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like." Relief was obtained when the limb was raised, but when in bed at night there was a subjective sensation of heat in the stone-cold foot; this was relieved to some extent by resting the foot outside the bedclothes. No arterial pulsation could be detected below the level of the popliteal space, and a provisional diagnosis was made of arterial obstruction somewhere in the region of the popliteal bifurcation. There was an old-standing ingrowing toenail on the great toe of this foot, and the ingrowing portion was removed without injury to underlying tissues. Massage was avoided, and treatment consisted of rest with the limb raised, and daily application of methylated spirit, ether, and Huxley's powder, to minimize the risk of sepsis. Little else was required, as the patient was unusually healthy for his age. The heart, which was irregular, was supported from time to time, but perhaps unnecessarily, and at one period potassium iodide was tried, until the excretion of iodine in the saliva caused some faucial irritation and it was discontinued.

the excretion of iodine in the saliva caused some faucial irritation and it was discontinued.

At the end of about three weeks the appearance of the foot suggested the formation of a line of demarcation in the neighbourhood of the ankle-joint. Gradually, however, circulation in the skin capillaries became brisker, the oedematous swelling diminished, and, after two months, walking became possible, though attended for some time by pain, due possibly to relative ischaemia in the muscle of the calf on the affected side. This condition of claudication gradually disappeared entirely, but for about four and a half months from the initial attack some pain persisted in the region of the instep on walking. A small "blood blister" appeared at the site of the ingrowing toenail. It, however, sloughed off, leaving healthy skin behind. healthy skin behind.

The patient has a high degree of natural immunity to ordinary sepsis, and this no doubt contributed to some extent to the favourable result. At the end of five months the foot was perfectly normal again, the last portion to lose its oedema and resume its normal appearance being the

outer half of the dorsum of the foot.

Five and a half months after the onset of the first attack a similar sudden and intense pain was felt in the calf of the other (left) leg. The same sequence of events followed, differing only in degree, the second attack being in every way less severe and no superficial slough appearing, although an ingrowing toenail on this foot also was similarly dealt with.

At the moment of writing (four and a half months later) this foot also is practically normal in appearance. No pain is now felt in either limb when at rest or when walking short distances up to 200 or 300 yards. When this distance is exceeded a condition of claudication supervenes, affecting the left leg only and necessitating rest for a few moments. With judicious resting (by means of a camp stool) daily walks of a mile or more can be enjoyed without fatigue.

Memoranda:

MEDICAL, SURGICAL, OBSTETRICAL.

CUTANEOUS GONOCOCCAL INFECTION.

A MEDICAL man consulted me recently on account of a curious dermatitis of the elbow. A slight abrasion of the skin over the olecranon was caused by a fall while playing football, and a week later the lesion became acutely inflamed and very painful. On examination the abrasion was found to have become a shallow ulcer, $2\frac{1}{2}$ cm. in length by about 1 cm. in width. Its base was formed by a lemoncoloured slough, and the edge was surrounded by a hyperaemic band of skin some 2 mm. in width. Encircling the ulcer, at a distance of about 3 cm., were a number of bullae; the smallest was 1 cm. in diameter and the largest 2½ cm. long by 1 cm. broad. The axillary glands were enlarged and tender. Serous fluid was obtained by the aspiration of one of the bullae, and films stained by Gram's method showed a few pus cells with intracellular Gramnegative diplococci morphologically resembling gonococci. A few Gram-positive cocci were also present. From cultures on blood agar Staphylococcus aureus and a Gram-negative diplococcus were obtained. Colonies of the latter on serum agar developed the scalloped edge characteristic of gonococcal colonies after four days' incubation. There was no history of gonorrhoea, so that a metastatic explanation of the infection was untenable, but, in view of the rarity of a primary gonococcal cutaneous infection, fermentation tests were undertaken to establish the identity of the organism. Glucose was fermented, but maltose and saccharose were not. No growth was obtained on broth agar, and from these criteria it was concluded that the organism was in fact the gonococcus.

Inquiries as to the probable source of infection elicited the fact that, three days before the elbow became painful, the patient had operated on a female for elephantiasis. At the time of operation there was a vaginal discharge, but subsequent examination failed to detect any gonococci.

The course of the cutaneous lesion was uneventful. Hot fomentations were employed for twenty-four hours and then protargol was applied. Three weeks later healing had occurred.

A. NEAVE KINGSBURY, M.B., B.S., B.Sc.Lond., D.P.H., D.T.M. and II.

Institute for Medical Research, Kuala Lumpur, F.M.S.

CASE OF PROTEIN ANAPHYLAXIS.

My son, aged 8 years, had occasion to take delivery of a hare (dead) at the railway station distant about five minutes from my house. He wrapped the hare round his neck, and in this manner carried it home. A few minutes after his arrival he was seized with intense itching in his eyes, which at once became deeply congested. This was followed by a copious watery secretion from the nares. A few minutes afterwards a livid erythematous rash appeared on the neck; it spread rapidly on to the face, and was followed by marked oedema of the eyelids. At night a persistent hacking cough developed, which continued during the night. At 2 a.m. on the two following nights he was seized with a typical attack of asthma, which compelled him to sit up in bed. The oedema of the eyelids lasted for about three days. Bronchial râles were heard over both lungs.

I ordered the nares and pharynx to be sprayed with an alkaline douche, and for some days small groups of hairs appeared in the return water. Sensitization tests were applied a week afterwards, the result being marked positive

reaction to the epidermal groups (Nos. 25 and 26).

The following points are interesting: (1) The facility in detecting the protein causing the symptoms; (2) the rapidity of onset and the course of the symptoms; (3) the marked reaction to the tests applied.

I may add that the boy on many occasions had been in contact with dogs, cats, and horses without any ill effects. FERGUS MCKENNA, M.B., C.M.

RECURRENT CHICKEN-POX.

WHILE it is clear from the experience of many practitioners that one attack of chicken-pox does not necessarily confer immunity to the disease, and while, according to Osler and McCrae,1 there are instances on record of three attacks in one person, the following particulars of a family under my care, the members of which appear to be unusually susceptible to the disease, seem of sufficient interest to report.

Of the three children in the family Mary was born in 1916, John in 1919, and Lucy in 1921. Their first attack occurred during a holiday in Cornwall in September, 1921. The eldest child was slightly affected, and the boy rather badly. The third child, then a baby of 7 months, had one or two "spots" (a doubtful case). There was a small outbreak of varicella at the time in the neighbourhood, and Dr. F. C. Matthew of St. Ives, under whose care the children were, has written to say he remembers the circumstances quite well, and had no doubt as to the diagnosis. The remains of the eruption were visible on the patients on their return to Oxford. In July, 1922, Mary had what I regarded as a mild attack of chicken-pox, for which she was isolated. In October, 1924, following the occurrence of a case at her school, she had a rather severe attack. Thirteen days later John fell ill, and Lucy two days after him. All three were typical cases in respect of the onset, character, distribution, and duration of the eruption.

In this family, therefore, two of the children have each had two definite attacks, the eldest almost certainly a third, while the youngest member has had one clear attack and one doubtful. The subsequent history of these children will be noted with interest.

WILLIAM STOBIE, M.D.Edin., M.R.C.P.Lond.

¹ The Principles and Practice of Medicine, ninth edition, p. 337.

THE BRITISM MEDICAL JOURNAL

ROYAL COLLEGE OF PHYSICIANS OF LONDON. An ordinary quarterly comitia of the Royal College of Physicians of London was held on January 29th, when the President, Sir Humphry Rolleston, was in the chair.

 $\begin{tabular}{ll} \it Membership. \\ \it The following successful candidates were admitted as Members: \\ \end{tabular}$

Wallace Wright Adamson, M.B.Glasg., Wilfrid Henry Waller Attlee, M.D.Camb., Francis Joseph Benjamin, M.D.Durh., Frank Brockington, M.B.Lond., Charles Ritchie Burns, M.D.New Zealand, Ernest Noble Chamberlain, M.D.Liverp., Sibyl Renée Julia Eastwood, M.B.Oxf., Francis Wiremu Brian Fitchett, M.D.Edin., Caivert Merton Gwillim, M.D.Lond., David Martyn Lloyd-Jones, M.D.Lond., Montague Maizels, M.D.Lond., Herbert Victor Morlock, M.B.Lond., Bertram Sydney Nissé, M.D.Lond., Hilary Joseph Roche, M.D.Melb., George Kenneth Stone, M.D.Oxf., James Arthur Struthers, M.B.Camb., Alfred Williams-Walker, M.D.Lond.

Licences.

Licences were granted to the following 206 candidates who had passed the required examinations and conformed to the by-laws and regulations:

Licences were granted to the following 206 candidates who had passed the required examinations and conformed to the by-laws and regulations:

M. Absé, J. D. Allen, G. T. Allerton, C. A. Amesur, *Kathleen J. Atkinson, *Margaret A. Bannerman, W. D. Beck, C. E. G. Beveridge, O. P. Bewers, *Anna M. V. Bonhoke, V. H. Bocbbyer, W. A. Bourne, R. N. Brandwood, S. Brest, H. F. Brewer, D. A. Brigg, D. J. Brims, R. J. Brocklehurst, T. H. P. Brocks, *Margaret H. Brown, W. A. Browne, *Olive B. Buckley, W. H. Cameron, A. F. Chalkley, *Gwendoline Chave, H. F. Chillingworth, G. F. Chissell, L. Chodorsky, J. Chronnell, H. A. Clegg, A. V. Clemmey, *Doris M. Collins, L. N. R. Comby, L. C. Cook, *Margaret I. B. Cowling, C. P. Craggs, *Dorothy E. Crellin, J. Currie, M. Cutner, *Gweneth M. Daniel, *Annie E. C. Davies, A. L. Davies, J. R. Davies, M. H. Davies, A. R. Davison, *Charlotta D. N. De Wilde, G. E. Ellis, O. M. Ellis, *Mary H. Elmitt, C. W. Evans, J. Evans, N. B. Farman, J. T. Fathi, L. Fathi, C. F. Fernando, M. G. Fitzgerald, *Dorothea C. Forbes, G. R. Ford, W. S. Fricker, T. M. Fripp, O. P. Giles, G. D. Gordon, H. W. Gordon, R. A. Grant, F. N. Green, A. L. Greenway, D. L. Greig, J. M. Hall, *Constance I. Ham, G. Hamada, J. E. S. Hamilton, C. H. Hampshire, A. W. Hanlon, Hans-Raj, *Irene D. F. C. Hastilow, N. H. R. Hatfield, S. Helberg, A. Helmy, *Freda K. Herbert, E. Herzberg, A. E. Hill, C. H. Hilliard, *Minnie E. Hope, E. C. Hudson, D. B. Hughes, *Katherine E. W. Hulse, O. R. Humphreys, F. S. Hunter, O. L. Hutchinson, *Joy Hwa, S. Hymnin, *Elizabeth Jacobs, *Kate D. James, E. J. Jenkins, C. W. W. Jeremiah, D. F. Johnstone, *Dilys Jones, L. A. Key, *Caroline B. Kibble, C. T. Kitching, W. R. Kusel, *Marjorie A. M. Lambert, G. S. Landon, M. C. Livin, H. Levy, H. Lewis, A. C. Liesching, L. A. N. Line, W. H. G. M. Ling, *Madeline R. Lockwood, A. C. Lysaght, *Catherine B. McArthur, S. McClements, F. G. Macdonald, *Dorothy F. McIntosh, J. H. Macpherson, *Helena M. J. McQuaid, R. G. Maliphant, J. P. Marsden, G. R. Marshallsay, E.

* Under the Medical Act, 1876.

Diplomas in Special Subjects.

Diplomas were granted, jointly with the Royal College of Surgeons, to 27 candidates in Public Health, 21 in Tropical Medicine and Hygiene, 8 in Psychological Medicine, and 6 in Laryngology and Otology. (The names were printed in the report of the meeting of the Council of the Royal College of Surgeons of England, published in our issue of January 17th, p. 142).

Diplomas in Ophthalmic Medicine and Surgery were granted, in conjunction with the Royal College of Surgeons, to the following successful candidates:

successful candidates:

F. Abbey Wiesener, R. G. Banks-Smith, B. R. Bickford, W. S. Burr, T. D. Gordon, E. N. Hughes, K. H. Kamakaka, A. P. McLeod, A. D. Shroff.

Appointments.
On the nomination of the Council the following were elected Councillors: Dr. Phear, Sir StClair Thomson, Dr. Bedford Pierce, and Sir Leonard Rogers; and, to take the place of Dr. Drysdale (for two years), Sir Walter Morley Fletcher.
Sir Francis Champneys was re-appointed a representative of the College on the Central Midwives Board.

Sir George Newman was appointed a representative of the College on the executive committee of the Imperial Cancer Research Fund, vice Dr. Sidney Martin, deceased.

The President announced that he had appointed Dr. Edwin Bramwell to deliver the Bradshaw Lecture this year, and that the Council had appointed Professor Topley, M.D., F.R.C.P., to deliver the Milpoy Lectures next year

the Milroy Lectures next year.

The resignation of Dr. Drysdale as a member of the Council was

Admission of Women to the Fellowship. The following alteration in the by-laws was resolved:-

That the existing By-law No. 194 be repealed, and the following by-law

A woman shall be eligible for admission as a Licentiate or Member of the College and for the grant of diplomas in special subjects on the same terms and conditions as a man and a woman shall also be eligible for election as a Fellow of the College and shall be entitled to take part in the government management and proceedings of the College and to hold any office in like manner as a man is eligible and entitled.

So far as may be necessary to give effect to this by-law (a) words in the by-laws and regulations importing the masculine gender shall be deemed to import the feminine gender also and (b) such alterations as are requisite shall be made in the letters testimonial the form of licence and attached certificate and the form of diploma granted by the College.

Departmental Committee on the University of London. Sir Wilmot Herringham and Dr. John Fawcett were appointed to give evidence before the Departmental Committee on the University of London.

Miscellaneous.

A contribution of 20 guineas to the St. Paul's Cathedral Restoration Fund was voted by the College.

Reports were received from the Committee of Management and adopted.

Books and other donations to the library, presented during the last quarter, were received; also, from Mr. C. H. Golding-Bird, a miniature bust of Dr. Golding-Bird, F.R.C.P., and also a copy of

a portrait of Dr. Brinton from his son.

After some formal College business the President dissolved the

Medical News.

THE Hunterian Oration before the Royal College of Surgeons of England will be delivered in the theatre of the College by Sir D'Arcy Power, K.B.E., F.R.C.S., on Saturday next, February 14th, at 4 p.m.

THE next meeting of the Chelsea Clinical Society will be held at the club-rooms of St. George's Hospital on Tuesday, February 17th, at 8.30 p.m., when Sir Thomas Parkinson and Mr. A. R. Thompson will open a discussion on the diseases of the climacteric period in both sexes.

THE next meeting of the Medico-Psychological Association of Great Britain and Ireland will be held on Thursday, February 19th, at the Royal College of Physicians, Queen Street, Edinburgh, under the presidency of Dr. M. J. Nolan, at 2.30 p.m. Dr. David Slight will give a demonstration of the psycho-galvanic reaction; Dr. George Gibson will read a paper on the boarding-out system; and Dr. William M. McAliston a new or presidency front more of parallysis. McAlister, a paper on results of treatment of general paralysis by malaria.

THE annual dinner of past and present students of the Royal London Ophthalmic Hospital will be held at the Langham Hotel, Portland Place, on Thursday next, February 12th, at 7 for 7.30 o'clock. Mr. W. T. Holmes Spicer, consulting surgeon to the hospital, will preside. Tickets (15s. each, excluding wine) may be obtained from Sir William Lister, 24, Devonshire Place, W.1.

PROFESSOR FUCHS, the well known ophthalmologist of Vienna, will shortly visit Madrid to deliver four lectures on glaucoma, cataract, sympathetic ophthalmia, and ocular

tuberculosis respectively.

THE Fellowship of Medicine announces that on February 9th, at the Royal Society of Medicine, at 5.30 p.m., Dr. Andrew Balfour will show a cinematograph film on malaria, with special reference to the malarial parasite as a thera-peutic agent. The second week of a three weeks' combined course in diseases of children begins on February 9th; the institutions concerned are the Paddington Green Hospital, Victoria Hospital, and the Children's Clinic. A four weeks' course is also being held during February at the St. John's Hospital for Diseases of the Skin. At the London School of Hygiene and Tropical Medicine a series of eight lectures is in progress on Tuesdays and Thursdays, and the second week of the course in venereal diseases at the London Lock Hospital will begin on February 9th. During the last fortnight in February there will be a course in general medicine and surgery and the special departments at the Prince of Wales's General Hospital, Tottenham. In March courses will be held in diseases of the chest at the Brompton Hospital; medicine, m useases of the chest at the Brompton Hospital; medicine, surgery, and gynaecology at the Royal Waterloo Hospital; infectious fevers at the North-Eastern Fever Hospital (Tottenham); gynaecology at the Chelsea Hospital for Women; and an intensive course in general medicine, surgery, and the special departments at the Royal Northern Hospital, with which is associated the Royal Chest Hospital. Copies of the syllabus of these courses may be obtained from the Secretary of the Fellowship at No. 1, Wimpole Street, W.1.

THE Central Association for Mental Welfare is arranging a special three months' course for teachers of mentally defective, dull, and backward children, to be held in London from May 7th to July 25th. The course will include lectures on normal and abnormal psychology, methods of teaching, demonstrations in speech training, manual work, and the social and legal aspects concerned. Further information may be obtained from the office of the association, 24, Buckingham Palace Road, S.W.1.

By an order dated December 31st, 1924, and issued on January 30th, 1925, the Home Secretary has added to the list of conditions which must be notified in compliance with Section 73 of the Factory and Workshop Act, 1901: (1) poisoning by carbon bisulphide; (2) aniline poisoning; and (3) chronic benzene poisoning. The notice must specify the name and personal address of the patient and the disease from which in the opinion of the medical practitioner he is suffering. For this notification the medical practitioner is entitled to a fee of 2s. 6d. Failure forthwith to send a notice renders the practitioner liable to a fine not exceeding 40s.

THE private wards in Westminster Hospital are, with the permission of the Prince of Wales, president of the hospital, to be named "The Prince of Wales Wards." The new ophthalmic wards are to be named the "Wolfe Barry Wards," in memory of Sir John Wolfe Barry, chairman of the house committee from 1899 until his death in 1918.

BEGINNING with the January issue, the Revue de Médecine will contain short memoranda, rather than the larger original articles published hitherto. It will be mainly devoted to abstracts of the principal medical publications in France, Great Britain, Germany, Spain, and Italy which have appeared during the previous month, and will so become more definitely a review of recent medical literature.

THE fifth congress of French-speaking pediatrists will be held at Lausanne in 1926 under the presidency of Dr. Taillens, professor of children's diseases in the University of Lausanne.

THE January issue of the Journal of the Outdoor Life is essentially a Trudeau memorial number, being issued in connexion with the fortieth anniversary of the foundation of the famous sanatorium at Saranac Lake, New York. We gave an account of recent additions to the institution on June 14th, 1924 (p. 1062), and this anniversary number of the Journal, founded in connexion with the sanatorium in 1903, gives very full details of the work that has been carried on at the sanatorium. Personal recollections are supplied by several contributors, including Dr. Lawrason Brown, the originator of the *Journal*, at first an assistant resident physician and a joint builder of the sanatorium organization. A short article deals with Robert Louis Stevenson, who same to Saranac Lake in the autumn of 1837, and whilst there wrote some of his best essays, including Pulvis et Umbra, The Lantern Bearer, A Christmas Sermon, and some portions of The Master of Ballantrae. The issue is well illustrated.

THE annual medical congress known as the "Journées médicales de Bruxelles" will be held at Brussels from June 21st to 24th. Further information can be obtained from the general secretary, Dr. Beckers, 36, rue Archimède, Brussels.

THE fourth International Congress of Industrial Medicine will be held at Amsterdam in September, 1925. Further information can be obtained from the general secretary, Dr. Brocx, 55, Piecke de Hochstraat, Zimmer 64, Amsterdam.

THE twenty-ninth congress of French-speaking neuro-logists and alienists will be held in Paris at the end of May, 1925, under the presidency of Dr. Anglade, when the following papers will be read: Late recovery from mental disease, by Dr. Robert; familial infantile encephalopathies, by Dr. Crouzon; legal medicine and states of mental torpor, by Dr. Briand.

DR. DEVE has been nominated professor of clinical medicine in the medical school at Rouen.

A SUDDEN malaria epidemic in Java is reported to have caused 1,000 deaths.

WITH its January issue the Canadian Medical Association Journal enters the filteenth year of its publication as the official organ of the association. During the past ten years it has doubled the number of its reading pages and increased their size. In a foreword to this issue reference is made to the visit of Sir Jenner Verrall and Dr. Alfred Cox last year, and it is noted "that after free discussion a form of affiliation was arrived at, by which our association, without losing any of its individuality, becomes affiliated with the parent society, and through it with the medical profession in all the sister dominions of the empire. This will confer certain privileges upon our members. We hope that this action may lead to many pleasant interchanges between our association and the profession in Great Britain, and in the other dominions." The annual meeting of the Canadian Medical Association will be held at Regina, from June 22nd to 26th.

Aetters, Aotes, and Answers.

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

Communications intended for the current issue should be posted so as to arrive by the first post on Monday or at latest be received not later than Tuesday morning.

THE telephone number of the British Medical Association and British Medical Journal is Gerrard 2630 (Internal Exchange). The telegraphic addresses are:

EDITOR of the British Medical Journal, Aitiology Westrand, London.

FINANCIAL SECRETARY AND BUSINESS MANAGER (Advertisements, etc.), Articulate Westrand, London.

MEDICAL SECRETARY, Medisecra Westrand, London.

The address of the Irish Office of the British Medical Association is 16, South Frederick Street, Dublin (telegrams: Bacillus, Dublin; telephone: 4737 Dublin), and of the Scottish Office, 6, Rutland Square, Edinburgh (telegrams: Associate, Edinburgh; telephone: 4361 Central).

QUERIES AND ANSWERS.

ALKALIS AS ADJUVANTS TO ACTION OF INTESTINAL ANTISEPTICS.

DR. L. WHEELER (London) writes: I should be glad to learn of any experience in the use of an alkali (sodium bicarbonate), given before meals, improving the action of an intestinal antiseptic administered after meals.

INCOME TAX.

Board and Lodging of Assistant.

"R. M." is an outdoor assistant not receiving any allowance from his principal for board and lodging. If the latter were to pay the landlady's bill each month, giving the assistant the balance of his salary, could "R. M." return that balance as his income for tax purposes and the employer deduct the full amount as a professional expense?

*** It would not be correct unless a real alteration were made in the terms on which "R. M." is employed—for instance, suppose the gross salary be £x and the annual amount of the board-lodging expenses be £y, then, so long as the employer is liable under the terms of engagement to pay "R. M." £x, that is the amount of his liability, whether it be wholly paid to him personally or partly to his landlady. But if an alteration be made in a binding manner in these terms, so that the employer is bound to pay "R. M." £x-£y only and to provide him with board-lodging, then the latter is liable in respect of £x-£y only, and the employer can treat as a professional expense £x-£y plus the actual cost of the board-lodging which he provides.

LETTERS, NOTES, ETC.

MONEYLENDERS.

In the Times law reports for January 26th is a note of a case heard before Mr. Justice P. O. Lawrence in the Chancery Division. It appears that a moneylender had obtained judgement sum-It appears that a moneylender had obtained judgement summonses against two civil servants who appeared before the court. In reply to the judge one of the debtors said that they had borrowed £15 each, and the judge remarked that the amount had swollen to £64. An order was made for payment of £1 a week in one case and 10s. in the other. Addressing the debtors the judge said, "Pull yourselves together and get out of the hands of moneylenders, or it will wreck your whole careers." It appears to be the general experience that at the present time moneylenders are very active in issuing circulars offering to lend money. One rather senior member of the profession has sent us such a circular he received the other day; it contains the statement—"We may add that for a considerable time we have specialized in accommodating medical practitioners upon exceptionally low terms." The observation, quoted above, by Mr. Justice Lawrence appears to be the best comment on the risk attaching to the acceptance of such offers.

CORRECTIONS.

Dr. James Cook wishes to correct an error in his letter on puerperal infection, published last week (p. 236). His percentage of puerperal infection cases is 0.5 per cent.—not 0.05.

An error occurred in *Epitome*, para. 130, of our issue of January 31st. The name of the fourth of the joint authors should have been given as J. S. B. Stopford.

VACANCIES.

NOTIFICATIONS of offices vacant in universities, medical colleges. and of vacant resident and other appointments at hospitals, will be found at pages 32, 33, 34, 35, and 38 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 36 and 37.

A short summary of vacant posts notified in the advertisement columns appears in the Supplement at page 59.