

Memoranda:

MEDICAL, SURGICAL, OBSTETRICAL.

PERNICIOUS ANAEMIA FOLLOWING INTESTINAL OBSTRUCTION DUE TO STASIS.

IN March, 1922, one of us (C. L. G. C.) reported in the *BRITISH MEDICAL JOURNAL* (March 4th, p. 347) a case of obstruction, due to stasis, with the following particulars.

"A. B., a woman aged 55, was under . . . care . . . for five months suffering from vomiting [commencing April, 1921]. This occurred two or three times during the day; it had no relation to meals and no distinctive features. She had no pain; the pulse and temperature were normal, and the tongue was clean. She was thin and very sallow. The examination of the abdomen was negative. Constipation was a salient symptom throughout, and aperients were continually required. Dieting and rest in bed for two months relieved her condition so that she was able to go about. She, however, vomited occasionally, and retained a very sallow colour. Generally she had lost weight.

"During August her condition became much worse. On the 25th there was very frequent vomiting, a rising pulse rate, and the abdomen was slightly distended. The next morning the vomiting had become continuous, the abdominal distension was much more marked, and there was very marked peristalsis. Dr. Denyer, physician to Hull Royal Infirmary, agreed that she had intestinal obstruction, and that immediate operation was necessary.

"I opened the abdomen the same evening, and found all the colon immensely distended, but there was no obstruction in the rectum nor any part of the colon. Examination for other causes proved negative. The central incision was closed and a temporary colostomy made. The vomiting stopped immediately, and she has never vomited since. Full-sized motions were passed by the rectum after the fifth day, and some faeces through the colostomy wound. The sallow colour has disappeared. She has gained weight, and is obviously in better health than she has been for years. The weight, which at the operation was 5 st. 10 lb., was 7 st. 1 lb. on February 18th [1922].

"The case seems to fall into the group of cases of intestinal atony following stasis and bacterial toxæmia, well described in Notnagel's *Encyclopædia*."

Subsequent History.

She remained well until August, 1923, when she consulted us again because of "shortness of breath." She was then intensely anaemic and lemon-tinted, and had occasional vomiting of bile. The colostomy wound was closed, excepting for a minute hole, which allowed a small quantity of liquid faeces to be discharged after aperients had been taken.

The blood was examined, with the following report (date August, 1923): White blood corpuscles 3,000 per c.mm. Blood films: great poikilocytosis with numerous megalocytes; microcytes also seen. Megaloblasts and normoblasts common. Polychromasia and basophil stippling frequently seen. A typical pernicious blood picture.

Two months ago (December, 1925) she again came under our care, when we found her bedridden, very breathless, and, if possible, still more anaemic and lemon-tinted than before. We again had a blood test, as follows: White corpuscles 3,000 per c.mm. Red corpuscles 22,000,000 per c.mm. Haemoglobin 40 per cent. Colour index 1.1; colour of serum, golden yellow. Blood film: poikilocytosis very marked; anisocytosis; many microcytes. Anisochromia marked, polychromasia and basophil stippling; few megaloblasts and normoblasts. Typical pernicious anaemia.

There was never any discharge from ear, nose, or vagina, and all teeth had been extracted fifteen years before the present illness. Nothing has been done for the patient, as she refuses all treatment.

The case seems to show direct association of stasis with bacterial or chemical toxæmia, and subsequent development of pernicious anaemia. The absence of any malignancy is shown by the operation, the five years' duration, and the blood pictures. The intestinal obstruction was due to chemical or bacterial toxæmia, and certainly not to any mechanical means; and, although the obstruction was relieved by the operation, yet the toxæmia still persisted to produce the pernicious anaemia.

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RELATIONSHIP OF HERPES ZOSTER AND CHICKEN-POX.

WE are at present attending a female child, aged 8 months, suffering from typical chicken-pox and herpes. The herpetic rash was most marked in the intercostal spaces on the left side of the chest and on the posterior aspect of the thigh. A brother (aged 6) and a sister (aged 4) were recovering from chicken-pox, and the mother stated that when seven months pregnant with the last child she suffered for a month from shingles, and was in hospital for that period.

Numerous cases have been reported of a child developing herpes a few weeks after other members of the family had had chicken-pox, but we believe this is the first reported case in which both rashes appeared at the same time.

L. E. GREEN DE WOOLFSON, L.R.F.P.S.,
W. H. SMITH, M.B., Ch.B.
Birmingham.

SOME ten years ago I published a case which I considered undoubtedly to prove some connexion between herpes zoster and varicella, and have, of course, seen many similar instances in the *JOURNAL* since. Here is another.

On April 3rd last I saw an elderly woman who was suffering from a very severe attack of herpes zoster. Sixteen days later an only grandchild, aged 4, living in the same room, developed a profuse rash of varicella. No source of infection, other than from the grandmother, could be traced.

Enfield. HOWARD DISTIN, M.B.

PULMONARY TUBERCULOSIS IN OLD AGE.

IN the *JOURNAL* of December 26th, 1925 (p. 1223), Dr. A. P. Ford describes the case of a patient who developed pulmonary tuberculosis at the age of 77.

I have recently seen a woman who had good health until she was 65 years of age, when she developed pulmonary tuberculosis and died within six months. A few weeks before she contracted the disease her sister, whom she had been nursing, died of consumption. She knew of no history of tuberculosis in her father's or mother's families, but two of her brothers and four sisters had died of consumption at the following ages: 30, 44, 76, 78, and 81.

London, W.I. L. S. T. BURRELL.

SEPTIC SORE THROAT COMPLICATED BY ERYTHEMA NODOSUM.

A SERIES of cases of ulcerative tonsillitis with unusual sequelae has been observed amongst the staff and women patients of the Lingfield Colony. Thirteen cases of tonsillitis with more or less severe pyrexia and an unusual amount of exudation occurred in quick succession, the incubation period being apparently only a few days. An unusual symptom which occurred in five of the cases, and appeared on the third or fourth day of the illness, has been an eruption of erythema nodosum over the front of both legs. Scattered papules were first observed, many of which coalesced, forming large raised irritable patches. Oedema was sometimes present. The erythema lasted a week or more and on fading left a brown stain. Most of the cases had enlarged glands in the posterior triangle of the neck. One case (with erythema nodosum) had a mass of enlarged glands in the supraclavicular region which threatened suppuration, but finally resolved slowly. Two of the cases (not showing erythema nodosum) developed a transient rash on the trunk and limbs, and one of these, a girl who had previously been known to have a systolic murmur at the apex, suffered from precordial pain, rapid pulse, and a soft double systolic murmur which led one to fear the onset of infective endocarditis. She has, however, after three weeks' illness made a fair recovery.

Examinations were made from swabs from several of the throats, but the Klebs-Loeffler bacillus was not found. Cultures have been made from three of the swabs. The bacteriological report was to the following effect:

"Strains from Cases I and II would be classed as the *Streptococcus anginosus* of septic sore throat and scarlet fever; and the strain from Case III as *Streptococcus salivarius*. The only difference between the two is the ability, present in the first type, to develop haemolysin."

Cases of tonsillitis, of only moderate severity, have occurred at intervals in the children's homes during the past few months. Three months ago a boy was removed to the local fever hospital suffering from an apparently typical attack of scarlet fever, but no second case was observed. Can any light be thrown on the diagnosis?

I am indebted to Dr. J. Tylor Fox, the superintendent of the Colony for Epileptics, Lingfield, for permission to make this report.

ELEANOR SHEPHEARD.
The Colony for Epileptics, Lingfield, Surrey.

that there would be any opposition to registration if the Select Committee decided to recommend it. The most difficult group from the medical point of view were the homes which catered for persons suffering from chronic diseases such as paralysis, nervous disorders not certifiable, chronic heart disease, chronic bronchitis, when these patients were regarded as above the Poor Law standard. The great bulk of such patients could only pay from 25s. to 50s. a week for their care, board, and lodging. They were not looked after by a trained nursing staff, and were not regularly visited by doctors. The accommodation was that of a poor-class dwelling-house with the ordinary appointments. Such homes compared unfavourably with the well known voluntary institutions providing accommodation for this type of patient, or indeed with well managed Poor Law infirmaries. It did not appear possible to Dr. Menzies to do much to improve the conditions in this type of home without increasing the cost to the patient, but registration would in the course of time tend to raise the standard of these homes, especially as in many instances there was only one patient, or possibly two patients, cared for by the "keeper" of the home.

Dr. Menzies said he had seen something of the problem of nursing homes all over England and Wales, as well as London. He believed that the most hopeful solution of it was by a considerable extension of the system of providing pay wards and pay beds in voluntary hospitals and Poor Law infirmaries, by provision of hospital annexes for private paying patients to voluntary hospitals, and by the provision of specially built and designed private hospitals or nursing homes. He knew examples of these last, some provided by business men on commercial principles and some by philanthropists. The management committees of voluntary hospitals were waking up to the need of making provision for paying patients, and in a few years there would be a considerable increase in the number of beds available in voluntary hospitals for this purpose. The patients made their own arrangement with the physician or surgeon in attendance with regard to his fee, these arrangements being in some cases subject to the approval of the hospital board of management. The only solution Dr. Menzies could see of the financial difficulties in dealing with the class of chronic patients to whom he had referred was the provision of suitable accommodation in institutions owned and maintained by public authorities. The patient might contribute so much of the cost of maintenance as his or her financial condition permitted. The problem would assume a different aspect from the point of view of the patient and friends when Poor Law infirmaries became municipal hospitals. In the meantime, registration should be proceeded with on the lines found satisfactory for nursing homes, and in the administrative County of London it should be carried out by the London County Council. He was surprised that business men had not seen that there was a great field for the provision of good nursing homes, especially if they "roped" the medical profession into it. The kind of thing which was going to help the public was for the voluntary hospitals to extend, as they were doing all over the country, paid hospitals and paid beds. Every London general hospital was realizing that it had to provide these beds, which paid for themselves. Anyone who had the chance would rather pay three or five guineas for such accommodation than fifteen guineas for a nursing home. He did not think that registration would shut up any existing nursing homes. When an alternative was available they would not need to worry about registration.

The Committee adjourned till June 8th.

Sanitation of Offices.—Answering Lord Henry Cavendish Bentinck, on May 20th, Mr. Chamberlain said the attention of local authorities was drawn in a Home Office memorandum of 1912 to the judgement in the case of *Bennett v. Harding* (1900) as to their power to inspect workplaces and to insist on their sanitary condition. This judgement did not specifically refer to offices, and it might be well to have a test case to make the position clear. At a meeting of the Unionist Health and Housing Committee earlier in the week, Dr. Fremantle presiding, a discussion arose on the inspection of offices, concerning which the Labour party had presented a bill. It was pointed out to the Committee that the death rate for clerks was not much over the average for the population, but an indication was given that in the opinion of the Ministry of Health local authorities could inspect offices as "workplaces" and lay down conditions concerning them. The Committee learned that if this interpretation of the law were not upheld by the courts the Ministry of Health would be prepared to propose further powers for inspection of offices.

The Services.

THE KING has approved of the appointment of Lieut.-Colonel E. Ryan, C.M.G., D.S.O., R.A.M.C., to be Honorary Physician to His Majesty, and to be promoted to the brevet rank of colonel, with effect from February 18th, 1926, in succession to Lieut.-Colonel and Brevet Colonel Sir Edward S. Worthington, Kt., K.C.V.O., C.B., C.M.G., C.I.E., R.A.M.C., who has retired.

DEATHS IN THE SERVICES.

Brigade Surgeon Thomas Bennett, one of the oldest officers on the retired list of the R.A.M.C., died at Seatown, New Zealand, on March 28th, aged 90. He was born at Templemore, Tipperary, on November 10th, 1835, and educated in Dublin, where he took the L.R.C.S.I. in 1857. Entering the army as assistant surgeon on January 22nd, 1858, sixty-eight years ago, he became surgeon-major on April 1st, 1873, and retired, with an honorary step as brigade surgeon, on April 17th, 1883. A few months later he

commuted his retired pay. As a regimental medical officer he served in the 14th Foot, now the Prince of Wales Own West Yorkshire Regiment.

Lieut.-Colonel Edward Hearne Joynt, R.A.M.C.(ret.), died at Blackheath on April 27th, aged 79. He was born on January 19th, 1847, graduated as M.D. and M.Ch. in the Queen's University, Ireland, in 1870, and entered the army as assistant surgeon on April 1st, 1871, attaining the grade of brigade surgeon lieutenant-colonel on December 7th, 1895, and retiring on January 19th, 1902. During the old regimental days he served in the 51st Foot, now the King's Own Yorkshire Light Infantry. He took part in the Sudan campaigns of 1885-86, in the Egyptian Frontier Field Force, receiving the medal and the Khedive's bronze star.

Universities and Colleges.

UNIVERSITY OF OXFORD.

At a congregation held on May 22nd the degree of B.M. was conferred upon A. C. Gairdner.

UNIVERSITY OF CAMBRIDGE.

At a congregation held on May 21st the degrees of M.B., B.Chir. were conferred upon P. O. Davies.

UNIVERSITY OF LONDON.

A MEETING of the Senate was held on May 19th, when the Vice-Chancellor (Professor E. A. Gardner, Litt.D.) was in the chair.

The University Chair of Physiology, tenable at the London School of Medicine for Women, now held by Dr. Winifred C. Cullis, D.Sc., will henceforth be known as the "Sophia Jex-Blake Chair of Physiology in the University of London."

Dr. Francis J. Browne was appointed as from July 1st to the University Chair of Obstetric Medicine, tenable at University College Hospital Medical School. From 1906-19, while in general practice in a Welsh mining district, he attended post-graduate courses in London and Edinburgh, and in 1914 obtained the F.R.C.S.Ed. In 1919 he graduated M.D.Aberd. with highest honours and was appointed senior resident medical officer and research pathologist at the Royal Maternity and Simpson Memorial Hospital, Edinburgh; he was also assistant in and later in charge of the ante-natal department created by the late Dr. J. W. Ballantyne. He was subsequently appointed assistant physician in the Maternity Hospital, lecturer in clinical obstetrics in the University of Edinburgh, and clinical tutor in gynaecology in the Royal Infirmary, Edinburgh. In 1925 he received the degree of D.Sc.Ed.

Sir Holburt J. Waring, M.S., was appointed to represent the University at the bicentenary of the foundation of the Faculty of Medicine in the University of Edinburgh in June next, and Dr. R. A. Young, C.B.E., was elected the representative at the twelfth annual conference of the International Association for the Prevention of Tuberculosis to be held in Glasgow in July.

The Dunn Exhibitions in Anatomy and Physiology were awarded to A. M. Easton, an internal student of St. Thomas's Hospital Medical School, and D. F. Ogborn, an internal student of University College, respectively.

On the recommendation of the School Committee of University College Hospital Medical School, G. Payling Wright has been appointed to the Graham Scholarship in Pathology for two years from October 1st.

Dates of Examinations.

In view of the termination of the strike the decision (*JOURNAL*, May 8th-15th, p. 851) as to postponing the examinations normally held in June and July has been reviewed. The following examinations are postponed for *one week* from the dates mentioned in the regulations: The first examination for medical degrees, and the second examination for medical degrees, Parts I and II, examinations in dentistry, and examinations in veterinary science. *No change* will be made in the dates of the examinations for scholarships, the matriculation, and the examinations for M.D. and M.S.

Principal Officership.

The Senate has appointed Dr. Thomas Franklin Sibly, at present vice-chancellor of the University of Wales, to be principal officer of the University of London, in succession to Sir Cooper Perry, who retires from the office on August 31st next. Dr. Sibly is a geologist. He graduated B.Sc.Lond. in 1903 and D.Sc. in 1908; he is also D.Sc. of the University of Bristol. He was appointed lecturer in geology in King's College, London, in 1908, and professor of geology, University College, Cardiff, in 1913. In 1918 he went to Newcastle-upon-Tyne to occupy the corresponding chair. He became the first principal of University College, Swansea, in 1920, and still holds that appointment.

ROYAL COLLEGE OF SURGEONS OF EDINBURGH.

THE following 20 successful candidates, out of 58 entered, having passed the requisite examinations, have been admitted Fellows:

John Creighton Ainsworth-Davis, Solomon Bloom, Harold Douglas Cameron, John Winifred Costello, John Lloyd Davies, Appu Hanneidge Theodore de Silva, Ernest Reginald Friswell, Dewell Gann, Edwin Stowell Gawne, Wilfrid Lamont Graham, Milne Cobb Harvey, Ranfurly Percival Stanley Kelman, Hugh David Logan, Malcolm Robertson, Norman Charles Speight, Brian Herbert Swift, M.C., Donald Tregonning, Stanley Vincent Unsworth, Victor George Walker, James Mathewson Webster.

Medical News.

OF recent years there has been a steady increase in the number of large industrial concerns in this country employing medical men and women to advise the management regarding factory hygiene, the prevention of avoidable accidents, illness, and industrial diseases, and to assist in promoting the general well-being of the staff and workpeople. The Council of Industrial Medicine, an association of British industrial physicians and surgeons, already has over forty members; it meets for discussion on the fourth Friday in each month at 12, Stratford Place, London, W.1. It is also the British section of the International Congress on Industrial Accidents and Diseases, which held its fourth meeting in Amsterdam last autumn, and will, it is hoped, meet in London at some future date. The council is anxious to co-operate with all British medical practitioners (at home and abroad) who are specially engaged in industrial medicine. It is aware that there are still a number of medical practitioners in Great Britain giving general or special medical services to industrial concerns with whom so far it has not succeeded in getting into touch, and will be grateful if any such will write to the Secretary, Council of Industrial Medicine, Federation of Medical and Allied Services, 12, Stratford Place, London, W.1.

THE Right Hon. Neville Chamberlain, M.P., Minister of Health, will distribute the prizes at the London Hospital Medical College on Monday, June 28th.

THE complimentary dinner to Sir StClair Thomson, President of the Royal Society of Medicine, which has been arranged by the Section of Laryngology, will take place at the Hotel Victoria, Northumberland Avenue, W.C.2, on Friday, June 4th, at 7.30 p.m. The dinner will be followed by a dance. The price of the dinner and dance, exclusive of wine, is 21s. Fellows and members of the other Sections of the Royal Society of Medicine are asked cordially to support the Section of Laryngology by applying for tickets for themselves and their guests (ladies may be invited). Applications for tickets should be addressed to Mr. Norman Patterson, 82, Portland Place, W.1.

THE annual dinner of the Harveian Society of London will be held at the Connaught Rooms, Great Queen Street, on Thursday, June 17th, at 8 o'clock.

SIR ROBERT JONES will read a paper to a meeting of the North-Western Tuberculosis Society at the Medical School, the University, Manchester, at 3 p.m. on Friday, June 4th, on some notes on the treatment of tuberculous joints. All medical practitioners who are interested are cordially invited.

THE annual general meeting of the governors of Epsom College will be held at the offices, 49, Bedford Square, W.C.1, on Friday, June 25th, at 4 p.m., when the voting for the pensioners, foundation scholars, and an annuitant will be announced.

THE appointment of Dr. B. P. Watson, at present professor of midwifery and diseases of women in the University of Edinburgh, to be professor of obstetrics and gynaecology in Columbia University, and director of the Sloane Hospital for Women, New York, is now officially announced. Professor Watson will leave Edinburgh about the middle of August.

A SHORT course of lectures on functional nerve disorder will be given at the Tavistock Clinic, 51, Tavistock Square, W.C.1, commencing on June 14th, at 4.45 p.m. Dr. W. Langdon Brown will give the first of four lectures on the endocrines and general metabolism in the psychoneuroses. The course includes six lectures on the psychological factor in general practice by Dr. J. R. Rees and ten lectures by Dr. H. Crichton Miller on the theory and causation of the psychoneuroses. The fee for the course to medical practitioners is £2 2s. and to medical students 10s. 6d. Tickets can be obtained in advance from the honorary secretary at the clinic.

THE Fellowship of Medicine announces that Mr. Saner will give a special clinical demonstration at the Royal Northern Hospital on May 31st at 2.30 p.m. On June 3rd, at 12.45, Mr. Hepburn will commence a series of demonstrations in ophthalmology at the Royal London Ophthalmic Hospital. These surgical and ophthalmological demonstrations are open to medical practitioners without fee. From May 31st to June 12th there will be a series of lectures and demonstrations in diseases of children at different hospitals and clinics; some will be given in the mornings and others in the afternoons. The Chelsea Hospital for Women has arranged a two weeks' course in gynaecology from June 9th to 22nd. From June 7th to July 3rd the All Saints' Hospital will provide a course of instruction in genito-urinary diseases, with lectures and demonstrations. From June 14th to 26th the City of London Hospital for Diseases of the Heart and Lungs will give a special course in diseases

of the chest. From June 14th to 25th there will be a special course for general practitioners at the London Temperance Hospital from 4.30 to 6 p.m. Copies of all syllabuses and of the general course programme may be obtained from the Secretary of the Fellowship of Medicine, 1, Wimpole Street, W.1.

THE metropolitan and home counties members of the School Medical Group, Society of Medical Officers of Health, will meet at 1, Upper Montague Street, W.C.1, on Friday, June 4th, at 6 p.m., when Dr. C. N. Atlee, of the L.C.O. Health Department, will read a paper on the consultative aspect of school medical work. The meeting is open to all members of the profession.

COLONEL C. I. ELLIS, C.M.G., M.D., and Mrs. Ellis of Torquay have been presented with a solid silver salver, suitably inscribed, by the St. John Ambulance workers of Cornwall, Devon, and Dorset for their services as District Commissioner and Lady District Superintendent, respectively, of No. IX District, St. John Ambulance Brigade.

A CHEQUE for £430 has been presented to Dr. R. W. Leeming in commemoration of his forty-three years' association with the Kendal Union and twenty-one years' service as surgeon to the Westmorland County Hospital.

DR. H. E. WORTHINGTON, on his retirement after more than thirty years' practice in Birchington, has been presented by his friends and patients with a cheque for £250 and an album containing the names of 530 contributors.

THE twenty-seventh annual meeting of the Lebanon Hospital for Mental Diseases, Asfuriyeh, Beyrout, Syria, will take place at the rooms of the Medical Society of London, 11, Chandos Street, Cavendish Square, W.1, on Tuesday, June 1st. The chair will be taken by Dr. E. W. G. Masterman, chairman of the general committee, and the speakers will include Dr. R. Percy Smith, Dr. R. Fortescue Fox, and Miss Jane Gibb, matron of the hospital. Tea 4 p.m., meeting 4.30. All who are interested will be welcome.

THE eighteenth biennial conference of the China Medical Association, of which Dr. James L. Maxwell is executive secretary, will be held in Peking from August 31st to September 8th. It will meet in the buildings of the Peking Union Medical College, which is well provided with auditoriums, classrooms, laboratories, and out-patient clinics. There will be eleven sections: general medicine, general surgery, obstetrics and gynaecology, ophthalmology, oto-laryngology, roentgenology, anatomy and anthropology, physiology, public health, pharmacology, and pathology. General and sectional meetings will occupy the mornings, and demonstrations and clinics will be given on the afternoons of alternate days. Special attention will be directed to public health questions and there will be public lectures each evening. Trips to interesting buildings and localities in the neighbourhood are being arranged for the free afternoons. Business meetings and elections will occupy the last two days of the conference, and a special trip to the Great Wall of China has been arranged for September 9th.

MR. HENRY KIMPTON announces for early publication a volume on *The Thyroid Gland*, by Dr. Charles Mayo and Dr. Henry W. Plummer.

THE number of cases of measles notified in Edinburgh has been rising, and in the week ending May 15th 144 were notified as compared with 39 in the previous week.

THE Atlantic Transport Line, which previously adapted the steamship *Minnekahda* for tourists visiting New York, has introduced further improvements and provided a large sun deck. All the cabins are reserved for third-class passengers, who have full use of the decks and public rooms. Further details of the holiday monthly tours to America arranged by this company will be found in our advertisement columns.

THE Italian Pediatric Society has offered prizes for the four best monographs on the physiology and pathology of infant feeding. The first two prizes are 2,500 lire and the next two 1,500 lire. Candidates should send three copies of their monograph to La Presidenza della Società Italiana di Pediatria, S. Andrea delle Dame 21, Naples, before December 31st.

THE fiftieth congress of the German Surgical Society was held in Berlin under the presidency of Professor Friedrich Körte on April 1st, when the opening address was delivered by Professor von Eiselsberg of Vienna on the problems of the surgery of the brain and spinal cord.

THE seventeenth congress of the German Röntgen Society was held last April in Berlin, when papers were read on prophylactic irradiation of the thorax after operations, the favourable results of irradiation of the bone metastases of carcinoma, the good effect of irradiation on cerebral tumours, and irradiation in mental and nervous diseases in children.

DR. J. B. RIEUX, of the Val-de-Grâce Military Hospital, has been nominated professor of clinical medicine at the Lille Faculty of Medicine.