

lecturers on medical jurisprudence was, that they should give instruction in practical rather than in ultra-scientific matters. He agreed with Mr. Rumsey as to the importance of forensic medicine: but thought that he had confounded what was required to merely enable a practitioner to discern a medico-legal case with the knowledge required to make a profound medical jurist. This was as great a mistake as to confound the knowledge of surgery sufficient for a general practitioner with that which would be expected from a consulting surgeon.

Dr. ARJOHN proposed as an amendment, that the list of subjects be extended by adding botany.

Sir D. CORRIGAN seconded the amendment, which was negatived; and, after some further discussion, the report was adopted in the following amended form.

REPORT.

"The Committee appointed to consider and report 'what are the subjects without a knowledge of which no candidate should be allowed to obtain a qualification entitling him to be registered?' beg to submit the following list of subjects:—1. Anatomy; 2. General Anatomy; 3. Physiology; 4. Chemistry; 5. Materia Medica; 6. Practical Pharmacy; 7. Medicine; 8. Surgery; 9. Midwifery; 10. Forensic Medicine.

"The Committee in enumerating the subjects a knowledge of which should constitute a minimum of the acquirements possessed by every registered Medical Practitioner, desire to add the following explanatory remarks:—

"*'Chemistry'* should include a knowledge of the principles of chemistry, and of those details of the science which bear on the study of medicine.

"*'Medicine and Surgery'* should include a knowledge of systematic and clinical medicine and surgery, and also of morbid anatomy."

Association Intelligence.

NORTHERN BRANCH.

THE annual meeting of the above Branch will be held in the Library of the Newcastle Infirmary, on Thursday, June 20th, 1867, at 2 P.M. President for 1866-67, Sir JOHN FIFE, F.R.C.S.; President-elect for 1867-68, EDWARD CHARLTON, M.D.

Dinner at the Queen's Head Hotel, at 5 P.M.

Gentlemen intending to read papers or cases, or describe pathological specimens, are requested to communicate with the Secretary, without delay.

G. H. PHILIPSON, M.D., *Hon. Sec.*

Newcastle-upon-Tyne, June 6th, 1867.

EAST ANGLIAN BRANCH.

THE annual meeting of the above Branch will be held at the Town Hall, King's Lynn, on Thursday, June 20th, at 2 P.M. President for 1866-67, T. W. CROSSE, Esq.; President for 1867-68, J. V. HAWKINS, M.D., King's Lynn.

Members are invited to attend in accordance with the following resolution, which was passed at the last annual meeting, held in Norwich. Moved by Dr. Copeman, Norwich, and seconded by Mr. Cadge, Norwich: "That the next annual meeting of the East Anglian Branch be held, in combination with the Cambridge and Huntingdon Branch, at Lynn, and that Dr. Hawkins be elected President."

Gentlemen intending to read short papers or cases, or to be present at the dinner, are requested to communicate with the President-elect, or the Honorary Secretaries, without delay. Dinner tickets, 12s. 6d.

B. CHEVALLIER, M.D., Ipswich } *Hon.*
J. B. PRITT, M.D., Norwich } *Secs.*

CAMBRIDGE AND HUNTINGDON BRANCH.

THE annual meeting of the above Branch will be held, in conjunction with the East Anglian Branch, at the Town Hall, King's Lynn, on Thursday, June 20th, at 2 P.M.; J. V. HAWKINS, M.D., King's Lynn, President.

Members intending to read papers or cases are requested to communicate with the Honorary Secretary at their earliest convenience.

P. W. LATHAM, M.D., *Honorary Secretary.*

Cambridge, May 28th, 1867.

LANCASHIRE AND CHESHIRE BRANCH.

THE annual meeting of the above Branch will be held in Chester, on Wednesday, June 26th, at 2 P.M.; JOHN HARRISON, Esq., President, in the Chair.

Dinner at 4.30 P.M.

Gentlemen intending to read papers or cases, are requested to forward the titles of the same to the Honorary Secretary, without delay.

HENEY SIMPSON, M.D., *Hon. Secretary.*

SOUTH MIDLAND BRANCH.

THE annual meeting of the above Branch will be held at the Northampton Infirmary, on Thursday, June 27th, at 2 P.M.; E. W. WATKINS, Esq., President, in the Chair.

Gentlemen intending to read papers or cases, are requested to communicate with Dr. Bryan, of Northampton, one of the Honorary Secretaries, without delay.

J. M. BRYAN, M.D. } *Hon.*
G. P. GOLDSMITH, Esq. } *Secs.*

BATH AND BRISTOL BRANCH: ORDINARY MEETING.

THE sixth ordinary meeting of the session was held at the York House, Bath, on Thursday evening, May 23rd; J. S. BARTRUM, Esq., President, in the Chair. There were also present thirty-seven members and two visitors.

The minutes of the last meeting were read and confirmed.

New Members. Mr. Richard Kinneir was proposed by Mr. C. S. Barter, and seconded by Mr. R. S. Fowler; and Danvers Ward Bush, M.D., was proposed by Dr. Symonds, and seconded by Dr. Beddoe; and will be balloted for at the annual meeting.

Communications. 1. The Recent Outbreak of Cholera at Pill, illustrated by a Map of the Locality. By R. W. TIBBETS, M.B. This paper provoked much discussion. The paper, together with remarks by Mr. Davies, medical officer under the Board of Health for Bristol, will be forwarded for publication.

2. A Report of a Case of Punctured Wound of the Abdomen. By W. M. CLARKE, Esq.

3. Mr. HINTON narrated a case of Abscess in the neighbourhood of the Umbilicus, which was opened by incision, and, after a few days, discharged feculent matter. The patient survived three months, and gave way to intemperate habits, which hastened her death.

4. Mr. R. S. FOWLER exhibited the Stomach and Duodenum of a man who was suddenly taken ill without any premonitory symptoms, and died in a few hours. The anterior wall of the duodenum close to the pylorus was found perforated by a circular ulcer of the size of an ordinary quill pen. The man was a very healthy, steady, temperate man, and had never exhibited any signs of gastric disturbance.

5. Labour terminating in Expulsion of Hydatids. By E. CROSSMAN, Esq.

BRITISH MEDICAL ASSOCIATION: ANNUAL MEETING.

THE Thirty-fifth Annual Meeting of the British Medical Association will be held in Dublin on Tuesday, Wednesday, Thursday, and Friday, the 6th, 7th, 8th, and 9th days of August next.

President—EDWARD WATERS, M.D. Edin.

President-Elect—WILLIAM STOKES, M.D., D.C.L., Regius Professor of Physic in the University of Dublin.

The Address in Medicine will be delivered by Sir DOMINIC CORRIGAN, Bart., M.D., Physician to the Queen in Ireland.

The Address in Surgery will be delivered by ROBERT WILLIAM SMITH, M.D., Professor of Surgery in the University of Dublin.

The special subjects for discussion in Scientific and State Medicine will be introduced by JOHN HUGHES BENNETT, M.D., Professor of the Institutes of Medicine and of Clinical Medicine in the University of Edinburgh; and H. W. RUMSEY, Esq., of Cheltenham, Member of the Medical Council.

The business of the meeting will be conducted under four sections; viz.:

Section A—Medicine. *President*, Dr. LAW; *Secretary*, Dr. W. MOORE.

Section B—Physiology. *President*, Dr. MACDONALD; *Secretary*, Dr. HAYDON.

Section C—Surgery. *President*, Mr. ADAMS; *Secretary*, Dr. M. COLLIS.

Section D—Midwifery. *President*, Dr. BEATTY; *Secretary*, Dr. KIDD.

Gentlemen desirous of reading Papers, Cases, or any other Communications, are requested to give notice of the same to the General Secretary at their earliest convenience.

T. WATKIN WILLIAMS, *General Secretary*.

13, Newhall Street, Birmingham, June 11th, 1867.

Correspondence.

ENDURANCE OF SUFFERING CONFERRED BY RELIGIOUS PRINCIPLE.

LETTER FROM FREDERICK J. BROWN, M.D.

SIR,—Fourteen years since, I attended an old man (aged 78 years) for cancer of the rectum, whose sufferings were the most agonising that I ever witnessed. The bowel was motionless in consequence of surrounding deposit, and its surface was ulcerated. Faecal matter, on entering the rectum, was moved upwards by antiperistaltic action, and was rejected by the mouth (ileus); whilst a small portion would, at rare intervals, drift through the rectum, and be discharged *per anum*. My patient was a brave old man-of-war's man, and was endowed with good mental faculties. The disease proved fatal in eighteen months from the first indications; but my attendance became continuous in December 1852, and he died on March 15th, 1858. After several months of suffering, he hinted at suicide. I pointed out the duty of man to submit to the will of God; but I saw that the mind of my patient was becoming unequal

to the strain upon it. One circumstance alone restrained his hand at this period—viz., consideration for his wife, who had been the widow of a suicide; for he felt it to be a point of honour to save her from a second widowhood of like nature. Notwithstanding this circumstance, I noticed that the mental struggle was becoming daily heavier and more alarming. At this period a pious layman visited my patient, and I soon perceived a change of mind. I never heard a complaint or a murmur, and I never witnessed a sign of impatience, from this time to the hour of the old man's death.

What is the explanation? Divines will say that supernatural strength was imparted. Psychologists will attribute the change to the cogency of one of the principles of the mind, and will instance the heroism of Red Indians under torture, and the constancy of martyrs in any cause. In pondering on this subject, it must be remembered that the powerful principles of honour and affection were already in strong action in a brave man, yet were yielding; and that, with increasing weakness, another principle sufficed to enable the man to endure suffering. It may be responded, that the principle of religion is stronger than that of honour and that of affection; or that, in certain individuals and under varying circumstances, one principle may excel another in strength. Or it may be said, that the addition of a third principle, viz., that of religion, to those of honour and affection, proved sufficient. Be the *modus operandi* what it may, the fact remains, that religious consolation enables a man to endure suffering; and I recommend this consideration to my professional brethren.

I wish to make one remark further. Should the instinct of self-preservation fail in the somatic (as contradistinguished from its psychical) element, no principle can save a man from suicide. The converse proposition may be inferred; viz., that principle may be efficacious in preventing suicide in tedium vitæ dependent on the psychical element.*

I am, etc., FREDERICK J. BROWN.

Rochester, Kent, May 1867.

PREVENTION OF VENEREAL DISEASE.

LETTER FROM T. HECKSTALL SMITH, Esq.

SIR,—In the very interesting report of the Harveian Society Meeting, in your impression of the 25th inst., it is stated by Mr. Weeden Cooke that the Free Hospital "is inundated with poor diseased women from the metropolitan workhouses;" and by Mr. Sedgwick, that "in workhouses women with venereal disease were considered to have forfeited their right to relief, and sent from pillar to post, infecting right and left."

Can it be possible that these statements are made with care as to their accuracy? if so, a most crying abuse is unmasked, which should be emphatically denounced.

I held the surgeoncy of the hospital attached to the Bromley Union-house, a suburban union, during a period of sixteen years. Cases of venereal disease were admitted, and treated until cured; entered as such in the weekly returns, and no objection was ever offered by the Guardians or Poor-law Inspector to their being treated, and I should have been very much surprised if any such objection had been raised;

* The nervous and the mental forces appear to bear the same co-relation that exist between electricity and magnetism. This is the proper mode of investigating mental phenomena, whether these be attributes of matter or attributes of spiritual substance, differing from matter, and termed spirit or soul. During organic life, the mind is a psycho-somatic power, and neither element is independent; therefore, in the text, I do not intend to separate the elements of self-preservation absolutely, but only comparatively.

nor do I believe that either the letter or the spirit of the poor-law admits of such objection. I trust the attention of the poor-law authorities will be directed to this matter, and that no time will be lost in declaring what the law upon the subject really is.

I am, etc., T. HECKSTALL SMITH, F.R.C.S.
St. Mary's Cray, Kent.

* * * The treatment of venereal cases in London workhouses will shortly be placed in what will, it may be anticipated, be a satisfactory footing, as special provision will be made for them. But we should be glad of information as to the arrangements on this head in provincial workhouse infirmaries, and especially those of populous cities and towns.

Medical News.

APOTHECARIES' HALL. On June 6th, 1867, the following Licentiates were admitted:—

Clay, G. L., Birmingham
Harvard, David, Newport, Pembrokeshire
Richardson, J. A., Hull Infirmary
Sangster, Charles, Lambeth Terrace
Truman, S. J., Nottingham
Webb, John, Hannington, Hants
Willcox, R. L., Wareham

At the same Court, the following passed the first examination:—

Drew, Walter Henry, University College

APPOINTMENTS.

BELLAMY, Edward, Esq., Demonstrator of Anatomy at Charing Cross Hospital, appointed Surgeon to the St. George's and St. James's Dispensary.

STANBURN, Wm., Esq., appointed Assistant Medical Officer of the County and Borough Lunatic Asylum, Sneinton, Nottingham.

A COMPLAINT AGAINST AN EXAMINER.

It has been a matter of conversation in medical circles in the metropolis during the last few weeks, that an unpleasant circumstance had occurred in connexion with one of the examiners of the Royal College of Surgeons. We have not thought it right to be among those who have referred to the matter vaguely (leaving an imputation upon the examiners generally), and before the explanation of the examiner in question was officially made. The subject, however, came formally before the Council of the College of Surgeons on Thursday afternoon, and it is now so far completed, that we may state the outline of facts.

A student of St. George's Hospital, under oral examination by Mr. South on the subject of hernia, gave answers which were not satisfactory to that gentleman, and justified his views by referring to his observation of the practice of the surgeons of his hospital. Mr. South then asked him, how many operations for hernia he had seen. He said twenty. He complained that Mr. South roughly denied the truth of this answer (which was, however, strictly accurate), and reflected upon the practice of the surgeons of St. George's. The result was, to prejudice his passing his examination.

The Lecturers on Surgery at St. George's, feeling that the student should be protected, communicated with Mr. South on the subject, but did not receive a satisfactory reply. Dr. Page, the Dean of the School, therefore addressed the President and Council of the College. On Thursday, at the Council, Mr. South gave explanations to the effect that he understood the student to say that he had witnessed twenty operations for hernia during his time of dressership;

and that it was of this that he expressed his doubts. He denied having made any imputation against the practice of the surgeons at St. George's Hospital. Mr. Kiernan, who sat at the same table with him during the examination, corroborated this statement.

It is much to be regretted that Mr. South fell into an error, and that he allowed it to lead him into the course admitted. An injustice was evidently done to the student, who, it is agreed on all hands, behaved with great propriety in the matter. The authorities of St. George's have done well, we think, in at once taking action on this occasion. Students are to be examined with proper strictness and care; but every courtesy and consideration should be extended to young men undergoing the very trying ordeal of personal examination on a momentous occasion.

THE COUNCIL OF THE COLLEGE OF SURGEONS.

THE Council elections for the College of Surgeons are now closely approaching. It is no part of our business to make lists and to prophesy the winning candidates; but there is at least one gentleman who has, we think, so strong a claim on the consideration of all the Fellows, that we should not be justified in omitting to refer to them. Mr. H. Spencer Smith, who was a candidate last year in order of seniority, withdrew so as not to injure the cause of the liberal party. From his position as a hospital surgeon, as one of the oldest and ablest teachers of surgery in London, and as an accomplished man of business, he unites every claim which a man can possess for a seat in the Council of the College of Surgeons.

THE FRANCHISE OF ST. ANDREW'S.

A CORRESPONDENT writes:—"A general meeting of the St. Andrew's Medical Graduates' Association is to be held next Wednesday. The number of members who have already joined must be most gratifying to the originators of the Society as an evidence not only that union in defence of their rights is needed, but that it is also possible. One feeling seems to pervade the graduates wherever situated—a deep sense of the injustice proposed to be dealt out to them; and but one resolve—a determination not to cease their labour until they have the privileges of freemen like their fellows. Many members of the House of Commons have promised active assistance in the removal of the disfranchising clause, and the friends of the Association feel sure that it has only to continue its work with energy and zeal to accomplish its purpose."

FEVER IN THE MAURITIUS. A private telegram from Mauritius to-day, dated the 18th of May, announces that the fever was decreasing.

BEQUESTS. Miss Mary W. Copp, lately deceased, has left £300 each to the following institutions: the Seamen's Hospital Ship *Dreadnought*; the Charing Cross, Brompton Consumption, Samaritan Free, and Cancer Hospitals; the Blenheim Street Dispensary; the Institution for Nursing Sisters; the Devon and Exeter Hospital; and the Asylum for Idiots; £200 to the Asylum for Cripples; and £100 to the Teignmouth Dispensary. Dr. Lewis Powell has left £100 each to the following institutions: Royal Westminster Ophthalmic Hospital; St. George's Hospital; the Westminster Hospital; Queen Charlotte's Lying-in Hospital; and the Brecon Infirmary.

OPERATION DAYS AT THE HOSPITALS.

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| MONDAY..... | Metropolitan Free, 2 P.M.—St. Mark's, 9 A.M. and 1.30 P.M.—Royal London Ophthalmic, 11 A.M. |
| TUESDAY.... | Guy's, 1½ P.M.—Westminster, 2 P.M.—Royal London Ophthalmic, 11 A.M. |
| WEDNESDAY... | St. Mary's, 2 P.M.—Middlesex, 1 P.M.—University College, 2 P.M.—London, 2 P.M.—Royal London Ophthalmic, 11 A.M.—St. Bartholomew's, 1.30 P.M.—St. Thomas's, 1.30 P.M. |
| THURSDAY.... | St. George's, 1 P.M.—Central London Ophthalmic, 1 P.M.—Great Northern, 2 P.M.—London Surgical Home, 2 P.M.—Royal Orthopaedic, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Hospital for Diseases of the Throat, 2 P.M. |
| FRIDAY..... | Westminster Ophthalmic, 1.30 P.M.—Royal London Ophthalmic, 11 A.M. |
| SATURDAY.... | St. Thomas's, 9.30 A.M.—St. Bartholomew's, 1.30 P.M.—King's College, 1.30 P.M.—Charing Cross, 2 P.M.—Look, Clinical Demonstration and Operations, 1 P.M.—Royal Free, 1.30 P.M.—Royal London Ophthalmic, 11 A.M. |

MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

TUESDAY. Anthropological Society of London, 8 P.M.

TO CORRESPONDENTS.

MEMBERS are reminded that it is a matter of great convenience and economy to the Association, and conduces to the efficiency of its working and to their comfort and advantage, that their subscriptions, which are now due, should be paid promptly to the Secretary, Mr. T. WATKIN WILLIAMS, New-hall Street, Birmingham; or to the Secretaries of their respective Branches.

All Letters and Communications for the JOURNAL, to be addressed to the EDITOR, 37, Great Queen St., Lincoln's Inn Fields, W.C.

AUTHORS OF PAPERS are respectfully requested to make all necessary alterations in their copy before sending it to the JOURNAL. Proofs are furnished to authors, not for further changes, but that the writer may correct the printer when he has misread the manuscript.

Communications as to the transmission of the JOURNAL, should be sent to Mr. RICHARDS, 37, Great Queen Street, W.C.

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

DR. DRYDALE.—At the earliest opportunity.

MR. P. HARPER.—The length of the paper interferes with its early insertion.

MR. LEACROFT.—The letter has been handed to Mr. Thomas Richards, 37, Great Queen Street, Lincoln's Inn Fields, W.C., to whom all communications respecting the transmission of the JOURNAL should be addressed.

THE BRITISH PHARMACOPEIA.

SIR,—Allow me to point out in the pages of the BRITISH MEDICAL JOURNAL an error of some practical importance, which passed without notice in the old edition of the *British Pharmacopæia*, and which now appears in the new one.

The saccharated carbonate of iron is described as containing at least 57 per cent. of carbonate of iron, whereas in its purest form it cannot contain more than from 45 to 46 per cent. This can be shown upon paper thus:—One molecule of sulphate of iron can yield no more than one molecule of carbonate; that is, 278 parts of sulphate can only yield 116 parts of carbonate of iron (these numbers being in accordance with the atomic weights and formulae of the *Pharmacopæia*). If this be so, then two ounces of sulphate—the quantity ordered—will give no more than almost exactly five-sixths of an ounce. This, mixed with the one ounce of refined sugar ordered, will give at best a mixture of which 1 5-8th parts contain 5-8th of carbonate, or of which 100 parts contain 45·45 of carbonate instead of 57, as stated. Besides this, however, allowance ought to be made for destruction of some of the carbonate by oxidation. The volumetric test given in the *Pharmacopæia* is calculated on the supposition of there being 57 per cent. of carbonate in the preparation, and is therefore also erroneous.

June 7th, 1867.

I am, etc.,

EQUIVALENT.

VERY MYSTERIOUS.

At the request of the Secretary of the Venereal Commission, we have great pleasure in stating that the early and correct copy of the Report of the Venereal Commission, with which we were favoured for publication a fortnight since, was not communicated to us by the Secretary; nor, we may add, by any other member of the Commission. Like many other public documents of interest to the profession, of which we have, during the last six months, been specially favoured with early and correct copies for publication, its transmission is destined to remain a mystery, over which our contemporary the *Lancet* sighs with a pain in which we sympathise the more that it is hopeless, and that we are precluded by other ties from relieving it.

ASSOCIATION REPORTS ON PUBLIC HEALTH.

SIR,—In last week's JOURNAL you call attention to an excellent proposal made by a correspondent, for an annual report upon the prevalence of different kinds of disease in various parts of the kingdom.

If such a report could be obtained in a satisfactory manner, there can be little doubt that it would be a valuable aid in the study of the natural history of disease; but I would point out that to render it trustworthy for such a purpose it would be necessary that the scheme should receive almost universal support from the members of the Association, and at least—1, that the returns upon which it is to be founded should be drawn from the same class of persons in each district of the kingdom; 2, that they should be exact numerical records, not mere statements of general impressions on the part of medical men; and 3, that the diseases should all be recorded upon the same plan.

I believe that the only way in which the proposition can be carried out, will be by means of the organisation, as suggested by the Registration of Disease Committee, and already sanctioned by the Association at the meetings in Leamington and Chester.

This plan, which has been fully carried out in Manchester and Salford, and in St. Marylebone, London, for six years, and of late, also, at Preston and Birmingham, has already been described in detail in the report of the Committee, read at Chester, and published in the JOURNAL for August 25th, 1866.

Briefly, it consists in the collection of returns from all public medical institutions, workhouses, and Poor-law unions; and it is recommended that, in order to carry out the scheme, small associations should be formed in the different districts, which should by subscriptions pay suitable persons to collect the returns, and defray the very moderate expenses incidental to the undertaking.

The list of diseases to be recorded was a short time ago sent to each Member of the Association.

The returns from Manchester and Salford, from St. Marylebone, London, Preston, and Birmingham, were also published for several successive months in the JOURNAL, and they were only discontinued (until the Committee had decided upon the best mode of securing uniformity in the registration).

I trust that shortly they be recommenced with the new disease list, and that other towns and districts may be induced to join in the undertaking.

I am, etc., ARTHUR RANSOME,

Hon. Sec. to the Registration of Disease Committee.

St. Peter's Square, May 31st, 1867.

NOTICE TO ADVERTISERS.—Advertisements should be forwarded direct to the Printing Office, 37, Great Queen Street, Lincoln's Inn Fields, addressed to Mr. Richards, not later than *Thursday*, ten o'clock.

UNUSUALLY RAPID ACTION OF THE HEART.

SIR.—The interesting case recorded by Dr. Cotton in your impression of to-day's date, reminds me of one very similar which occurred in my own practice some ten years ago, and of which I never heard the parallel until now.

In the case which came under my care, the patient was a man of 30 to 40 years of age, rather slender, and of middle height and fair complexion. When I saw him, the action of the heart was so rapid, that I could not make out the precise number of beats; but I roughly estimated that its velocity was tripled; yet the action, beyond being noisy and rather violent, was unattended by any appreciable valvular murmur, friction-sound, or irregularity of rhythm. His countenance was pale and anxious, and he had difficulty in sleeping; but beyond these facts, I could discover nothing having any relation to his singular condition. I believe that he had suffered a similar attack once before in his life, but had otherwise had fair health. He recovered completely after about ten days' illness, and I lost sight of him.

I am unable to suggest any cause for this singular derangement of the heart's action; was quite at sea at the time in regard to treatment, and relied chiefly on keeping him quiet, feeding him carefully, and, after a few experimental medications, letting him alone.

I think, after reading the report of Dr. Cotton's case, I should adopt the same line of treatment, if called upon again to prescribe for another patient in the same predicament. Probably, the disease arises in the nervous system.

I am, etc.,

JAMES EDMUNDS, M.D.

Fitzroy Square, W., June 1st, 1867.

T. L.—We have not yet received the report of the meeting of the Metropolitan Counties Branch, at which Mr. Holmes's paper was read.

H. S.—We endeavour to observe a certain order of priority, according to date of reception, for communications received; but as we make it a rule to give always a certain proportion of communications from practitioners in the provinces, and as, on the other hand, it is desirable that each number should contain a certain variety of subjects treated, so as to interest various classes of medical readers, it is necessary to use discretionary power. We have one main object, to present to our readers, as a body, the best possible matter, and to make each number of the JOURNAL as complete as possible. Subject to this, we are anxious to consider the wishes and interests of individual contributors.

THE OPHTHALMOSCOPE IN PHYSICIANS' PRACTICE

SIR,—I am much gratified by the perusal of the short article in the last number of this JOURNAL, p. 633, in which Mr. Solomon urges on physicians the use of the ophthalmoscope. Some years ago, Dr. John W. Ogle pointed out the great value of this instrument to the physician. I have used the ophthalmoscope very extensively, and I feel sure that by its aid I have obtained much help towards a clearer knowledge of diseases, especially of the nervous system. It is, for instance, of value in showing to us in a striking manner how widespread are the tissue-changes in some cases of advanced granular disease of the kidney. By an observation of the fundus of the eye, an experienced ophthalmoscopist will occasionally predict with confidence and with correctness the existence of advanced granular disease of the kidney. The ophthalmoscope also gives us another point of view, from which to regard constitutional syphilis. By the way, it not unfrequently corrects such easy inferences as that "amaurosis," occurring in a patient undoubtedly the subject of syphilitic disease of the nervous system, is most likely to be due to deep changes of a syphilitic nature in the eyes themselves. As a mere matter of fact, amaurosis occurring with "syphilitic epilepsy" is nearly invariably optic neuritis.

If number of cases were the test, the physician is most interested in optic neuritis, and its sequelae, atrophy. For optic neuritis nearly always forms one of the symptoms of that wide disturbance of the nervous system which occurs with cerebral tumours. Even when using the term cerebral tumour in an unusually extended meaning, including any sort of "foreign body" within the cranium. The signs of such disturbance vary from continued severe headache, with or without vomiting, to an acute illness, at the worst of which the patient may be partly or wholly insensible, with retracted belly, irregular pulse, &c. In these conditions, and in various stages between them, it often happens that there are no means of ascertaining whether the patient sees well or not. It is, however, generally easy to ascertain the condition of the retina and optic disc. It is absolutely necessary to use the ophthalmoscope in cases of acute or chronic cerebral disease as a matter of routine.

The optic neuritis is, it seems most likely, but a fragment, fortunately a visible fragment, of a much wider change which a "foreign body" in the nervous system "excites." From such a point of view the varied conditions of the optic discs are of the highest pathological interest. When the physician uses the ophthalmoscope in a case of severe cerebral disease, he is not merely seeking a new symptom, but he is observing changes in a nervous organ. A statement of this sort is too wide to be very satisfactory. I will therefore venture to indicate a group of cases for conjoint research by physicians and ophthalmologists, viz., "Convulsions, with optic neuritis, or its sequela, atrophy," and especially those cases in which the convulsions begin unilaterally. In these cases there is usually, now and then, more or less one-sided palsy, as well as occasional spasm. Cases of this sort occur sufficiently often in physicians' practices to enable those who like classifications, founded on groupings of such symptoms, to form a clinical entity. Yet the cases to my thinking are valuable chiefly as showing a convenient point where many of us may work together at the condition of the brain which permits occasional convulsion, or other forms of disorder of nervous function.

There are many other diseases in which the ophthalmoscope gives us important information, negative and positive; viz., locomotor ataxy, chorea, meningitis, cerebral hemorrhage. As a mere appeal, however, this letter is already long enough, especially as I have recently written on the subject at length elsewhere.

I am, etc.,

HUGHINGS JACKSON.

Bedford Place, Russell Square, June 3rd, 1867.

A CONSTANT READER.—The pamphlet is published by Adam and Charles Black, Edinburgh. Price One Shilling.

LIGHT WINES IN MEDICINE.

SIR,—Now that the duty on light wines is so much reduced, we are enabled to prescribe them medicinally to many of our patients who could not afford such a luxury before the reduction. It therefore becomes necessary that we should be able to form a tolerably correct estimate of their medicinal value; so I should feel obliged if any of your readers would furnish me with particulars of a ready means of testing the amount of alcohol and of acid present in any specimen of wine, so as to arrive at a tolerably accurate result. This would be a great help to the occasionally fallacious test of ordinary tarting.

I am, etc.,

"IN VINO VERITAS."

STAMPS.—The number of stamps issued to the principal London weekly newspapers during the year ending 30th June 1866, was as follows:—**BRITISH MEDICAL JOURNAL**, 114,400; **Weekly Times**, 111,600; **Law Times**, 108,000; **Punch**, 101,500; **Athenaeum**, 84,000; **Lancet**, 81,575; **Mining Journal**, 76,879; and **Homeward Mail**, 70,000.

The communications of "Saxo-Grammaticus", Punjab, will be very welcome; they should be short, if frequent.

OLIVE OIL IN CROUP.

SIR,—I have often been told of attacks of croup having been speedily subdued by the administration of a teaspoonful of olive oil every hour. If any of our associates have had experience of such treatment, and would kindly communicate it, it would be conferring a boon upon such of us as fear to depart from the beaten track of emetics, leeches, calomel and antimony, &c. My informants of the value of olive oil have only been of the old woman type.

I am, etc.,

FATERSHAM.

DR. McVEACH (Coventry) should address his complaint to the Council of the Medical Society of London, of which the gentleman named is one of the Secretaries.

LAW OF VACCINATION.

SIR,—I have no doubt the deficiencies in the law on other subjects, as well as vaccination, would surprise Mr. Moore, if he knew them, at the same time I may observe that Mr. Moore's statement relative to his own mode of proceeding, does not in the slightest degree affect the law on the subject, so that I am compelled to repeat that the Superintendent-Registrar has no authority to ascertain whether the registrar has done his duty or not, as the law stands at present.

I am, etc.,

CH. PAROCH.

DR. JOHN WADES (Hanley).—We entirely concur in the opinions expressed, and shall take occasion again to refer to the subject.

The letters of our Special Correspondents in Edinburgh and Berlin are again unavoidably postponed. Articles are in type, and will appear during the month, from Dr. Southey, Dr. J. G. Swayne, Dr. Wade, Professor Von Graefe, Dr. J. Birkbeck Navina, &c. We are also compelled to postpone numerous letters.

PREVENTION OF VENEREAL DISEASES.

SIR,—As my name is mentioned in your number on May 25th last, would you permit me to solicit a place in your valuable periodical for the enclosed copy of a letter to Dr. Drysdale.

I am, etc.,

DAVID MACLOUGHLIN, M.D.,

Member of the Legion of Honour.

36, Bruton Street, Berkeley Square, June 3rd, 1867.

Copy of a Letter to Dr. Drysdale.

DEAR SIR,—My attention has been called to the fourth Report of the Harveian Society, published in the **BRITISH MEDICAL JOURNAL**, May 25th, p. 613.

I observe that my name is mentioned as having spoken at that meeting. Since it was deemed necessary to report anything I said, I regret that the most important of what I did say, was omitted. In reply to Mr. Acton's objection to enter into the inquiry if there is not a syphilitic virus, you heard me state to him that he, Mr. Acton, was present, twenty-five years ago, in Paris, at a public consultation, when I brought Mr. Ricord to admit, publicly, that he did not know one symptom pathognomonic of a syphilitic virus, except inoculation, when I pointed out to him that herpes pretialis, in a state of active inflammation, increased inoculable pus, and that, therefore, he had not one symptom pathognomonic of a syphilitic virus.

I regret that, as Mr. Acton was present at the above public consultation, and as he could not controvert my statement to the Society, that the greatest syphilidographer of the age, Dr. Ricord, had not, twenty-five years ago, nor has he now, one symptom pathognomonic of a syphilitic virus, it is to be regretted, I say, that what I stated to the Society, before Mr. Acton, was not reported.

I am, etc.,

DAVID MACLOUGHLIN.

36, Bruton Street, Berkeley Square, June 3rd, 1867.

DR. HUMPHRY SANDWITH.—Few contributors show so much consideration. At an early opportunity.

DR. LANDSOWNE (Bristol).—The duty of resignation seems to us clear and incumbent. A similar case occurred some time since at Guernsey. Dr. Hoskins and other medical officers then resigned.

DR. MEADOWS.—We very much regret the delay. The pressure on our space is so great, that we shall only be able to use a very small number of the blocks kindly lent. The article has been in type, waiting for insertion, upwards of eight weeks. It will be inserted before the close of this month.

DR. F. S. THOMPSON confers a benefit upon the Association by his efforts to assist in its extension. We hope that he will be present in Dublin at the next annual meeting, where the details of a proposition for the purpose may perhaps be arranged.

THE INDIAN MEDICAL SERVICE.

SIR,—May I be permitted to correct an error which appeared in your impression of the 25th inst., regarding the last general order No. 370, by the Bengal Government, with reference to the Indian Medical Service?

The leading article states that provision has been made "so that the medical officer in charge of a jail or hospital may be properly and comfortably placed." A reference to the general order itself will show that this is a mistake, and that the "provision" which is represented in your columns as having been effected, is in fact, the only one upon which the intentions of Government are undebated, and which is still deferred *sine die*.

The medical officer of a jail is invariably a civil surgeon, and in the majority of instances he is also the administrative officer with magisterial powers. The general order states that charges of jails, lunatic asylums, etc., "will be fixed in the Civil Department," and thus the position of civil surgeons is still under consideration, a disgraceful testimony to the inefficiency of official warrants. In 1864, Sir Charles Wood, No. 1060, directed this matter to be settled as soon as possible. Three years have nearly passed, and a new general order has appeared, leaving the case untouched. It has been represented before in your columns, that under existing circumstances a civil surgeoncy is in most cases a loss, and that the retention of the same by medical officers is attributable solely to their love of their profession. Is this to be the reason for prolonged injustice, and is it a policy calculated to produce contentment, and increased efficiency in the service? I leave the question to be answered by others; meanwhile I would respectfully suggest to Sir Stafford Northcote, that, if he has honourable and just intentions towards the Indian medical department, it would be well for him to issue definite instructions, which a subordinate government dare not disobey. Officers would then know their real position and expectations, and would be free, either to retain, or resign, their civil charges, and be released from suspense, while the Secretary of State for India would have the pleasure to see that his orders from the India Office are not stultified by unjustifiable delays and opposite opinions.

I beg to subscribe myself,

A MEMBER OF A DEGRADED SERVICE.

May 29th, 1867.

COMMUNICATIONS, LETTERS, &c., have been received from:—Mr. Field; Mr. Nunneley, Leeds (with enclosure); Mr. S. E. Solly (with enclosure); Mr. Edward Garraway; Dr. James Atkinson, West Hartlepool (with enclosure); Dr. Thurston, Ashford (with enclosure); Mr. G. E. Stanger, Nottingham; Dr. W. L. Winterbotham, Bridgwater Infirmary; Dr. Williams, Wrexham (with enclosure); Dr. V. Bazire; Mr. R. L. Bowles, Folkestone (with enclosure); Dr. Humphry Sandwith, Winterton (with enclosure); Dr. McVeagh, Coventry (with enclosure); Dr. Lansdowne, Bristol (with enclosure); Dr. E. Burd, Shrewsbury (with enclosure); The Secretary of the Harveian Society; Dr. W. F. Wade, Birmingham (with enclosure); Dr. J. B. Pitt, Norwich; Dr. G. M. Humphry, Cambridge; Mr. T. M. Stone; Mr. R. S. Fowler, Bath (with enclosure); Mr. J. T. Clover; Dr. Birkbeck Nevins, Liverpool (with enclosure); Mr. Callender (with enclosure); Dr. Gairdner, Glasgow; Dr. E. S. Thompson; Dr. Markham; Dr. Sibson; Dr. George Johnson (with enclosure); Dr. Simpson, Manchester (with enclosure); Mr. E. Bellamy; Dr. Samelson, Manchester; John W. Leacroft, Redditch; Dr. Drysdale (with enclosure); Dr. Meadows; Dr. Marcet; Mr. T. Watkin Williams, Birmingham (with enclosure); Dr. Holman, Reigate (with enclosure); Dr. Burnup; and Dr. G. H. Philpason, Newcastle-on-Tyne.

BOOKS, &c., RECEIVED.

Photographs of Eminent Medical Men of all Countries, with Brief Analytical Notices of their Works. Edited by Wm. Tindal Robertson, M.D., M.R.C.P. London: 1867.
Observations on Medical Education. By John Hughes Bennett, M.D., F.R.S.E. Edinburgh: 1867.
The Elements of Natural Philosophy. By Charles Brooke, M.A., F.R.S. Based on the Treatise of the late Golding Bird, M.A., M.D., F.R.S. London: 1867.
Hospitals, Infirmarys, and Dispensaries. By F. Oppert, M.D. London: 1867.
Obstetric Aphorisms. By J. G. Swayne, M.D. Fourth edition. London: 1867.
The Prescriber's Companion. By A. Meadows, M.D. Lond. Second edition. London: 1867.
The Sunday Gazette, June 9th.
The Glasgow Weekly Herald, June 8th.
The Glasgow Herald, June 6th.
North British Daily Mail, May 17th.
South Durham Herald, June 8th.
The Bristol Daily Post, June 7th.
South Durham and Cleveland Mercury, May 25th.
The Friend of India, April 25th.
The Allahabad Government Gazette.
Faddowes' Shrewsbury Journal, June 5th.

ADVERTISEMENTS.

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A Special Department is devoted to the description, WITH ILLUSTRATIONS, of New Inventions in Medicine, Surgery, Dietetics, and the Allied Subjects.

According to a recent Parliamentary Return, the number of Stamps issued to the principal London Weekly Newspapers during the year ending 30th June 1866, was as follows:

| | |
|-------------------------------|---------|
| British Medical Journal | 114,400 |
| Weekly Times..... | 111,600 |
| Law Times..... | 108,000 |
| Punch..... | 101,500 |
| Athenaeum..... | 84,000 |
| Lancet..... | 81,575 |
| Mining Journal..... | 76,879 |
| Homeward Mail..... | 70,000 |

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