Artificial pneumothorax may be abandoned at any time. It should be remembered that though the treatment does throw an extra strain on the sounder side, this may be partly neutralized by rest in bed, and by the removal of general toxaemia due to the bad lung, which undermines the resistance and retards the healing of the better side.

Toxic cases do best.

The side on which the operation is done, whether right or left, seems to have little or no influence on the result. We have about equal proportions of good and bad on either side.

Treatment of Fluid.—Fluid is a very common accompaniment; in a large percentage of our cases fluid appeared at one time or other. Where the amount is small it is as well to leave it alone; where it is large and upsets the appetite we remove it. We have had few serious cases of pleural effusion—that is, where the fluid became infected by other organisms.

Shortness of Breath.--It is surprising how soon the average patient gets accustomed to artificial pneumothorax treatment, and how little distress it causes him.

Loss of Weight.--Though about 50 per cent. of the patients lose weight, this has little influence on the ultimate prognosis.

Return to Work.—It is difficult to state with accuracy the number of cases fit for work, as this depends so much ou the type of work the patient attempts to do, his home surroundings, and his employer, etc. Again, many of the patients are women who are occupied with light housework. A good number of the men we know are engaged in rather heavy work, and doing quite well at it.

Memoranda : MEDICAL, SURGICAL, OBSTETRICAL.

CONGENITAL OBSTRUCTION OF THE POSTERIOR URETHRA.

THE case here recorded is of interest because of the peculiar condition of the skin, and also owing to the absence of dilatation of the ureters and of hydronephrosis, although the bladder wall was much thickened.

This case is that of a male child, aged 3 days, admitted to Dr. William Johnson's ward at the Royal Liverpool Children's Hospital on March 7th, 1929, with the history that there had been no micturition since birth. The birth was normal and the child passed meconium three times before admission to hospital. Circumcision was performed the day before admission, but no urine was passed subsequently. The parents were healthy, and there was one other child, a healthy boy. The child was apparently full term. The remnant of the umbilical cord showed no signs of infection. The whole skin of the body was in a condition of solid oedema, with absence of pitting on pressure. The limbs were stiff, as if in rigor mortis. Nothing abnormal could be detected in the heart, lungs, or abdomen. The child was drowsy and refused its feeds. Death occurred a few hours after admission, no urine having been passed. Post-mortem Examination .- There were no external structural abnormalities. The skin condition was as described above. The kidneys were smaller than normal, congested, and tough on section. The capsule of each kidney was more adherent than normal, but not so adherent as to tear the kidney substance on stripping. The surface of the kidney was smooth. The cortex and medulla were of normal proportion, and of normal appearance to the naked eye. There was no hydronephrosis. The ureters were not dilated, but the wall of the lower end of the right ureter was thicker than normal. The bladder wall was one-third of an inch in thickness, both epithelial and muscular coats being thickened. The bladder both epithema and muscular coars being thickened. The bladder was not dilated, but contained about one drachm of thick yellow urine. There was a septum in the urethra, immediately distal to the verumontanum. The passage of the finest probe was not pos-sible either way. The septum was apparently complete, and not have ble in time. The usether distal to the continue was of neuronal suble entrer way. The septum was apparently complete, and not valve-like in type. The urethra distal to the septum was of normal calibre, but the proximal urethra was dilated, and an ordinary lead pencil could be passed from the bladder up to the obstruction. There was nothing abnormal found in other organs. Microscopical examination of the kidneys showed slight generalized fibrosis, with hyaline swelling of the glomeruli, but the tubules were of normal microscopical appearance.

Young, Frontz, and Baldwin (Journal of Urology, October, 1919, vol. iii) report twelve cases of congenital obstruction of the posterior urethra observed at Johns Hopkins Hospital, the voungest patient being 11 days old. They have also collected twenty-four cases from the previous literature. In the latter series two infants died shortly after birth, and the necropsy revealed a valve at the lower end of the verumontanum, with dilatation and hypertrophy of the bladder, dilatation of the ureters, and hydronephrosis. One case recorded by them is that of a foetus (5 to 6 months) with a similar condition, and another case is that of a stillborn child. The other cases were **of** infants and older children.

> R. TAYLOR CHADWICK, M.A., B.Chir.Cantab., D.P.H. Liverpool, Pathologist, Royal Liverpool Children's Hospital, S. P. MEADOWS, M.B., B.S.Lond., B.Sc.Liverpool, Formerly House-Physician, Royal Liverpool Children's Hospital.

A CASE OF SCLEREMA NEONATORUM.

SCLEREMA neonatorum occurs so rarely that the following case seems worth recording.

On Christmas Day a 4-para in the early stages of acute pneumonia was delivered of a premature male infant weighing about 5 lb. The infant, though small, was vigorous. On the second day the nurse called my attention to a slight swelling of the foreskin and a bluish patch of induration on the right buttock. Urine was freely passed. In a few days the induration extended all over the infant's body, limbs, and face, and at this stage his body was more or less rigid. The eyes could not be opened and sucking became impossible. There was regurgitation of fluid through the nose, with development of snuffles and a haemorrhagic discharge. Crying ceased, respiration became slow, and during the last hour of life blood came freely from the nostrils with every breath. The induration was of a peculiar icy blue colour. There was no pitting on pressure. The skin felt hard and could not be pinched. The temperature was subnormal.

I believe the etiology of this disease is little understood. One view is that it is a coagulation or degeneration of the subcutaneous fat in premature infants which some authors attribute to external cold. In the case above described it may have been due to a toxin derived from the placental blood. It is interesting to note that though the mother made a rapid recovery lactation never appeared, possibly owing to atrophy of the fat-producing cells of the secreting acini.

Smethwick, Staffs. E. CONDON, M.B., B.Ch., B.A.O.

PERFORATED DUODENAL ULCER.

THE main points of interest in the following case of perforated duodenal ulcer are (a) the patient's advanced age, (b) the short history of gastric symptoms, (c) the absence of malignant disease, and (d) the patient's easy convalescence and subsequent good health.

The patient, a man aged 75, was admitted to Croydon General Hospital, on March 26th last, with a history of three days' "indigestion"; previously his digestion had been good. Seven hours before admission he had sudden severe pain in the epigastrium, followed by repeated vomiting. When we saw him he was collapsed; he had a dry tongue, brown in colour, and a rigid abdomen. His temperature was \Im^{70} F., and his pulse rate 72. The heart, lungs, and urine were normal. A diagnosis was made of acute perforated gastric ulcer.

With the patient under gas and oxygen anacsthesia the abdomen was opened, and a small perforated ulcer, simple in character, was found in the first part of the duodenum. This ulcer was invaginated with a purse-string suture, free fluid was swabbed out, and the abdomen closed without drainage. The operation was completed in about twenty minutes.

Twenty-four hours after the operation the patient was given small feeds by the mouth, and a week later he was allowed to sit up out of bed. Convalescence was uninterrupted, and on April 15th he was discharged, having been given instructions about his diet and the advisability of taking alkaline medicines. Since then he has gained about 10 lb. in weight, and has had no abdominal discomfort. He is still careful about his food.

I have so far failed to find in the literature any reference to a case of simple perforation in a patient of such advanced age. In a similar case, of which an account was published in the *British Medical Journal* of July 20th, 1929 (p. 100), the patient's age was 70.

I am indebted to Mr. E. M. Cowell, the surgeon in charge of the case, for permission to publish these notes.

A. R. MONTGOMERY, M.B., B.Ch., Resident Medical Officer, Croydon General Hospital.

THE LATE DR. JAMIESON B. HURRY.

DR. F. J. ALLEN (Cambridge) writes: Dr. Hurry was peculiarly generous in his public gifts. He seemed to realize that it is a duty of those possessing wealth to spend much of it for the benefit of the public rather than for private luxury. In addition to his munificent gifts to the town of Reading, he endowed "The Michael Foster Studentship in Physiology " at Cambridge. He founded this in 1912, with an endowment of £50 a year, the studentship to be awarded in alternate years with a stipend of $\pounds 100$. In 1919 he increased the endowment to £100 a year, and provided for the re-election of the student for a second year in suitable cases, or for the election of another student without any interval.

DR. THOMAS M. CARTER, who died suddenly on February 21st, at the age of 61, studied medicine at the Bristol General Hospital, where he won the gold medal in 1891. In that year he obtained the diplomas M.R.C.S., L.R.C.P., and graduated M.D. in 1908. He practised in Bristol till the outbreak of war, when he was senior major of the 6th Battalion Gloucestershire Regiment. In 1916 he received a commission in the R.A.M.C., and served in Egypt and in the Mediterranean. Proceeding to France, he was appointed to command No. 3 Convalescent Depot at Boulogne, and was awarded the O.B.E. After the war he returned to Bristol, and became a whole-time officer in the National Medical Service. Dr. Carter took an active part in community life. He was a city councillor for six years, honorary secretary of the Bristol branch of the Bristol and Gloucester Archaeological Society, chairman of the Old Bristolians Club, and a past-president of the Bristol Masonic Society at the time of his death. He was a member of the British Medical Association. He leaves a widow, a son, and three daughters.

We regret to announce the death of Dr. W. McDonogh ELLIS, which took place in a London nursing home on January 29th, after a short illness. Qualifying M.R.C.S., L.R.C.P. in 1886, Dr. Ellis graduated M.D.Brux., with honours, in 1888, subsequently holding appointments as clinical assistant at the Hospital for Sick Children, Great Ormond Street, and at Moorfields Eye Hospital, and as house-surgeon at University College Hospital. About twenty years ago he took up practice at Woldingham, remaining there till the time of his death. Among his contributions to the medical journals was a report of a case of sudden death during labour (*Lancet*, 1888), and of a case of acute goitre occurring during the puerperal period (British Medical Journal, 1890). Dr. Ellis's interests were not solely confined to his practice, and he devoted a great part of his time to the service of the public of the district in which he lived, holding positions on many committees and boards. He was also particularly interested in the work of the British Medical Association, at the time of his death being one of the deputy representatives of the Reigate Division. A patient writes: "Dr. William McDonogh Ellis will be sorely missed amongst his many patients and large circle of friends. The heaviness of mourning is upon our little community; there is scarcely a household but feels stricken; not one of us but sorrows that in this life we shall see his face no more. 'The beloved physician,' a phrase tender in its age-long association, is the one that comes to us, unsought, as we think of him."

ciation, is the one that comes to us, unsought, as we think of him." We regret to announce the death of Mr. ARCHIBALD R. FEE, B.A., Ph.D., on February 23rd, of septicaemia and broncho-pneumonia following a simple dental operation about a week previously. He was a keen and devoted investigator in experimental physiclogy, in which subject he was carrying out researches at University College, London, with the aid of a Beit Memorial Fellowship for Medical Research. Only 24 years old at the time of his death, he had already made considerable contributions to the physiology of the kidney. Some of these papers will appear posthumously. His greatest ambition and firm

determination was to qualify in medicine, and he had already begun some preliminary studies directed to that end. His loss creates a great gap among his many friends, as among the ranks of those devoted to scientific research. Dr. Fee's home was in British Columbia, which he left with a university degree before he was 20 years old.

By the death, on February 16th, of Dr. T. McFetridge of Edlington, near Doncaster, at the early age of 45, the West Riding has lost one of its most popular colliery practitioners. Although in failing health for two years, he remained at work until three weeks before his death, which occurred unexpectedly, when he was believed to be on the road to recovery. Born in co. Antrim, Thomas McFetridge received his medical education at Edinburgh, where he graduated M.B., Ch.B. in 1914. He then joined Drs. Battersby and Willey in practice in Doncaster. In 1916 and 1917 he held a commission in the R.A.M.C., and served in East Africa, after which he returned to Doncaster. He took special interest in ambulance work, and in 1921 was made an honorary member of the Order of St. John. During his student days he had been very keen on outdoor sports, particularly hockey, and he was an Edinburgh "blue." He was a regular playing member of the Doncaster hockey team until his health broke down. Dr. McFetridge was a member of the British Medical Association. He leaves a widow and one son. A colleague writes: Fifteen years' hard work in the colliery village of Edlington had endeared him to all his patients, and successors will find it hard to fill his place. The quietest and most unassuming of men, he had a kind word for each child and a pat for every dog.

We regret to announce the sudden death, on February 17th, at the age of 66, of Geheimer Sanitatsrat Professor Dr. JULIUS SCHWALBE, editor of the Deutsche medizinische Wochenschrift since 1894. Professor Schwalbe was also coeditor with the late Professor Ebstein of a handbook of practical medicine in five volumes, and works on therapeutic technique, diseases of old age, and a series on diagnostic and therapeutic errors and their prevention. On many occasions the Medical Secretary's department of the British Medical Association has been indebted to him and his staff for help in connexion with various matters raised by members.

The following well-known foreign medical men have recently died: Dr. VERDUN, professor at the faculty of medicine and pharmacy of Lille; Dr. CARL AUGUST HAMANN, professor of applied anatomy and clinical surgery at the Western Reserve University School of Medicine, Cleveland, since 1911, aged 61; Dr. CLARENCE FLOYD HAVILAND, clinical professor of psychiatry, Columbia University College of Physicians and Surgeons, New York, since 1927, aged 54, of influenzal pneumonia; and Professor THEODOR SOMMER-FELD, an authority on industrial hygiene and author of numerous publications on tuberculosis, aged 69.

Universities and Colleges.

UNIVERSITY OF LONDON.

DR. FRANCIS DAVIES has been appointed, as from August 1st, 1930, to the University readership in anatomy, tenable at King's College. The Geoffrey E. Duveen travelling studentship in oto-rhino-laryngology, of the value of £450, has been awarded for 1930 to Dr. C. S. Hallpike.

to the electrical equipment of the department of chemistry. The department of psychology has been provided with better accommodation, and the reorganized department of municipal engineering and hygiene with an adequate laboratory.

At the January matriculation examination 176 candidates were successful in the first division and 684 in the second division, while 58 took the supplementary certificate in Latin.

UNIVERSITY COLLEGE.

Two lectures, illustrated by lantern slides, on the history of Dr. Charles Singer at University College Hospital Medical School, W.C.1, on March 10th and 24th at 4.15 p.m. The lectures are open to all medical students of the University of London.

UNIVERSITY OF MANCHESTER.

PROFESSOR F. E. TYLECOTE, M.D., D.P.H., F.R.C.P.Lond., has been elected chairman of convocation for the ensuing year.

UNIVERSITY OF ABERDEEN.

THE Senate of the University of Aberdeen has decided to confer the honorary degree of LL.D. on, among others, Emeritus Professor Ashley W. Mackintosh, M.D., honorary physician to H.M. Household in Scotland, and consulting physician to the Parel Informatic Aberdeen Royal Infirmary, Aberdeen.

The Services.

HONORARY SURGEON TO THE KING.

COLONEL C. L. ISAAC, T.D., Assistant Director of Medical Services, 53rd (Welsh) Division, Territorial Army, has been appointed Honorary Surgeon to the King.

DEATHS IN THE SERVICES.

Lieut.-Colonel Gilbert Saunders Griffths, Bengal Medical Service (ret.), died at Gibraltar, aged 75, on January 1st, at the residence of his son, Dr. G. H. C. St. G. Griffiths, Colonial Medical Service. He was born on May 3rd, 1854, the son of Thomas Griffiths of Bideford, was educated at the Middlesex Hospital, and took the M.R.C.S. and L.S.A. in 1876. Entering the I.M.S. on September 30th, 1876, he became surgeon lieutenant-colonel after twenty years' service, was placed on the selected list on October 1st, 1902, and retired, with an extra compensation pension, on June 1st, 1904. His whole service was spent in military employ, during which he saw service was spent in military employ, during which he saw a good deal of active service. He served in the Afghan war of 1878-80, taking part in the Arambi Karej expedition, and the action at Bhagas, and received the medal with a clasp; in the Zhob Valley campaign, on the North-West frontier, in 1884; and in the Sikkim campaign, on the North-East frontier, in 1888, receiving the frontier medal with a clasp. After his retirement he lived for some time at Clifton, but since the war had resided chiefly in Italy and at Gibraltar. In 1887 he married Katherine Celestine, daughter of Henry Colling of Okehampton, Devon, and leaves two sons, one of whom served as surgeon lieutenant R.N. with the Grand Fleet in the war, and is now in the Colonial Service; the other served in France, Egypt, and Palestine as a captain in the R.A.F. He had three brothers in the medical profession: Lieut.-Colonel W. E. Griffiths, I.M.S., Lieut.-Colonel A. Griffiths, R.A.M.C., and Dr. E. Griffiths of Blainey, New South Wales.

Lieut.-Colonel William Coates, Bengal Medical Service (ret.), Lieut.-Colonel William Coates, Bengal Medical Service (ret.), died at Hove on February 13th, aged 78. He was born on January 20th, 1852, the son of the late Dr. Coates, of Dohanaughta, Galway, and graduated as M.D. and M.Ch. in the Queen's University, Ireland, in 1876. Entering the I.M.S. as surgeon on March 31st, 1877, he became surgeon lieutenant-colonel after twenty years' service, was placed on the selected list for promotion on July 6th, 1903, and retired on July 4th, 1907. Most of his service was passed in civil employ in the Punjab where for several years he was civil surgeon in the Punjab, where for several years he was civil surgeon In the Funjab, where for several years he was civil surgeon of Peshawar, and later, for many years before his retirement, of Lahore. He served in the Afghan war of 1878-80, when he took part in the action at Ali Musjid and Kharasiah, in the operations in and round Kabul, and in the famous march under General, afterwards Lord, Roberts, from Kabul to Kandahar, and the battle of Kandahar, which relieved the British garrison besieged in Kandahar, finally settled Ayub Khan, one of the claimants to the Afghan throne and put an British garrison besieged in Kandahar, finally settled Ayub Khan, one of the claimants to the Afghan throne, and put an end to the war. He was mentioned in dispatches in G.A.O. No. 137 of 1880, and received the medal with four clasps, and the Kabul-Kandahar bronze star. He also served in the Mahsud Waziri campaign of 1881. After retirement, he rejoined for service in the war of 1914-18, and served as registrar of the York Place Indian Hospital at Brighton in 1914-15, from the opening to the closing of the hospital. He was given a Good Service pension on August 8th, 1927. was given a Good Service pension on August 8th, 1327.

Medical Melus.

THE third Sir Charles Hastings lecture, on Health and the Empire, will be given in the Great Hall of the British Medical Association House, Tavistock Square, W.C.1, on Wednesday next, March 12th, at 8 p.m., by Sir Andrew Balfour, K.C.M.G., M.D., director of the London School of Hygiene and Tropical Medicinc. The chair will be taken by Lord Riddell, president of the Royal Free Hospital. These lectures were inaugurated by the British Medical Association for the purpose of offering to the public information by the highest authorities on matters of general health interest. Admission to the lecture is free by tickets obtainable from the Financial Secretary, B.M.A. House, Tavistock Square, W.C.1. Seats not occupied by ticket holders by 7.50 p.m. will be available for other members of the public.

PROFESSOR E. W. HEY GROVES of the University of Bristol will deliver the Harveian Lecture before the Harveian Society of London on Thursday, March 13th, at 8.30 p.m., at 11, Chandos Street. Cavendish Square, W., and not at Paddington Town Hall as previously stated. His subject is: Should medicine be a mendicant? Visitors will be welcome.

A COURSE of lectures on midwifery will be given at the City of London Maternity Hospital, City Road, E.C.1, on Tuesdays at 5 p.m., from March 25th to June 10th. Particulars will be given in our diary of post-graduate lectures published weekly in the Supplement.

THE annual dinner of the Cambridge Graduates' Medical Club will be held at the May Fair Hotel, Berkeley Street, W., on Thursday, March 27th, at 7.45 p.m., with Dr. H. Morley Fletcher, treasurer of the club, in the chair. The annual meeting will precede the dinner.

THE annual general meeting of the Biochemical Society will be held in the department of physiology and blochemistry, University College, Gower Street, W.C., on Friday, March 14th, at 3 p.m. The subjects on which communications will be at 3 p.m. made include comparative rates of absorption of certain sugars from the human intestine, rate of liberation of argiyeast preparations, micro-determinations of hydroxyl groups, alcohol isolated from the urine of pregnancy, an improved method for the preparation of oestrin and the isolation of active crystalline material from urine, observations on the relation of carotene to vitamin A, oxidation-reduction potentials of cultures of haemolytic streptococci, and the phosphorus distribution in blood during hypervitaminosis.

H.R.H. PRINCE GEORGE, President of University College Hospital, will open the new preliminary training school for nurses, presented by the Rockefeller Foundation, on Wednesday, March 19th, at 3.30 p.m. The ceremony will take place in the library of the medical school.

A JOINT meeting of the Section of Psychiatry of the Royal A JOINT meeting of the Section of Psychiatry of the Royal Society of Medicine with the British Psychological Society, at 1, Wimpole Street, W., on Tuesday next, March 11th, at 8 p.m., will discuss "The role of psychotherapy in the treatment of the psychoses." The speakers will be Dr. H. Devine, Dr. Edward Glover, Dr. R. D. Gillespie, and Dr. H. Yellowlees.

THE Fellowship of Medicine announces that Mr. W. Girling Ball will lecture on the differential diagnosis and treatment Ball will lecture on the uninerential diagnosis and treatment of infections of the urinary tract at the Medical Society's lecture room, 11, Chandos Street, Cavendish Square, on Tuesday, March 11th, at 4 p.m. Mr. J. Bright Banister will give a demonstration of gynaecological operations at the Chelsea Hospital for Women, Arthur Street, on Monday, March 10th, at 2 p.m., and Dr. J. E. M. Wigley will give a demonstration of St. Lew's Hermitel Lecter dermatological demonstration at St. John's Hospital, Leicester Square, on Tuesday, March 11th, at 6 p.m. This lecture and the demonstrations are free to medical practitioners. On March 10th an all-day course will start at the Brompton Hospital for Consumption and Discasses of the Chest, comprising lectures, demonstrations, and ward rounds, and lasting for one week. From March 10th to 22nd there will be a course at the Royal National Orthopaedic Hospital, beginning with operations each morning at 9 or 10 o'clock, and followed at 11.30 by a lecture-demonstration; in the afternoon there will be clinics in the out-patient department. From March 17th to Awail 10th 2 course, in provide the more than the ball at the Wart April 12th a course in neurology will be held at the West End Hospital for Nervous Diseases at 5 p.m., and during the same period one in venereal diseases at the London Lock Hospital, occupying every afternoon and evening. There will be an all-day course in medicine, surgery, and gynaecology at the Royal Waterloo Hospital from March 24th to April 12th, and an all-day course in gastro-enterology at the Prince of Wales's Hospital, Tottenham, from March 31st to April 5th. Copies of all syllabuses and other information are obtainable from the Secretary of the Followship, 1, Wimpole Street, W.1.

THE fiftieth anniversary of the foundation of the Ophthalmological Society of the United Kingdom will be celebrated by a banquet to be held in the hall of the Fishmongers' Company on Friday, April 4th.

THE seventh of a series of dances in aid of the Royal Medical Benevolent Fund Guild will be organized by the Middlesex Hospital and held on Thursday, March 27th, from 8.30 to 12.30 o'clock, in the Great Hall of the British Medical Association, Tavistock Square, W.C. Tickets (single 6s., double 11s., including light refreshments), may be obtained from Mrs. A. E. Webb-Johnson, 35, Grosvenor Street, W.1. Application for bridge tables should be addressed to Miss Warwick James, 2, Park Crescent, W.1. Tickets, 6s. each; players to provide their own cards and markers.

A POST-GRADUATE course will be held in Vienna from May 26th to June 7th, dealing with tuberculosis and its treatment. In connexion with this course classes will be held at certain institutions in Vienna for dealing with special diseases. Further information can be obtained from the secretary of the International Post-Graduate Courses, Dr. A. Kronfeld, Porzellangasse 22, Vienna IX.

THE twelfth salon des médecins for the exhibition of pictures, sculpture, engravings, and decorative art by medical practitioners, dentists, veterinary surgeons, pharmacists, and their families, will be held at 117, Boulevard St. Germain, Paris, from June 15th to the 24th. Further information can be obtained from the organizer, Dr. Paul Rabier, 84, Rue Lecourbe, Paris XV.

UNDER an agreement with University College, London, Messrs. H. K. Lewis and Co., Ltd., the well-known medical booksellers and publishers, are erecting a new building on the site of 134, Gower Street, of which they will occupy the basement and the ground and first floors, the three upper floors being occupied by the College with a separate entrance and stairway from Gower Street. When this building is completed it has been arranged that the company shall use completed it has been arranged that the company shall also the whole of the building while their old premises of 136, Gower Street, and 24, Gower Place, are being pulled down. On this site a new building will be erected by the company in the state of the building with the new premises at No. 134 and in general conformity with the new premises at No. 134 and the rest of the College buildings in Gower Street. Some sacrifice of space and convenience on the company's own site at the corner has been made to architectural necessities, in order to secure a satisfactorily artistic effect in carrying out the general design, but the completed building, with the portions to be occupied by the company in what was No. 134, will give much needed increased space. The scheme originated shortly after the late Professor Simpson's retirement from the chair of architecture at University College, and he prepared the first plans. His son, Mr. J. R. Moore Simpson, A.R.I.B.A., has designed the building now to be erected, and the work is in the hands of Messrs. Ford and Walton, who completed the building of the British Medical Association's House. While Messrs. Lewis are in occupation of No. 134 there will be many temporary difficulties to contend with, but plans are being carefully considered to ensure that these shall be overcome.

AT the annual meeting of the Glasgow Eye Infirmary, held on February 24th, it was stated that contributions from employed persons amounted to nearly half of the infirmary's total revenue.

THE twentieth annual professional nursing, midwifery, and public health exhibition and conference has been held this week at the new Horticultural Hall, Westminster. Lectures were given each day, and various cinematograph films, including the Harvey film, were shown.

THE register of members (July, 1920, to November, 1929) of the Chartered Society of Massage and Medical Gymnastics contains particulars of the purposes of the society, conditions of registration, and of the admission of members to the roll of biophysical assistants. A place index is appended, and the present issue gives additional professional qualifications. The price of the register is 4s. It should be noted that the address of the society after March, 1930, will be Tavistock House (North), 'Tavistock Square, W.C.1.

THE problem of landing from fishing vessels, and under the general conditions obtaining on them, an increased proportion of fish in first-class condition has for some years engaged the attention of the Food Investigation Board, and under the supervision of the Food Transport and Distribution Com-mittee of the Board an inquiry was carried out in 1927 and 1928 on the causes of deterioration of commercially handled fish and of the methods by which the rate of such deterioration might be slowed down. In a special report (No. 37, H.M. Stationery Office, price 1s. 6d. net), entitled "The Handling and Stowage of White Fish at Sea," which has been issued from the Department of Scientific and Industrial Research, Messrs. Adrian Lumley, J. J. Piqué, and George A. Reay describe the technique of this inquiry, which, they are

able to show, has produced results capable of immediate commercial application. The investigators reach the general conclusions that the deterioration of fresh fish while on board the trawler is mainly due to bacteria present when the fish is caught and acquired during the process of gutting, handling, and stowage; that ice acts as a preservative by slowing the activities of bacteria, but does not arrest their growth; and that by the use of cleanlier and more careful methods than those at present employed the deterioration of the fish in ice will proceed at a still slower rate, whereby the dura-tion of freshness will be extended from 6-7 to 10-12 days, the fish will be consistently fresher, age for age, and a larger proportion of the total catch will be landed fresh.

THE Journal de Médecine et de Chirurgie Pratiques, founded by Lucas Championnière, and continued first by his sons Just and Paul and later by his grandsons Henri-Paul and Just-Lucas Championnière, will celebrate its centenary this year. The present editors are Maprice Vignerie, son-in-law of Lucas Championnière, and René Mignot.

DR. THORVALD MADSEN of Copenhagen, president of the Health Committee of the League of Nations, has been made a doctor honoris causa of Frankfort University, and Dr. Egaz Moniz, professor at the medical faculty of Lisbon, has received a similar distinction from the Lyons medical faculty.

PROFESSOR RUDOLF KRAUS of Vienna, formerly director of the Butantan Serotherapeutic Institute at São Paulo, has been appointed director of the bacteriological institute of Chili; Dr. Karl von Augerer of Munich, professor of hygiene at Erlaugen; and Dr. Fritz Paneth of Berlin, professor of chemistry at Königsberg.

IN our issues of May 14th, 28th, and June 4th, 1927, we published a series of articles describing a medical tour of the Czechoslovak spas. Another visit to Czechoslovakia on corresponding lines has been arranged for the coming Easter holidays. The party will leave Liverpool Street Station on the evening of Monday, April 14th, and travel via the Hook of Hollaud and Germany. The places to be visited include Teplice-Sanov, Carlsbad, Jáchymov, Franzensbad, Marienbad, Prague, Podebrady, Luhacovice, Trencin-Teplice, Pistany; three days will be spent in the Tatra Mountains, and a night at Dresden on the way home; and the party is due back in London on the morning of Monday, May 5th. As on the last occasion, special facilities and courtesies will be extended to the visitors by the Czechoslovak Ministry of Health. Readers who wish for particulars should communicate with Mr. Henry Baerlein, Bath Club, 34, Dover Street, London, W.1.

Letters, Notes, and Answers.

All communications in

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QUERIES AND ANSWERS.

TINNITUS AURIUM.

DR. W. A. M. SWAN (London, N.W.1) would be grateful for suggestions for treatment of very troublesome timitus aurium in a patient aged about 65. She refuses electrical treatment, diathermy, etc., and most of the usual nerve sedatives have been tried without effect.