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In two cases blood transfusion had to be resorted to in order that the patients might be kept alive during the operation of suprapubic cystotomy. The bladder haemorrhage was controlled within a few hours of the onset of the radium exposure.

It is necessary to stress the point that all the twenty-three patients, before treatment was commenced, were profoundly ill from either sepsis or profuse haemorrhage.

Three of these patients died in hospital within one month of irradiation. The remainder, twenty, were discharged from hospital in fair health, with their suprapubic wounds firmly healed, at periods ranging from three to five weeks.

One patient survived three years, and one two years.

Two patients treated in 1927 are alive, one of whom shows

no recurrence of the growth, the other writing to say he is in poor health. A third patient is dead.

The remaining fifteen cases have been treated during the year 1928. Five have died since discharge from hospital. Ten are in fair health, and continue under observation.

In all cases of carcinoma of the bladder haemorrhage can be controlled by irradiation. In the presence of severe

cystitis the prognosis is always bad.

The suprapubic wounds, without exception, have healed rapidly. In those cases where sepsis has been absent both general and local conditions have improved for about six months after irradiation. Improvement after this period has not been maintained apart from one or two exceptional

One case of carcinoma of the female urethra invading the bladder, treated twelve months ago, remains a clinical cure. Previous to treatment there was complete incontinence of urine. Micturition is now normal.

The radium technique which has been adopted is as follows.

First a suprapubic cystotomy is performed, and the extent of the growth determined by palpation. Five milligrams of the element, in platinum tubes 25 mm. in length and with a screenage of 0.5 mm., are then inserted 2 cm. apart into the periphery of the tumour on its mucous surface, and also on its external aspect. The tubes remain in position for twelve to twenty-four hours. Each tube is threaded with silkworm-gut, and at the termination of the period of exposure is easily withdrawn from the bladder through the suprapubic wound. The silkworm-gut is used in preference to silk on account of its strength, and less likelihood of being torn when pulled on.

The fact that improvement, both in the general state of health and also in the local condition, occurred, in practically all the cases is encouraging. Increase in weight in every patient was noted for six months after the radium exposure.

OVARIOTOMY FOR UNUSUALLY LARGE OVARIAN CYST IN A WOMAN OF 73: RECOVERY.

WILLIAM EVERETT, M.B., F.R.C.S.Ed., CARDIFF.

ATTENTION was drawn to the comparative rarity of the operation of ovariotomy in women over 70 years of age by Leslie Williams (see the British Medical Journal of April 13th, page 679), who cites two personal cases, bring-

ing the total of recorded cases up to 155.

Very large ovarian cysts are not now often met with, for the simple reason that surgical facilities exist to-day for their removal before they attain to the size pictured in the textbooks of a generation ago. Now and again a case appears where the patient has been content to put up with things and live with her cyst, undismayed by its increasing size, even although advice for its surgical removal has been given. The following case is therefore recorded both on account of the rarity already mentioned and also because of the unusual size of the ovarian cyst removed.

The patient, who was 73 years of age, was seen by me on October 27th, 1927, in consultation with her family doctor, with a view to advising upon operation for an enormous swelling of the abdomen, thought to be caused by an ovarian cyst.

The patient was a woman of small stature, very cheerful and intelligent. She had had several children, and the menopause had occurred when she was about 50 years of age. When she was 65 she became conscious of her abdomen enlarging, but had decided not to worry about this misfortune until, eight

years later, when she was 73, the swelling of the abdomen had become so great as to interfere seriously with her breathing and getting about. She then complained of abdominal and sciatic pains, fatigue and breathlessness upon exertion, palpitation, sleeplessness, constipation, and inability to hold her

She was lying upon her side in bed when I saw her, and when she lay upon her back she was unable to see the top of the bedrail at the foot of her bed. She was a little cyanotic, with dilated venules about the nose, was troubled with slight bronchitis, and had a small degree of oedema round the ankles. Her heart action was arrhythmic and the sounds were feelile. Her heart action was arrhythmic and the sounds were feeble, although the valves were competent.

Examination of the abdomen revealed an enormous dull swelling rising from the pelvis and filling the whole abdomen as far as the xiphisternum, with changing areas of resonance to percussion on either flank. The fluid thrill was easily elicited. A diagnosis of large ovarian cyst was made, and preliminary puncture and drainage was advised, to be followed at a later

date by ovariotomy.

Paracentesis was performed on October 29th, 1977. On this date an area midway between the umbilicus—which was pro-truded—and the pubic symphysis was anaesthetized with 1 per cent. novocain, and the cyst punctured by a large trocar and cannula. A long rubber tube was then attached to the cannula cannula. A long rubber tube was then attached to the cannula and led beneath the bed into a 10-gallon zinc wash-batb, and the fluid contents, which resembled pea-soup, were thus slowly removed. The joy of the old lady increased as her abdomen diminished, and her happiness seemed complete when she raised her head and saw her toes! It was considered best to withdraw the cannula without pressing upon the cyst, in view of possible leakage when the flow had almost ceased. The 10-gallon bath was approximately half full, and upon later measurement the amount of fluid totalled nearly 40 pints. measurement the amount of fluid totalled nearly 40 pints.

Two weeks later she came into a nursing home, and on November 17th was operated upon for the removal of the sac. was performed under chloroform and ether, Ovariotomy attempts to introduce the needle for spinal anaesthesia having failed. Slight adhesions were encountered, but after bringing the cyst to the surface of the wound and withdrawing about ten pints of fluid which had again collected, the huge sac slipped out of the abdomen with gentle traction. Blood vessels the size of adult fingers spread over its surface from the pedicle, which was situated upon the right side. The pedicle was securely ligated and the cyst removed, the operation giving rise to no difficulty and being completed in twenty-five minutes.

The specimen was an ovarian cystadenoma, with smooth, tough, and evenly thick walls about three-eighths of an inch

thick, except at the base, where there were septal remains.

The patient made an uninterrupted recovery, and left the nursing home at the end of twenty-one days, and now, at 75, enjoys very good health.

I regret that a photograph was not taken before operation, and that the weight of the cyst and its contents was not ascertained by recording the weight of the patient before paracentesis and after ovariotomy.

Memoranda:

MEDICAL, SURGICAL, OBSTETRICAL.

TWO CASES OF OVARIOTOMY IN WOMEN AGED 84 AND 77 RESPECTIVELY.

In view of the article by Mr. Leslie Williams in the Journal of April 13th, I should like to record the following two cases.

CASE I.

Mrs. X., aged 84, a patient of Dr. Mitchell of Guildford, was, on May 1st, 1918, operated on for a large ovarian cyst, the size of a full-term pregnancy. The tumour was a huge, simple cyst of the right ovary, and was removed entire without previous tapping. The patient made an uninterrupted recovery and has remained well ever since. She is now 95 years of age and in good health.

CASE II.

Miss Y., aged 77, was a patient of Dr. Cliff-Hodges of Godalming. She was a very frail old lady, crouched, and bent in her bed, and was toothless except for two old stumps. She had been an invalid for years, but had lately suffered from intestinal obstruction, which at the time of my visit had been partially relieved by enemata, and the vomiting had ceased. temperature was 100°, and her pulse was rapid and feeble. The abdomen was filed with a huge, irregular, tender solid tumour, which had recently been wedged into the pelvis; but Dr. Cliff-Hodges had partially dislodged it and thus to some extent relieved the situation. She was an exceedingly bad operative risk, apart from the fact that the tumour was likely to prove malignant and inoperable. She was therefore advised that operation would be very risky and that it would be better, seeing that her obstruction had been relieved, to continue with palliative treatment. She, however, took a different view, and said that she could bear the pain no longer, and insisted on operation, whatever the risk might be.

The operation was performed on June 13th, 1928. There was much free fluid in the abdomen; the tumour was greenish-black in colour and loosely adherent to the bowels; the adhesions were separated and the tumour was found to be a large fibroid springing from the left broad ligament and twisted two complete turns on its short pedicle. The turnour was removed. A solid turnour of the right ovary, the size of an orange, was also removed.

The patient made a wonderful recovery from the operation and enjoyed very good health, and was able to get about for seven months. Since then she has been in failing health, and is now reported to be dying, with symptoms of intestinal obstruction.

Unfortunately, through some misunderstanding, the specimens were not submitted to the pathologist.

Guildford.

H. B. BUTLER, F.R.C.S.Ed., Surgeon, Royal Surrey County Hospital.

ELEPHANTIASIS NEUROMATOSA.

WITH reference to the case of elephantiasis neuromatosa reported in your issue of March 30th, I beg to forward photographs of a case I came across shortly before returning home from India this year.



I was travelling from Poona to Dehra Dun, and my train had been held up for some time at a halting place just outside the station of Dholpur, when the unfortunate subject of the photograph appeared. As the train was already signalled to proceed I employed the few moments at my disposal in exposing two films from the carriage door.

The affection was apparently limited to the right shoulder, arm, and hand—it is unlikely that any other such source of income would have been hidden, if present otherwise the subject appeared to be no different from his mendicant confreres. It is interesting to note how the forearm has escaped in comparison with the rest of the limb, and to compare the girth of the calves of the legs with that of the two massive fingers; presumably these are the index and middle fingers, with the ring finger hidden.

The affected hand was carried on the top of the head during "business hours," partly, no doubt, on account of the weight, and partly for the more advantageous display of the abnormality; on the departure of the train, however, it was allowed to fall to the side. The presence of voluntary movement of the joints may be seen by comparing the

On my return journey, a few days later, I was disappointed to find the lad absent from his post, and my endeavours to trace him, for the purpose of fuller investi-gation, proved fruitless. It is hoped, however, that the photographs alone may be of interest, and it is extremely

doubtful whether, if it had been advised, he would have consented to the loss of the limb, the value of which may be gauged by the weighty condition of the small pocket on his shirt, which pocket contained, presumably, the taking from that one train only.

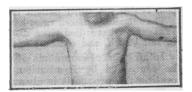
Radiological Department, Royal Herbert Hospital, Woolwich.

R. BOULTON MYLES, Major R.A.M.C.

CONGENITAL ABSENCE OF THE STERNO-COSTAL PORTION OF THE PECTORALIS MAJOR MUSCLE.

Congenital absence of the pectoralis major muscle is rare enough to lend interest to the case shown in the accompanying photograph. The patient is a boy, aged 7, with

absence of the greater part of the sterno-costal portion of the pectoralis major muscle of the left side. The sterno-clavicular portion of the muscle and the portion taking its origin from the first and second ribs are



present, the lower border of the muscle being in line with the upper border of the second rib when the arm is extended outwards. The digitations of the serratus magnus muscle are by no means marked, but this condition is probably due to insufficient development. An article which appeared in the British Medical Journal on July 10th, 1926 (p. 59), records a similar case and is furnished with a useful bibliography.

St. Leonards-on-Sea.

A. G. NEWELL, M.D., D.P.H.

A CASE OF PSEUDO-HERMAPHRODITISM.

It is unusual for it to be discovered, as in the case reported below, that a woman has been brought up as a man; more often the position is reversed—a man is brought up as a woman. Economically, it was a serious decision to have to make, but there appeared to be no other course, and the result has been to give comfort to the patient where previously there was distress.

In male attire, the patient gave her age as 17 years. As stated above, she had been brought up and educated as a male, in humble circumstances in the country. Latterly she had earned her living as the boy employed to assist the driver of a wagon for the distribution of petrol. To show that she had done her work well it may be recorded that on one occasion she won a prize at a show for the best turned out lorry; on another occasion she was left, snow-bound, in charge of the wagon on a lonely moor for three nights, while the driver went to seek help. That she was a woman was not suspected. She found it inconvenient to have to sit to make water, but it was not until she began to menstruate at the age of 17 that she sought the aid of the district nurse.

Her doctor sent her to see me because he considered that she was a woman, and that it would be necessary to stop her from living as a man. The skin of the face was smooth, and the voice was that of a woman. The figure was boyish. The breasts were those of a woman and well formed. The pubic hair was of the female distribution. The clitoris was large, and of the size of the penis of a baby. The labia majora were fused in a median raphé, giving to the parts an appearance of a scrotum devoid of testes. At the anterior end of the bag was an orifice, through which urine was passed with difficulty.

It was decided that since, physically and psychologically, the patient was more woman than man, it would be inadvisable to permit her to remain in male attire to continue living as a man. Accordingly, having entered hospital in male attire, she was provided with female bed attire and admitted as a woman to a female ward. Her Christian name was changed to the nearest feminine equivalent, but no change could be made in the particulars of the birth registration.

Under general anaesthesia the median raphé was divided, and the edges were sutured to form labia. The urethra opened high up in a tiny vagina, which admitted the end of the little finger. In the vault was a rudimentary cervix. By combined rectal and abdominal examination a rudimentary uterus was palpated, and

small ovaries, as they were taken to be. Since discharge from hospital the patient has been employed as a female domestic servant. She has menstruated regularly for three days at a time. She says that she is much happier living as a woman. Not uncomely, she is fond of wearing becoming clothes, and looks and behaves like a woman.

JAMES RIDDELL, M.D., F.R.C.S.Ed., Honorary Assistant Surgeon, South Devon and East Cornwall Hospital, Plymouth.

For the benefit of the layman Dr. IAN THOMSON has "potted" medicine into a booklet of little more than 100 pages, under the title Good Health. 18 He combines the art of compression with the faculty of clear exposition; so well, indeed, that Sir ARTHUR KETTH seems justified in saying in his preface that the mantle of Professor Arthur Thomson has fallen upon his son. Perhaps the layman will find difficulty in digesting the five-page digest of hormones; and a glossary of medical terms might be useful as an adjuvant to some of the potions of knowledge; but there is nothing deleterious in the ingredients, nor anything that need produce nightmare in the most neurotic of readers. the most neurotic of readers.

The ninth volume issued by The Medical Department of the United States Army in the World War¹⁹ is devoted to communicable and other diseases. The diseases discussed include the enteric group, inflammatory diseases of the respiratory tract, tuberculosis, cerebro-spinal meningitis, encephalitis lethargica, anthrax, diphtheria, venereal diseases, the diarrhoeal group of diseases, the acute exanthemata, mumps, infectious jaundice, typhus, trench fever, Vincent's disease, malarial fevers, diseases caused by intestinal parasites, diseases of the skin, and neuro-circulatory asthenia. The text is illustrated by numerous tables of the incidence, mortality, and complications of the various diseases. A list of references, mainly to American publications, is appended to each chapter.

We have received a copy of Dr. Gabriel Langfeldt's prize essay²⁰ on the clinical examination of the visceral nervous system. It contains a criticism of the various tests in common use, such as the intravenous adrenaline test, the pilocarpine reaction, the atropine reaction, the oculo-cardiac reflex, and the cilio-spinal reflex. The Norwegian text is followed by summaries in German and English.

Under the auspices of the well-known French journal La Presse Médicule, a pamphlet²¹ on medical education and registration in France has been compiled for the use of those interested, whether in France or other countries. It contains detailed information about the educational facilities in Paris and some general notes about those in the provinces.

A booklet²² describing spas in the centre of France has been prepared incorporating descriptions by several authors and a preface by Professor Carnor. A brief account of each place is given, with notes of the pathological conditions for which the waters are specially recommended. The booklet will be of considerable assistance to those who wish to know the theraporation possibilities in that neighbourhood. peutic possibilities in that neighbourhood.

18 Good Health. By Ian S. Thomson, M.D., D.P.H. With a foreword by Sir Arthur Keith, M.D., LL.D., F.R.S. London and New York: Longmans, Green and Co. 1929. (Cr. 8vo, pp. v + 122. Paper cover, 2s. net; cloth, 3s. 6d. net.)

19 The Medical Department of the United States Army in the World War. Prepared under the direction of Major-General M. W. Ireland, Vol. IX, Communicable and Other Diseases. By Lieut-Colonel Joseph F. Siler, M.C., U.S. Army. Washington: U.S. Government Printing Office. 1928. (Sup. roy. 8vo, pp. 6.3s. 53 charts. 2 dollars.)

20 En oversikt over den kliniske undersökelse av det viscerale nervesystem og en kritikk av de forskjellige prövers praktiske rerdi stöttet paa egne undersökelser. By Gabriel Langfeldt. Bergen: J. W. Eides Boktrykkerei A/S. 1929. (6 × 9, pp. 134.)

21 L'Enseignement Médical en France à l'Usage des Médecins et Etudiants Français ou Etrangers. Paris: La Presse Médicale. 1929. (Demy 8vo, pp. 76.)

22 Stations Thermales de la Centre de la France. Préface par M. le Professeur Carnot. Paris: L'Expansion Scientifique Française. 1929. (64 × 74, pp. v + 79; 1 map. 12 fr.)

PREPARATIONS AND APPLIANCES.

VITAMINS IN MARGARINE.

MESSRS. LEVER BROTHERS have drawn our attention to the results of tests on the vitamin content of certain of their margarines that have been carried out at two independent laboratories in this country. The margarines tested were special brands which had been activated by the addition of vitamin concentrates.

The manufacture of a margarine with an adequate vitamin content is a matter of considerable economic importance, for, until recently, animal fats have been the chief source of vitamins A and D, and the relatively high price of such fats has been an important factor in causing deficiency in these contents in the little of the children and the contents of the children and the children an vitamins in the diet of the children of the poorer classes. The tests on margarine made by Dr. Katherine Coward have already been published (Lancet, October 6th, 1928, p. 726). She concluded that the particular brands of margarine that she tested were equal to the best summer butter in their vitamin A and D content, and that they were superior to many samples of button tested. butter tested.

Messrs. Lever Brothers have submitted to us the results of a second series of tests carried out in another laboratory. These show that the vitamin concentrates used in manufacture have a satisfactory vitamin content, and also confirm Dr. Coward's finding that the finished margarine has a vitamin content equal to that of good butter.

BIRTHDAY HONOURS.

THE Honours List issued on June 3rd, on the occasion of His Majesty's birthday, includes the names of the following members of the medical profession.

Order of Merit.

ROBERT BRIDGES, M.A., M.B., D.Litt., LL.D., F.R.C.P., Poet Laureate. In recognition of his eminent position in the world of literature.

Privy Councillors.

BERTRAND EDWARD, BARON DAWSON OF PENN, G.C.V.O., K.C.B., K.C.M.G., M.D., F.R.C.P., Physician in Ordinary to His Majesty

The Hon. Earle Christmas Grafton Page, M.B., Ch.M., Treasurer of the Commonwealth of Australia.

G.C.V.O.

Sir Humphry Davy Rolleston, Bart., K.C.B., M.D., F.R.C.P., Physician in Ordinary to His Majesty the King; Regius Professor of Physic in the University of Cambridge.

Sir Edward Farquhar Buzzard, K.C.V.O., M.D., F.R.C.P., Physician Extraordinary to His Majesty the King; Regius Professor of Medicine in the University of Oxford.

Sir Hugh Mallinson Righy, K.C.V.O., M.S., F.R.C.S., Serjeant Surgeon to His Majesty the King.

K.C.B. (Civil).
Sir Frederick Stanley Hewett, K.C.V.O., K.B.E., M.D., Surgeon to His Majesty the King and Surgeon Apothecary to His Majesty's Household.

FRANCIS EDWARD SHIPWAY, M.D., Senior Honorary Anaesthetist to Guy's Hospital.

K.B.E. (Civil).

RICHARD RAWDON STAWELL, M.D., President of the Melbourne Hospital; for services to the Commonweath of Australia.

Major-General Thomas HENRY SYMONS, C.S.I., O.B.E., Honorary Surgeon to His Majesty the King; Director-General, I.M.S.

Knights Bachelor.

Professor William Colin Mackenzie, M.D., F.R.S., Director of

the National Museum of Australian Zoology.

ROBERT STANTON WOODS, M.D., M.R.C.P., Physician in charge of the Departments of Physiotherapy and Electrotherapy, London Hospital.

C.B. (Military).

Surgeon Rear-Admiral Henry Cadman Whiteside, M.R.C.S., L.R.C.P.
Major-General Harold Percy Waller Barrow, C.M.G., D.S.O., O.B.E., K.H.S. (late R.A.M.C.), Director of Hygiene, the War

C.B. (Civil).

MAURICE ALAN CASSIDY, M.D., F.R.C.P., Chief Medical Officer of the Metropolitan Police.

C.M.G.

WILLIAM JAMES DEACON INNES, M.R.C.S., L.R.C.P., West African Medical Staff, Director of Medical and Sanitary Services, Gold Coast.

OLIVER FRANCIS HAYNES ATKEY, M.B., F.R.C.S., Director of the Sudan Medical Service.

C.I.E.

Major-General Richard William Anthony, I.M.S., Surgeon General with the Government of Bombay.

CHARLES ALBERT BENTLEY, M.B., C.M., Director of Public Health, Bengal.

C.V.O.

HAROLD KINGSTON GRAHAM HODGSON, M.B., B.S., Radiologist to HAROLD KINGSTON GRAHM HODGSON, M.B., B.S., Radiologist to King's College Hospital.

Frank Dutch Howitt, M.D., M.R.C.P., Physician in charge of Physiotherapy Department, Prince of Wales's General Hospital.

LIONEL ERNEST HOWARD WHITEY, M.C., M.D., M.R.C.P., Assistant Pathologist, Middlesex Hospital.

M.V.O. EDWARDS CHARLES DODDS, M.D., M.R.C.P., Professor of Biochemistry in the University of London,

C.B.E. (Military).

Colonel A. H. SAFFORD, V.H.S. (late R.A.M.C.), Assistant Director of Medical Services, Baluchistan District, India.

C.B.E. (Civil).

DONALD MACKENZIE MACRAE, M.D., Principal Medical Officer, Bechuanaland Protectorate.

Licut.-Colonel John William Warson, C.I.E., I.M.S., Civil Surgeon, Ajmer, and Chief Medical Officer, Rajputana and Ajmer-Merwara.

O.B.E. (Military).

O.B.E. (Military).

Surgeon Commander Frank Lewis Smith, R.N.
Major Douglas Gordon Cheyne, M.C., M.D., R.A.M.C., Deputy
Assistant Director of Hygiene, China Command.
Captain Peter Fife Auchinachie Grant, M.B., I.M.S.
Major John Clark Pyper, M.B., I.M.S., late Medical Officer,
Equitation School, Saugor, India.
Squadron Leader (Hon. Wing Commander) Edgar Huntley,
M.B., B.S., R.A.F.

O.B.E. (Civil).

ALEXANDER SANDISON, M.B., Principal Medical Officer, Ministry of

Pensions.

Major Jamshedji Nusserwanji Duggan, I.M.S., Professor of Ophthalmic Medicine and Surgery, Grant Medical College, Bombay, and Superintendent of the Sir Cowasji Jehangir Ophthalmic

Hospital, Bombay.

PIEDADE FELICIAN MATHIAS, Madras Medical Service, SuperinPORTURA HOSPITAL and Lecturer in Surgery, tendent, Government Royapuram Hospital, and Lecturer in Surgery, Royapuram Medical School, Madras.

IRVING DANIEL RAMSAY, M.D., Civil Surgeon, Ministry of Interior,

Iraq.
GEORGE STUART, M.A., M.B., Ch.B., Assistant Director, Laboratories, Department of Health, Palestine.

M.B.E. (Military).

Medical Warrant Officer, 3rd Class Assistant Surgeon Alfred Backman, Indian Medical Department, attached Iraq levies.

M.B.E. (Civil).

THOMAS FAWSITT, M.R.C.S., L.R.C.P. For public and charitable

THOMAS FAWSITT, M.R.C.S., L.R.C.P. For public and charitable services in Oldham.

WILLIAM PATRICK SMYTHE MITCHELL, Indian Medical Department, Medical Officer, Bastar State, Central Provinces.

JAMES HERBERT THEODORE, Indian Medical Department, King Institute, Guindy, Madras.

SOCRATES NORONHA, Medical Officer in charge, Anti-Venereal Department, Bombay Municipality.

CHARLES ROBERT PHILIP, M.B., East African Medical Service, Medical Officer, Kenya.

Kaisar-i-Hind Medal (First Class).

George Barnes Archer, M.D., Medical Officer, Medical Mission, Dayabari, Ranaghat, Nadia, Bengal.

The honour of Knighthood has been conferred also upon JAMES R. JACKSON, M.R.C.V.S., Chief Veterinary Officer, Ministry of Agriculture and Fisheries, and upon P. Chalmers Mitchell, C.B.E., M.A., LL.D., D.Sc., F.R.S., Secretary of the Zoological Society.

THE GENERAL ELECTION.

MEDICAL MEMBERS OF THE NEW PARLIAMENT.

THE following nine medical men who were members of the last Parliament have been re-elected to the House of Commons at the recent General Election:

Dr. A. Vernon Davies (C.), Lancaster (Royton).
Dr. W. E. Elliot (C.), Glasgow (Kelvingrove).
Dr. F. E. Fremantle (C.), Hertfordshire (St. Albans).
Dr. H. C. Haslam (C.), Lincolnshire (Horncastle).
Dr. E. Graham Little (Ind.), London University.
Dr. Alfred Salter (Lab.), Bermondsey (West).
Professor Thomas Sinclair (C.), Queen's University, Belfast.
Returned unopposed.

Dr. Drummond Shiels (Lab.), Edinburgh (East). Dr. J. H. Williams (Lab.), Carmarthen (Llanelly).

The following eight members of the medical profession have also been elected; several of them have sat as members of the House of Commons in previous Parliaments.

The Right Hon. Christopher Addison (Lab.), Swindon. Dr. Ethel. Bentham (Lab.), Islington (East). Dr. Robert Forgan (Lab.), Renfrew (Western). Mr. Somerville Hastings (Lab.), Reading. Dr. Joseph Hunter (L.), Dumfries. Dr. H. B. Morgan (Lab.), Camberwell (North-West). Dr. J. H. Morris-Jones (L.), Denbigh. Dr. G. E. Spero (Lab.), Fulham (West).

Of the seventeen successful medical candidates, nine belong to the Labour party, five are Conservatives, two are Liberals, and one is an Independent. Dr. Ethel Bentham has the distinction of being the first medical woman to enter Parliament.

Sir George Berry (C.), who was one of the three representatives of the combined Scottish Universities in the late Parliament, is standing again, and another medical candidate for that constituency is Dr. J. Kerr (Lab.). The result has not yet been declared.

Polling Figures.

The following are the polling figures at all the contested elections in which medical candidates were successful. An asterisk denotes that a candidate sat in the last Parliament.

asterior denotes that a candidat	e sat	ın	the l	last	Parlian
SWINDON (WILTS):					
Dr. C. Addison (Lab.)	• • • •				16,885
*Sir R. Mitchell Banks (C.)				• • • •	14,724
F. C. Thornborough (L.)					7,060
ISLINGTON (EAST):					
Dr. Ethel Bentham (Lab.)			•••		15,199
*Major R. I. Tasker (C.)			•••		13,641
*Major R. I. Tasker (C.) E. C. Middleton (L.)					11,136
LANCASTER (ROYTON):					,
*Dr. A. Vernon Davies ((')					15,051
H. Derhyshire (L.)					13,347
H. Derbyshire (L.) A. E. Wood (Lab.)					10,763
GLASGOW (KELVINGROVE):				•••	20,.00
*Dr W E Elliot (C)					17,031
*Dr. W. E. Elliot (C.) J. Winning (Lab.)	:::	•••	•••	•••	15,173
J. Winning (Lab.) W. Reid (L.)			•••	•••	2,623
Drymmur (Wrommar)	- • • • • • • • • • • • • • • • • • • •		•••	•••	2,020
RENTREW (WESTERN): Dr. R. Forgan (Lab.)					14 410
Dr. R. Forgan (Lab.)	•••	•••	•••	•••	14,419
F S Anderson (L.)	•••	• • •	• • •	•••	12,183 2,682
A. T. Taylor (C.) F. S. Anderson (L.) R. E. Muirhead (Scottish N	(at	• • •			1,667
HERTFORDSHIRE (St. ALBANS):		•••		•••	1,001
*Dr. F. E. Fremantle (C.)					00.476
Miss M. Whateley (Lab.)	•••	•••		•••	20,436
G. G. Honeyman (L.)	•••	• • •		•••	11,699 10,299
	•••	• • • •	•••	•••	10,233
LINCOLNSHIRE (HORNCASTLE):					10.075
*Dr. H. C. Haslam (C.)	• • •	• • •	•••	• • • •	12,837
F. C. Linfield (L.) J. R. Sanderson (Lab.)	•••	•••		•••	10,168 3,683
	•••	• • •		•••	3,003
READING:					
Mr. Somerville Hastings (Lab.)		•••	• • •	• • • •	23,281
*H. G. Williams (C.) D. Macfa dyen (L.)	• • • •	• • •	• • • •	• • •	22,419
	•••	• • • •	•••	• • • •	7,733
DUMFRIES:					
Dr. J. Hunter (L.)		•••	• • •	• • • •	16,174
Dr. J. Hunter (L.) *BrigGeneral J. Charteris (W. H. Marwick (Lab.)	(C.)	• • •	•		12,984
	•••	•••	•••	•••	6,687
University of London:					
*Dr. E. Graham Little (Ind.)	•••	• • • •	•••	•••	5,869
W. T. Layton (L.)		• • •	• • • •	٠	2,923
Sir John Gilbert (C.)	•••	•••	•••	•••	2,179
CAMBERWELL (NORTH-WEST):					
Dr. H. B. Morgan (Lab.)	• • •	• • •	• • •	• • • •	12,213
*E. T. Campbell (C.) H. Harcourt (L.)	• • • •		•••		9,808
H. Harcourt (L.)	•••	•••	•••	•••	5,559
DENBIGH:					
Dr. J. H. Morris-Jones (L.)		,	•••	• • • •	21,305
A. Graham (C.)		•••	•••		13,116
BERMONDSEY (WEST):					
*Dr. A. Salter (Lab.)					13,231
L. J. Stein (L.)					4,865
Lieut,-Colonel H. C. Butcher	(C.)				3,852
EDINBURGH (EAST):					
*Dr. Drummond Shiels (Lab.)					13,933
T. P. McDonald (L.)					8,687
R. C. Thyne (C.)	•••	•••	•••	•••	6,889
FULHAM (WEST):					
Dr. G. E. Spero (Lab.)					16,190
*Sir Cyril Cobb (C.)	•••			•••	13,979
G. A. Gale (L.)	•••	•••	•••	. •••	5,920
CARMARTHEN (LLANELLY):					
*Dr. J. H. Williams (Lab.)			•••		28,595
R. I. Evans (L.)		•••	•••		15,065
	•••		•••		3,969

Unsuccessful Candidates.

The following members of the medical profession were defeated at the polls. Several of them had previously represented or contested either the same or other constituencies. An asterisk denotes that a candidate sat in the last Parliament.

Dr. C. W. Brook (Lab.), Wandsworth (Balham and Tooting). Dr. F. G. Bushnell (Lab.), Birmingham (Moseley).

Dr. C. W. Brook (Lab.), Wandsworth (Baham and Tooting).

Dr. Stella Churchill (Lab.), Brentford and Chiswick.

Dr. J. D. Cooke (C.), Camberwell (Peckham).

Dr. C. R. Cooke-Taylor (L.), Camberwell (Dulwich).

Dr. R. Dunstan (Com.), Bethnal Green (South-West).

Dr. L. Haden Guest (C.), Salford (North).

Dr. A. B. Howitt (C.), Preston.

*Sir Henry Jackson (C.), Wandsworth (Central).

Dr. J. W. Leech (C.), Newcastle-upon-Tyne (West):

*Sir Richard Luce (C.), Derby.

Dr. R. Lyons (Lab.), Middlesex (Hendon).

Dr. R. A. Lyster (Lab.), Hampshire (Winchester).

Dr. J. Fraser Orr (L.), Linlithgow.

Dr. J. Speph Robinson (Lab.), Manchester (Withington).

Dr. J. V. Shaw (L.), Derbyshire (Ilkeston).

Dr. J. V. Shaw (L.), Derbyshire (Ilkeston).

*Sir Thomas Watts (C.), Manchester (Withington).

NINETY-SEVENTH ANNUAL MEETING

of the

British Medical Association,

MANCHESTER, 1929.

THE ninety-seventh Annual Meeting of the British Medical Association will be held in Manchester this summer under the presidency of Mr. Arthur H. Burgess, F.R.C.S., Professor of Clinical Surgery in the University of Manchester, who will deliver his address to the Association on the evening of Tuesday, July 23rd. The sectional meetings for scientific and clinical work will be held, as usual, on the three following days. The Annual Representative Meeting, for the transaction of medico-political business, will begin on the previous Friday, July 19th, at 9.30 a.m. The provisional programme for the nineteen Scientific Sections is published in the Supplement this week, and further details of the arrangements for the Annual Meeting will appear from time to time in later issues. We publish below the fourth of a series of descriptive and historical notes on Manchester and neighbourhood written for the occasion by Dr. E. M. Brockbank. The first article appeared on December 1st, 1928 (p. 1003), the second on January 26th, 1929 (p. 167), and the third on April 27th (p. 781).

THREE MANCHESTER LITERARY CELEBRITIES.

THREE widely read authors who were born or lived in Manchester—Thomas De Quincey, William Harrison Ainsworth, and Mrs. Gaskell—are specially interesting to us because their writings more or less intertwine with our medical history, fact or fiction.

THOMAS DE QUINCEY.

De Quincey was chiefly an imaginative essayist; he was born in Manchester in 1785, educated partly at the Grammar School, and spent most of his life, he said, in trying to get away from the town. But whatever his

objection to Manchester may have been, it was not the cause of his opium eating. As a boy he knew Charles White and Thomas Percival, and had a certain amount to say about both which gives some insight into their personalities. White he met when he was attending professionally a lady to whom De Quincey was giving lessons in French. He writes of his visit to White's museum, about which he White's museum, about which he only remembered what he called the humanities in it—namely, a mummy and a skeleton. He tells us how one of White's lady patients left him £25,000 on condition that on her death he would have her body embalmed and put in a case with a veil over the face, and that once a year he and two witnesses of credit should withdraw the veil. The lady was placed in a common clock-case with the usual glass face, but a veil of white velvet obscured from all profane eyes the silent features behind.

The clock he saw as a child and gazed on it with "inexpressible awe." Rumour named a certain lady as having left the bequest in her will, but a lawyer of Manchester about the end of the last century, after I had myself helped to perpetuate the rumour, found the lady's will at Chester, and there was nothing of the kind in it. However, the story suited De Quincey's taste for imaginative romance. The other humanity was the skeleton of a highwayman who had been executed for murder, and he interests us as he was a Knutsford man, Higgins by name, who formed the central character in Mrs. Gaskell's tale "The Squire's Story."

Another note about White was in connexion with De Quincey's sister who died at the age of 9. She was of "premature intellectual grandeur," and White, who was specially interested in craniology, pronounced her head to

be the finest in development of any that he had ever seen. It must have been an unusually large head, because De Quincey, not wishing to mislead his readers, says she died of hydrocephalus. De Quincey also gives us an interesting sketch of Dr. Percival, who attended him, his brothers and sisters in their childish ailments. They all liked him very much, but their mother disliked him equally, and feared his "tolerant" views on religious matters, which he used to discuss with her, Percival being a Unitarian.

De Quincey was a prolific writer, almost entirely for journals. His Confessions of an English Opium Eater are well known to medical readers.

HARRISON AINSWORTH.

William Harrison Ainsworth was born in Manchester in 1805, but lived most of his life in London. He was cousin to Dr. James Ainsworth, one of the early teachers of medical students here. In somewhat flamboyant style he wrote many very readable historical novels, the most widely known of which are Guy Fawkes, Windsor Castle, Old St. Paul's, The Tower of London, and The Lancashire Witches. Other tales about Lancashire incidents have a more local interest. Part of the action in Guy Fawkes takes place in Manchester, but that of the less known and less powerful Manchester Rebels, which has for its theme the '45, is almost entirely concerned with real and fictitious Manchester people, and the part they played in the Young Pretender's visits to the town on the march of the High-

landers cocking their bonnets to Derby, and during the army's retreat thence with fallen hopes.

Many young Manchester men joined the army, and the Manchester Regiment was formed of them. One of the Loyalist citizens was Dr. Peter Mainwaring, physician to the Infirmary, whose house, built in 1736, still exists in a fine state of preservation in King Street, and is a beautiful example of brickwork. It is now occupied by a branch of the District Bank. Amongst those who joined the Manchester Regiment was a son of Dr. Deacon, who had a small practice in the town, and Thomas Sydall. These, amongst other Manchester men, were hanged and quartered in 1748, and their heads sent to Manchester, where they were spiked on the first Exchange. There they remained as a warning to disloyal persons until 1749, when they



THOMAS DE QUINCEY.

suddenly and mysteriously disappeared one night, having been removed (as we shall see in a moment) by a young

to the Infirmary. They were buried in the Halls' garden at the top of King Street, and there they rested until the death of his sister, a staunch Jacobite, in 1828. When she knew for certain that she was dying she revealed the mystery by telling Dr. (afterwards Sir) James Lomax Bardsley, her medical attendant, the facts about the removal of the skulls and their burial, asking him to have them interred in consecrated ground, which he did, in St. Ann's churchyard.

A charming account of these times has been left us in her diary by a spirited Manchester girl, at heart an admirer of the Bonnie Prince, Elizabeth or Beppy Byrom, who is introduced into Ainsworth's novel amongst the incidents of the Scots' visit to the town. Her father, Dr. John Byrom, was a well-known literary man and poet, but not a medical man. He wrote the hymn "Christians Awake" and the celebrated blessing,

> "God bless the King, I mean the faith's defender; God bless—no harm in blessing—the Pretender; But who Pretender is, or who is King—God bless us all—that's quite another thing."

He was Jacobite, too, at heart, but evidently a careful one.

In those days many Manchester men, like many others, when drinking the toast of their King passed their glasses over a water jug or bottle-" the King over the water.

A romantic tale of Ainsworth's of local interest is The Lancashire Witches, which is concerned with the abortive Pilgrimage of Grace, its tragic consequences to John Paslew, last abbot of Whalley, and the part the witches of Pendle Forest were reputed at the time to have played in both.

It is of general interest to know that claim is made in the tale for Hoghton Tower, near Blackburn, as the place where the "surloin" of beef-then known by such an anatomical description-was formally knighted by James I as being entitled to such an honour; and who will say that there is no "damned merit" in a sirloin, whatever one of the Victorian premiers might have thought of the K.G.? Almost as many places and kings lay claim to such an honourable act as there were birthplaces of Homer—Smyrna, Chios, Colophon, Salamis, Rhodos, Argos, Athenae, as they are stated in his metre. Unfortunately, in this matter Lancashire cannot lay claim with the same confident assurance that it so often does to having led in a national event, for it is stated with equal certainty that Henry VIII, after an episode with the Abbot of Reading, forestalled his sister's great-grandson and us in the matter.

There is no special interest to medical practitioners unless, may be, to psychologists, in the story of the Lancashire Witches; but perhaps it is only fair to repeat the warning to those visitors who have not been to our county before, of the last few lines of this romantic tale:

"Jennet was the last of the Lancashire Witches. Ever since then witchcraft has taken a new form with the ladies of the county-though their fascination and spells are as potent as ever. Few can escape them—few desire to do so. But to all who are afraid of a bright eye and a blooming cheek, and who desire to adhere to a bachelor's condition, to such I should say, Beware of the Witches of Lancashire."



ELIZABETH CLEGHORN GASKELL.

MRS. GASKELL.

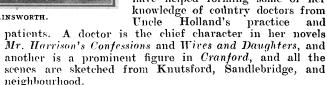
The writer most identified with Manchester, and of most Jacobite medical student, Edward Hall, afterwards surgeon | interest to us in recreation hours, was Elizabeth Cleghorn

Gaskell, who was born on September 29th; 1810, in Chelsea: She was the daughter of William Stevenson, formerly a Unitarian minister, but later in life Keeper of the Records to the Treasury of London. He was a man of rare attainments, which his daughter inherited. Her mother was a daughter of Mr. Holland of Sandlebridge, near Knutsford, a member of a well-known county family. Many years of her early life were spent at Knutsford, which she has immortalized in her books, and in 1832 she was married there to the Rev. William Gaskell, minister of the Unitarian Chapel, Cross Street, Manchester. In 1844 she lost her only son, who died of scarlet fever. To divert her mind from grief at her great loss her husband suggested that she should try and write a story about her experience among the poorest classes in Ancoats, and this she did. Mary

Barton was the result; and it was returned unread by the publishers to whom she first sent it. More successful on her second venture, the book was published anonymously and met with a great reception. She

awoke one morning to find herself famous," so to speak. She wrote, in all, thirty-six long and short stories, all of which dealt with simple characters. Many of her tales are about the labour problems of her day, written with a heartfelt sympathy for the workers, but, as the masters thought, without fully appreciating their own difficulties in the hungry forties and during the great increase in the use of machinery in their factorics. She lived all her married life in Manchester, but died suddenly and unexpectedly from heart failure when chatting with her daughters in 1865 at Acton in Hampshire, where she had just bought a house, after only a short period of ill health.

Mrs. Gaskell was related to doctors, and thereby hang three tales. Her uncle Peter Holland, who was the father of Sir Henry Holland, court physician and grandfather of the present Lord Knutsford, was a country surgeon. He resided at Sandlebridge and practised there and in Knutsford and the neighbourhood. It was at his house that Lord Clive spent some boyhood holidays, and where the story of his early daring originated, for he liked to terrify the Hollands by jumping from the ball on the top one of the gateposts to its fellow on the other side. Mrs. Gaskell used to accompany Peter Holland on his rounds. Whilst she did not take him as her model for her finest medical character Dr. Gibson (one of her daughters saying that no two people could be more unlike each other), she could hardly have helped forming some of her



The first essay at portraying a country practitioner is in Mr. Harrison's Confessions, a short story of seventy pages or so. Here we have the experiences of a young doctor who began practice as assistant to Mr. Morgan, an elderly bachelor surgeon in a country town, with many spinsters amongst his patients. Mr. Morgan urged Mr.



HARRISON AINSWORTH.

Harrison in his visits to patients to strive to acquire an attentive anxious politeness, combining ease and grace with a tender regard and interest. This he did so well that within a few months he was supposed, by local gossip, to be engaged to three different ladies at one and the same time. Mr. Morgan was much perturbed and rather peevish at what he thought was Mr. Harrison's mismanagement of affairs, until he found that he himself was reported to be engaged to another lady. There was nothing for it but two sets of wedding bells, and so all ends happily.

The illness of a child and the anxiety which it causes in the village reflects the authoress's experiences of the death of her only son. The book was written some years before *Cranford*, and has the appearance of a prentice hand working at a subject which she later perfected. It introduces, partly as an unintentional mischief-maker, a student friend from London, somewhat of the Bob

Sawyer-Ben Allen type.

Cranford is outstanding in literature for its delicate, kindly, and humorous description of the ways of life and foibles of elderly ladies, of aristocratic minds but ill-lined pockets. Into such a society she introduces, as a contrast, a breezy vigorous doctor, who "sups on bread and cheese and beer every night," the genteel society has reason to believe. As a further contrast he is called Mr. Hoggins, probably to emphasize the shock to the society's ideas of propriety when the wolf got into its fold and won the hand of its only titled lady, the widow of an impoverished Scotch baron. Not much is seen of Mr. Hoggins's practice, the main character in the book being the elderly Miss "Matty" Jenkins—and what character in literature can compare with her, with her simple, child-like faith, her trustful nature, and her genteel expedients to eke out her small income, nearly all lost for a time?

Her finest doctor character is Dr. Gibson in her most finished—but, alas! unfinished—work, Wives and Daughters. The scene is again Knutsford and neighbourhood. The late Sir Adolphus Ward, Master of Peterhouse College,

Cambridge, wrote of the book:

"In Wives and Daughters Mrs. Gaskell's later manner asserts itself with genial amplitude and with irresistible grace and ease, ranging from the most charming playfulness of humour to a pathos which softens, subdues, and endears. Were it a fragment, it would be invaluable for its beauty; but, complete as it is, to all intents and purposes, it can hardly be refused recognition as Mrs. Gaskell's masterpiece."

Much of the book is about the doctor's troubles with the womenfolk of his second marriage, and of the contrast in nature between his stepdaughter and his own child Molly.

Professor George Saintsbury, in his preface to an edition of *Pride and Prejudice*, says:

"In the novels of the last hundred years there are a vast number of young ladies with whom it might be a pleasure to fall in love; there are at least five with whom, as it seems to me, no man of taste and spirit can help doing so. Their names are, in chronological order, Elizabeth Bennet, Diana Vernon, Argemone Lavington, Beatrice Esmond, and Barbara Grant. I should have been most in love with Beatrice and Argemone; I should, I think for more occasional companionship, have preferred Diana and Barbara. But to live with and to marry, I do not know that any one of the four can come into competition with Elizabeth."

Each man to his fancy, but many a humbler critic must rejoice that the professor did not want Molly Gibson for his true love.

George Sand observed to Lord Houghton shortly before her own death:

"Mrs. Gaskell has done what neither I nor other female writers in France can accomplish; she has written novels which excite the deepest interest in men of the world, and yet which every girl will be the better for reading."

Her life of Charlotte Bronte is one of the masterpieces of biographical writing. She pictures so well the life at Haworth Vicarage, where the three frail sisters worked in a small room, in a house bordered on two sides by an extensive graveyard, with a father so dyspeptic that he had all his meals by himself—and the less he saw of the family the better was he pleased—and a brother who spent most of his time in the nearest public-houses. Who that has seen Haworth Vicarage can wonder that its novels, with the exception of Shirley, are so full of gloom and shadow, or

can wonder that the three sisters all died of a decline? What a contrast there is between its books and the sunny, cheerful, humorous ones of the Manchester clergyman's home written "by one of the most charming, exquisite writers of English fiction that has ever lived, in grace of her style and the quaintness of her humour reminding one of Charles Lamb," to quote another critic writing in the Nineteenth Century (1897).

It is of some interest to know that Charlotte Brontë brought her father to Manchester to consult William James Wilson, one of the founders of the Eye Hospital, about his

eyesight.

Mrs. Gaskell has not only left an endearing and abiding memory with Manchester and other readers, but the deep feeling for suffering, shown in all her novels, has been given a practical memorial in Manchester by her daughters, who founded and endowed the Gaskell Nursing Home for the benefit of surgical patients between the hospital and the expensive nursing-home classes.

The portrait of de Quincey is reproduced from A. and C. Black's 4th edition of his writings, and that of Ainsworth from Chambers's *Encyclopaedia of Literature*. The portrait of Mrs. Gaskell was supplied by the Warwick Brookes

Studios.

Ireland.

Parliamentary Medical Representation.

Or the four members representing the Queen's University, Belfast, in the new Parliament of Northern Ireland, one, Mr. R. J. Johnstone, M.D., F.R.C.S.Eng., is a medical man. He is a member, and was chairman of the commission appointed by the Government of Northern Ireland to take evidence on the Poor Law system and cognate subjects. He will have the best wishes of the profession, who feel that their interests are safe in his hands. Dr. Morrison, co. Londonderry, who, to everyone's regret, was prevented by ill health from allowing his name to go forward, died during the election.

Mr. Thomas Sinclair, C.B., M.D., F.R.C.S.Eng., Emeritus Professor of Surgery in the Queen's University, Belfast, who has again been returned unopposed as the University representative in the Imperial Parliament, commands the confidence both of the University authorities

and of the medical profession in Ulster.

Annual Report of the Rotunda Hospital.

Reference was made in a leading article in the Journal of May 18th (p. 916) to the encouraging decline in maternal morbidity in the British Islands during the last twenty years, and it is of interest to note in this connexion the statement in the recently received annual report of the Rotunda Hospital, Dublin, that the percentage rates of morbidity during the year ending October 31st, 1928, fell to 3.3—a "record" in the history of the hospital. This figure was calculated according to the British Medical Association standardization; the corresponding "Rotunda rate" was only 2.1 per cent. The Master of the Rotunda, Dr. Bethel Solomons, remarks that so excellent a result was not obtained in palatial buildings or by any complicated means; he attributes it to the zealous care and loyal co-operation of the medical and nursing staffs. He adds that the hospital was fortunate enough to escape any influenza epidemic, and he thinks this freedom was probably assisted by the exhibition of printed notices in the wards asking husbands and other visitors to refrain from coming when suffering from colds. During the year there were only 69 morbidity cases, of which 33 were associated with operative deliveries, so that only 36 non-operative deliveries were morbid out of 2,346 women admitted to the wards of the hospital and 2,062 confinement cases. A total of 1,717 patients received attention in their own homes, and the number of abnormalities in the extern maternity service showed an increase. Dr. Bethel Solomons remarks that, while this type of case is better treated in the wards of a hospital, some of these patients are found to be too ill to be moved, and it is important, moreover, that students should be taught how

to-day. He was an active member also of the Departmental Committee on Morphine and Heroin Addiction. Unsparing of himself, whatever he did he did with all his might. On leaving the Board of Control, and desirous, even at the cost of a well-earned leisure, to place his special knowledge and experience at the service of the community, he accepted the medical directorship of the colony for mental defectives at Stoke Park. Here his loss will be severely felt by patients and staff alike; and, though only for a brief time we hope, his plans for the employment of the colony as a place for special study and research in mental deficiency, in association with the University of Bristol Medical School, have been interrupted.

Dr. Branthwaite leaves a widow and one daughter, to whom we tender our sympathy. Many will mourn his loss, for he had friends all over England and Wales. Courage and sincerity, say his friends and colleagues of the Board of Control, were the dominating characters of his life and work. In early and middle life he met and overcame difficulties which would have daunted most men. When the war came, although well on in the fifties, he went to France as regimental surgeon, was present at three engagements, was mentioned in dispatches, was wounded, and finally incapacitated for further overseas service. In private life his relations with all with whom he came in contact were marked by unusually clear insight and consequent sympathy. He was a great and true friend, and there are many to whom his death will mean a blank that cannot be filled. His friends will remember him as one who had "courage and gaiety and a quiet mind."

Dr. Hugh Smith Morrison died, on May 21st, at his residence at Blackhill, Coleraine, and deep regret will be felt, both by the profession and by the general public, in Ulster. He had not been in good health for some years, and had gradually retired from his large practice and numerous public offices which his activity and ability had really forced upon him. Hugh Morrison was born in 1858, and graduated M.D. from the old Royal University of Ireland in 1884, obtaining also in the same year the diplomas L.R.C.S. and L.M.R.C.P.I. He began his professional life in County Londonderry, where he made for himself a name and gained the trust and affection of his patients in a very large private practice. Nothing could withstand his energy, and he was placed by the profession and the public in numerous positions of responsibility and Among other posts he was chairman of the South Londonderry Unionist Association, and of the County Londonderry Branch of the Irish Unionist Alliance. He was nominated by the medical association of the county as candidate for Queen's University of Belfast in the Northern Parliament of Ireland in 1925; the selection was unanimously adopted, and he sat in the Northern Parliament for many years. Possessing a good voice and many of the qualifications of a keen debater, he was no silent member, but made many valuable contributions to debates on social matters and education. His caustic criticism and unfailing good humour were appreciated on all sides and by all parties; he never omitted to lend a hand in the solution of agricultural problems, wherein he had practical know-ledge. As secretary of the medical societies in County Derry, and as a member of the North-East Division of the Ulster Branch of the British Medical Association, he gave wholehearted support to medical reform. Dr. Morrison was a keen Presbyterian, and often spoke in the meetings of the General Assembly. As coroner for the Coleraine division of Derry he discharged his duties with great care, ability, and tact. He was the author of Modern Ulster: its Industries, Customs, and Politics. Few have lived such an active, full life; still fewer have left such an empty space, and one so hard to fill.

Dr. Robert Wise, who died on May 17th, aged 63, received his medical education at the University of Edinburgh, where he graduated M.B., C.M. in 1888, and proceeded M.D. four years later. His life was spent in general practice. He took particular interest in obstetrics, leing a member of the Obstetrical Section of the Royal Society of Medicine, and in former years a Fellow of the Obstetrical Society of London. He designed a special type

of uterine forceps for use in cases of soft cervix, and published articles on practical obstetrics. During the war he was employed by the War Office for medical examination of recruits, and subsequently for pension assessments. Dr. Wise was a member of the British Medical Association. He leaves a widow, one son, and two sisters.

THE LATE MR. ARTHUR CHEATLE.

THE LATE MR. ARTHUR UHLATLE.

MR. H. NORMAN BARNETT writes: As one who was brought into close touch with Arthur Cheatle during the preparation for and the holding of the 1925 Annual Meeting at Bath, and on many subsequent occasions, I would like to bear record to the memory of this truly great man who has passed from us while still in his prime. His wonderful brain power and capacity for investigation are, of course, widely known. To these was added an unfailing coursesy and very real kindness of heart. for investigation are, or course, which and added an unfailing courtesy and very real kindness of heart, which I personally experienced on many occasions. The truth which I personally experienced on many occasions. The truth in scientific research was a passion with Cheatle. His simple and rather shy manner was the badge of his true greatness. His loss to his colleagues in otology will be hard to replace, and his memory will be enshrined in many hearts, but I would be glad to see something tangible done to perpetuate it.

Anibersities and Colleges.

UNIVERSITY OF LONDON.

DR. H. W. C. VINES has been recognized as a teacher of the University in pathology at Charing Cross Hospital Medical School.

The regulations for the M.B., B.S. Examination are to be amended by the substitution for paragraph (b) (i) on page 243 of the Book, 1928–29, and page 230 of the Blue Book, September, 1928, of the following:

(i) An examination of a patient, and a written report thereon, three-quarters of an hour being allowed for the former and one hour for the latter.

The matter to be reconsidered after one year.

The regulations for the M.D. Examination, Branch IV, have been amended by the substitution for the words "a clinical examination" (Red Book, 1928-29, p. 247, and Blue Book, September, 1928, p. 234) of the following:

A practical and clinical examination, including reports (either written or verbal, or both) on clinical cases, pathological and other specimens, and other material suitable for an examination of a practical character.

Regulation 3 of the examination for the Diploma in Psychological Medicine has been amended to read as follows:

The examination for the diploma is open to any candidate whose name is in the Metical Register, provided that, before being admitted to Part B, the candidate shall either (a) have held for not less than six months a resident or whole-time appointment at an institution (or institutions) for mental diseases recognized for the purpose; or (b) have attended for not less than twelve months the practice of such institution (or institutions), or such other practice as may from time to time be approved by the University.

Dr. A. M. H. Gray and Professor William Wright have been appointed members of the new Senate under Statute 43 (iii) (c), as representatives of the deans or chief executive officers of the

as representatives or the deans or other executive omcers of the general medical schools.

Applications for the William Julius Mickle Fellowship must reach the Principal of the University not later than the first post on October 1st. It is of the value of at least £200, and is awarded annually to the man or woman who, being resident in London and a graduate of the University, has, in the opinion of the Senate, done most to advance medical art or science within the preceding

UNIVERSITY COLLEGE HOSPITAL MEDICAL SCHOOL.

University College Hospital Medical School.

The examination for the two Goldsmid Exhibitions, entitling the holders to the final course, will be held on July 19th and 20th. They are opon to students preparing for the degrees of the Universities of London, Oxford, Cambridge, Durham, or other British universities, or lor the diplomas of the Royal Colleges of Physicians and Surgeons, or for the licence of the Society of Apothecaries. Notice to compete must be received by the secretary at the office of the Medical School on or before July 6th. The examination for the Bucknill Entrance Scholarship will be held on June 25th. The holder is entitled to the course of infermediate medical studies (including Part II of the Preliminary Scientific) at the University of London, University College, and the final course at University College Hospital and Medical School. Further particulars can be obtained on application to the Secretary, University College Hospital Medical School, Gower Street, W.C. Secretary, U.Street, W.C.

SOCIETY OF APOTHECARIES OF LONDON.

THE following candidates have passed in the subjects indicated: SURGERY.—W. T. Ellis, A. Freitag, J. D. B. Games, W. St. A. Hendricks, L. G. E. K. Lewis, B. J. Niall.

MEDICINE.—F. W. Crossley-Holland, A. Freitag, K. E. Gallaher, K. M.

MEDICINE.—F. W. Crossics-Holland, A. Freitag, K. E. Gallaher, Seedat.

FORENSIC MEDICINE.—P. S. Balachandrau, A. Freitag, K. E. Gallaher, Midwiffery.—A. Campbell, R. H. El Sawy, B. L. Fishout, A. Freitag, C. Parthasarthe, A. Scher.

The diploma of the Society has been granted to Messrs. F. W. Crossley-Holland, A. Freitag, and K. E. Gallaher.

Medical Nelvs.

THE summer dinner of the Australian and New Zealand Medical Association in England will be held at the Trocadero Restaurant, Piccadilly, on Friday, June 14th, at 7.45 for 8 p.m., with Mr. F. F. Muecke in the chair. Mr. W. Sampson Handley and Professor F. R. Fraser will be the official guests of the Association. All medical visitors from Australia and New Zealand, whether members of the Association or not, are invited to be present. The cost of the dinner is 10s. 6d., payable at the table. Communications should be addressed to Mr. P. J. Jory, 26, Queen Anne Street, W.1.

THE annual dinner of the Cambridge Graduates' Medical Club will be held at Jesus College on Friday, June 28th, at 7 p.m., with Sir Humphry Rolleston, Bt., President of the Club, in the chair. The honorary secretaries are Mr. Reginald Vick and Dr. F. G. Chandler.

THE annual dinner of the Harveian Society of London will be held on Thursday, June 13th, at 7.30 for 8 o'clock, in the Connaught Rooms, Great Queen Street, W.C.

A SYMPOSIUM on some diseases of Jews is being opened by Sir Humphry Rolleston on Thursday, June 13th, at 3 p.m., at the London Jewish Hospital, Stepney Green, E.1. The following will take part in the discussion: Drs. J. Burnford, W. M. Feldman, and J. Brander, and Messrs. A. H. Levy, M. Sourasky, and A. Sourasky.

AT a special meeting of the Odontological Section of the Royal Society of Medicine on Wednesday, July 17th, at 5.30 p.m., a bust of the late John Howard Mummery will be unveiled, and will be presented to Dr. A. D. Black, professor of special pathology and operative dentistry in the North-Western University, Illinois. Professor Black will receive the bust on behalf of the North-Western University as a gift from its London alumni.

THE provincial meeting of the Section of Disease in Children of the Royal Society of Medicine will be held at Nottingham on Saturday, June 22nd.

A SESSIONAL meeting of the Royal Sanitary Institute will be held on Friday, June 21st, in the Festival Hall, at the North-East Coast Exhibition, Newcastle-upon Tyne, when discussions will take place on the problem of feeding the premature infant, the need for a maternity service, the importance of ante-natal supervision, eliminating the tuberculous cow, hygienic milk supplies, and clean milk in the Northern counties. The chair will be taken at 2.30 p.m. by Dr. Charles Porter. In the evening a public lecture on smoke pollution will be given at 8 o'clock by Professor Leonard Hill, F.R.S., and followed by an open discussion.

AT a meeting of the Optical Society to be held at the Imperial College of Science and Technology, South Kensington, on Thursday, June 13th, from 6.30 to 10 p.m., experiments, demonstrations, and exhibits will be on view, arranged by the Technical Optics Department of the Imperial College.

THE general board of the National Physical Laboratory, Teddington, will hold its afternoon reception this year on Tuesday, June 18th, when visitors will be received by the chairman, Sir Ernest Rutherford, O.M., President of the Royal Society, at 3 o'clock.

A CLINICAL meeting will be held at the East London Hospital for Children, Shadwell, E., on Wednesday next, June 12th, at 4.15 p.m., when a discussion on neurological diagnosis in children will be followed by a demonstration of cases of interest in the wards. Tea will be served at 4 p.m.; all practitioners are cordially invited.

A PUBLIC lecture on some aspects of protoplasmic membrane will be given in the department of anatomy and embryology of University College, Gower Street, W.C.1, by Professor Robert Chambers of the department of biology, Washington Square College, New York, on Monday next, June 10th, at 5 p.m. The chair will be taken by Professor J. P. Hill, F.R.S. The lecture is open without fee to students and others interested in the subject.

THE following lectures in the series for the M.R.C.P. course arranged by the Fellowship of Medicine will be given at the Medical Society, 11. Chandos Street, Cavendish Square, at 8.30 p.m.: Tuesday, June 11th, Dr. Bernard Myers, on the differential diagnosis of splenomegaly, with the treatment of the diseases concerned; Friday, June 14th, Dr. L. S. T. Burrell, on bronchiectasis, abscess of lung, and empyema. A lecture will be delivered at the Queen Mary's Hospital, Stratford, E.15, on June 12th, at 2.30 p.m., by Dr. A. A. Osman, on debility in children and adults. An aural clinical demonstration will be given at the Royal Ear Hospital,

Huntley Street, W.C.1, on June 13th, at 2 p.m., by Mr. E. A. Peters. A course in ophthalmology is in progress at the Royal Westminster Ophthalmic Hospital, Broad Street, Holborn; it includes lectures and clinical work every afternoon. At the Chelsea Hospital for Women, Arthur Street, there will be a course in gynaecology from June 10th to 22nd, and a special whole-day course in diseases of the chest will be held at the City of London Hospital for Diseases of the Heart and Lungs from June 10th to 22nd. Three courses will begin on June 24th—namely, one in general medicine and surgery lasting a fortnight at the Prince of Wales's Hospital, Tottenham, and another of the same duration in diseases of children at the Children's Clinic and associated hospitals. The third course, which is in proctology and lasts for one week, will be held at St. Mark's Hospital, City Road. Copies of syllabuses for all courses, the complete list of special courses for 1929, and information on general post-graduate work is obtainable from the secretary of the Fellowship, 1, Wimpole Street, W.1.

THE Medical Research Council has issued a report (No. 132) on the early treatment of syphilis, embodying a survey of records from St. Thomas's Hospital by Colonel L.W. Harrison. Two points of special interest in it are: a reference to the diversity of individual responsiveness to treatment; and the apparent increase in liability to subsequent neuro-syphilis when arsenobenzene compounds are used in the earlier weeks of treatment without mercury or bismuth. Detailed reference will be made to this report in our next issue.

THE Council of Epsom College will shortly award a Sir Walter Buchanan Scholarship, the value of which is about £38 a year. The rule fixed by the founders of the scholarship is as follows: The Sir Walter Buchanan Scholarship is primarily intended for the sons of deceased or prematurely invalided officers of the Indian Medical Service, or, failing any such candidates, for the sons of legally qualified medical men of pure British parentage in necessitous circumstances who have practised medicine for at least five years in India. Forms of application can be obtained from the Secretary, Mr. J. B. Lamb, 49, Bedford Square, W.C.1.

THE nineteenth French congress of legal medicine will be held in Paris from June 24th to 26th under the presidency of Professor Sorel, when the following subjects will be discussed: sudden death, introduced by MM. Heger Gilbert of Brussels and Laignel-Lavastine of Paris; cruelty to children, introduced by MM. Parisot and Caussade of Nancy; the prenuptial certificate, introduced by MM. Vervacck of Brussels and Leclercq of Lille; and the responsibility of epileptics, introduced by M. Cellier of Paris. Further information can be obtained from M. Piédelièvre, 24, Rue Gay-Lussac, Paris.

THE International Labour Office has published nine leaflets, Nos. 141 to 149, dealing with calcium and calcium carbide; synthetic camphor; causing and food-preserving industries; cantharides and carbanilide; cements; chlorates and alkaline chlorites; chloroform, chlorpicrine, chromium and chromates; cocaine, cochineal, codeine, colcothar, and colocynthine; and copper boiler-making. They may be obtained from the director of the London office of this organization, 12, Victoria Street, S.W.1.

A NEW quarterly periodical has appeared under the title of Archives de l'Institut Prophylactique. The editor, Dr. Arthur Vernes of Paris, contributes to the first number—January to March, 1929—a review of the campaign against syphilis. There is also a joint paper by him and Drs. R. Brico and A. Gager on some experimental work in relation to the serological diagnosis of cancer. The periodical is published by Masson et Cie; the price for countries outside France is 40 fr. for the year.

THE recently published fourth volume of transactions of the Kaiser Leopold Academy at Halle contains papers by twenty-three members from North, Central, and South America, and is dedicated to Professor William Welch of Johns Hopkins University.

Mr. ISIDORE D. MORRISON of New York has made a gift of £20,000 and a promise of £2,000 a year for the establishment of an ophthalmic institute at the Hebrew University in Jerusalem.

Dr. R. W. MacKenna and Dr. G. C. Mont have been appointed to the Commission of the Peace for the City of Liverpool.

DR. C. H. DURRANT, chief medical officer of the St. Kitts-Nevis Medical Service, has been appointed an official member of the Legislative Council of the Presidency of Saint Christopher and Nevis.

DR. ABRAHAM FLEXNER, director of the Department of Educational Studies of the International Education Board in New York has been elected a doctor honoris causa of the Medical Faculty of Berlin.

Processor Roussy and Dr. Lesné have been elected members of the Académie de Médecine.