgeon Lieut. Commander F. St. B. Wickham, R.N., for valuable services rendered in H.M.S. *Glory* and H.M.S. *Hyderabad* in Russia respectively.

Miss Ruth Balmer, M.B., honorary Captain R.A.F. Medical Service, and Flight Lieutenant Robert Lloyd Roe, M.B., R.A.M.C., have received the same distinction in recognition of distinguished services in North Russia and the Mediterranean area respectively during the war; and temporary Lieut. Colonel Raghabendra Row, I.M.S., and Captain Dais Raj Ranjit Singh, I.M.S., Cecil Henning Lincoln, M.B.E., assistant surgeon I.M.D., and Dr. Samuel Arthur Powell, police surgeon, Bombay, in recognition of valuable services rendered in India in connexion with the war.

#### M.B.E.

Captain Arthur George Brown, I.M.S., has been appointed M.B.E. (Military Division), and Khan Bahadur Mir Diwan Ali, civil surgeon, Multan, Punjab, Dr. George Noble Combes, chief medical and sanitary officer of the Cochin State, Madras, Mr. John David O'Donnell, F.R.C.S.Ed., chief medical officer, Kolar Gold Field, Mysore, and Randhir Singh, subassistant surgeon, General Hospital, Rangoon, Burma, M.B.E. (Civil

Division), in recognition of valuable services rendered in India in connexion with the war.

#### Foreign Decoration.

The President of the French Republic has conferred the Croix d'Officier de la Légion d'Honneur upon Surgeon Captain O. W. Andrews, C.B.E., R.N., for distinguished services rendered during the war.

## Medical News.

AN announcement appears at page 34 giving particulars of a series of clinical demonstrations on special subjects arranged by the Faculty of Medicine of the University of Sheffield. The course will be given at the Royal Hospital during the ensuing three months, beginning on January 19th. The demonstrations are open to all qualified practitioners free of charge. Those wishing to attend should communicate with the Registrar of the University, who will forward particulars.

COLONEL W. MITCHELL ROOCROFT, C.M.G., consulting surgeon to the Wigan Infirmary, and Dr. Luther Cooke, also of Wigan, have been appointed Justices of the Peace for the County Palatine of Lancaster.

DR. D. W. CARMALT-JONES, F.R.C.P., Physician to Westminster Hospital, late Colonel A.M.S. and Consulting Physician to the Egyptian Expeditionary Force, has been appointed to the Chair of Systematic Medicine in the University of Otago.

THE old students' dinner of St. Thomas's Hospital, postponed from October 1st on account of the railway strike, will take place at the Connaught Rooms, Great Queen Street, W.C., on Wednesday, January 14th, at 7 o'clock for 7.30, under the chairmanship of Sir George Makins, G.C.M.G., P.R.C.S.

THE annual dinner of past and present students of St. Mary's Hospital, which was postponed from October 1st, will take place at the Connaught Rooms, Great Queen Street, on Friday, January 9th, at 7 for 7.30 p.m. Sir Ahnroth Wright, K.B.E., C.B., will be in the chair.

THE Public and Secondary Schools' Red Cross Hospitals have handed over to the Village Centres Council, 51, Lincoln's Inn Fields, London, W.C.2, the balance of their funds, amounting to £3,500.

A COURSE of ten lectures and demonstrations has been arranged by the Royal Institute of Public Health on Thursdays, at 5 p.m., in the lecture room of the Institute, 37, Russell Square, W.C. The first lecture will be given on January 15th by Professor E. W. Hope, M.O.H. Liverpool, on schemes and methods in tuberculosis work. On January 22nd Dr. T. D. Lister will give a practical demonstration of the work of a tuberculosis department at the Poplar Dispensary for the Prevention of Consumption, 135, Bow Road, E. The course is open to medical men and women qualifying to become tuberculosis officers, and for general practitioners and others interested in the study of tuberculosis. The fee is two guineas.

THE opening address of the spring session of the North-East London Post-Graduate College—the first session since the beginning of the war—will be given by Sir Humphry Rolleston, K.C.B., M.D., chairman of the Fellowship of Medicine and Post-Graduate Medical Association, president of the Royal Society of Medicine. The subject of the address, which will be given on Tuesday, January 13th, at 4.30 p.m., at the Prince of Wales General Hospital, Tottenham, N.15, is the uses and methods of application of post-graduate teaching. Medical practitioners wishing to be present may receive a card of invitation on applying to the Dean.

A COURSE of instruction on the diseases of children will commence at the London Hospital Medical College on Saturday, January 10th. The course is open to post-graduates and students of the hospital. Dr. Hutchison will give a course of ten lectures on general diseases on Saturdays, at 10.15; and Dr. Theodore Thompson a course of eight lectures on organic and functional nervous diseases, meningitis, and mental deficiency on Mondays, at 9.15 a.m. A course of clinical demonstrations will be given in the out-patient department by Dr. Charles H. Miller, at 10 a.m. on Wednesdays.

AT the meeting of the Executive Committee of the Medical Defence Union on December 22nd, 1919, the General Secretary reported that three members had forwarded donations to the funds of the Union as a mark of their appreciation of the services rendered to them by the Union in cases in which they had recently had occasion



to apply for assistance. One of the members stated that the amount of his donation (which was substantial) was really no measure of his gratitude.

SIR ROBERT HUDSON, Chairman of the Joint War Finance Committee, has reported that the total amount received by the Joint Council of the British Red Cross and Order of St. John since the outbreak of war has fallen little short of 19 millions. The balance remaining in hand is large; the primary purpose to which it must be devoted is to relieve the needs of men injured in the war, but an Act passed in 1918 provides that any surplus which, in the opinion of the Joint War Committee, cannot usefully be applied in this way, may be devoted to the general relief of sickness and suffering. Grants have already been made in this country, amounting approximately to £1,350,000, to hospitals, convalescent homes, nursing associations, and other kindred bodies capable of rendering help in the restoration to health of men injured in the war. The condition of the grants has been that wherever possible priority shall be given to the claims of ex-combatants and their dependants. Grants amounting approximately to £500,000 have been made, under similar conditions, to the Dominions, Colonies, and Protectorates. The Joint War Committee will delegate to the Joint Peace Council of the British Red Cross and the Order of St. John the duty of winding up the work of the War Committee, and it is anticipated that the new council will develop other activities proper to peace.

## Letters, Notes, and Answers.

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

CORRESPONDENTS who wish notice to be taken of their communications should authenticate them with their names—of course not necessarily for publication.

AUTHORS desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL are requested to communicate with the Office, 429, Strand, W.C.2, on receipt of proof.

In order to avoid delay, it is particularly requested that ALL letters on the editorial business of the JOURNAL be addressed to the Editor at the Office of the JOURNAL.

THE postal address of the BRITISH MEDICAL ASSOCIATION and BRITISH MEDICAL JOURNAL is 429, Strand, London, W.C.2. The telegraphic addresses are:

1. EDITOR of the BRITISH MEDICAL JOURNAL, *Aitiology*, Westrand, London; telephone, 2631, Gerrard.
2. FINANCIAL SECRETARY AND BUSINESS MANAGER (Advertisements, etc.), *Articulate*, Westrand, London; telephone, 2630, Gerrard.
3. MEDICAL SECRETARY, *Medisecra*, Westrand, London; telephone, 2634, Gerrard. The address of the Irish Office of the British Medical Association is 16, South Frederick Street, Dublin.

### QUERIES AND ANSWERS.

CELSUS seeks the statistics (in children's hospitals) of polypus recti and fistula in ano as factors causing haemorrhage from the bowels in patients under 6 years of age.

#### INCOME TAX.

T. V. S. is in the Government Medical Service in Uganda. He was unable to obtain his six months' furlough when it became due, with the result that he is now on furlough for six months *plus* four months in respect of arrears, that is, ten months in all. He has been informed by the Inland Revenue authorities that as his stay in this country will exceed six months in the financial year 1919-20 he will for that year be liable to tax on his leave pay from the date of his arrival here.

\* \* The statement is correct in point of law. A person coming to his country for a temporary purpose only does not become liable to tax as a British resident unless his stay here amounts to a period of six months in any one financial year. If the six months period is reached liability to British income tax attaches, not from the expiration of that period but as from the date of coming to the British Isles—in other words the exemption in favour of temporary residents fails *in toto*. This certainly appears to involve our correspondent in some hardship, seeing that it was due to governmental action that his furlough was delayed and gave rise to a temporary residence here of more than six months. We are not aware of any concession which would cover such a case, and the legal position seems clear. We gather that no assessment for 1919-20 has yet been made. If such cases are dealt with by means of supplementary assessments made late in the financial year—and such a course would seem to be more or less inevitable seeing that the question of liability or exemp-

tion could not be answered at the earliest until October 5th, 1919, six months from the commencement of the financial year—we are inclined to suppose that an appreciable proportion of the legal liability is inoperative, because the person assessed would probably be outside the British tax jurisdiction by the time the tax becomes exigible.

F. A. A. asks for information as to the method of obtaining repayment of income tax deducted from army gratuities.

\* \* The Commissioners of Inland Revenue made an announcement last August with regard to the arrangements for repayment of income tax in respect of war gratuities under the Finance Act, 1919, which provides for the exemption of war gratuities as from August 4th, 1914. As the present addresses of the recipients of these gratuities are not available, application for repayment is necessary; it should be addressed to the Secretary, Inland Revenue (Claims Branch), Australia House, London, W.C.2, the envelope being marked "Gratuity."

### LETTERS, NOTES, ETC.

#### WAR NEUROSES.

WE are asked by the Medical Services Division of the Ministry of Pensions to publish the following:

The advance which has been made as a result of experience gained during the war in the method of treatment for cases of neurasthenia, shell shock, and functional nervous disorders in general, is probably greater than in the case of any other form of medical disability. Moreover, medical men who have been brought directly into contact with cases of this nature, and whose duty it has been during the war to undertake the care of this class of patient, appreciate more fully than is possible to those members of the profession without similar opportunities, the dangers which attend delay in the provision of the special forms of treatment which experience has shown can alone ensure satisfactory results.

The Ministry of Pensions has established neurological hospitals for in-patients and psycho-therapy clinics for out-patients, and in both types of institution the most modern methods of treatment are applied.

The Medical Service Department of the Ministry of Pensions would be obliged if general practitioners, who have among their patients cases of war neuroses, would communicate with them at 14, Great Smith Street, Westminster, S.W.1, with regard to any case, even if the condition is not severe, which is not progressing rapidly towards recovery. In a severe case, in the interests of the patient, this should always be done. Where necessary, the Ministry will certainly arrange for treatment at one of its special institutions.

#### SMITH'S VISITING LIST.

WE have received from the publishers, Messrs. Hazell, Watson, and Viney, Ltd., of 52, Long Acre, W.C.2, a specimen copy of one of *Smith's Medical Visiting Lists* for 1920. This well known annual publication has now reached its seventy-fourth year of issue, and its convenience has been tested by generations of medical practitioners. The visiting lists are made in two styles of binding and in five kinds of ruling and spacing. The prices range between 6s. and 12s. 6d.

#### VACANCIES.

NOTIFICATIONS of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 34, 35, 38, 39, 40, and 41 of our advertisement columns, and advertisements as to partnerships, assistantships, and locum tenencies at pages 36 and 37.

THE following vacant appointments of certifying factory surgeons are announced: Canterbury (Kent), Colnbrook (Buckingham), Dewsbury (York, West Riding), Shanklin (Isle of Wight), Burnham Market (Norfolk), Gamlingay (Cambridge).

### SCALE OF CHARGES FOR ADVERTISEMENTS IN THE BRITISH MEDICAL JOURNAL.

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Seven lines and under	...	...	0 6 0
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Whole single column	...	...	4 0 0
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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.