

cycle tyre a greater pressure had to be maintained in the pump, so there must be a greater pressure of blood outside than there was in the eyeball. With a fixed pressure of 20 mm. in the eyeball it followed that as the arterial pressure fell away the eye must be the first to suffer. At 15 mm. there might be still enough pressure to enable the blood to trickle round the brain in a lethargic sort of way, but it was not enough to allow the blood to enter the eye at all, and none whatever would get in. That, to his mind, was the cause of the blacking-out and the eventual blindness.

## Local News

### ENGLAND AND WALES

#### Harveian Society's Buckston Browne Luncheon

The customary dinner of the Harveian Society of London at which the Buckston Browne prize is annually presented was this year replaced by a luncheon, which took place at the Langham Hotel on January 31. The chair was taken by the new president of the society, Professor Frederick Langmead, and among the guests was the Minister of Health, Dr. Walter Elliot. Others present included Mr. Hugh Lett, President of the Royal College of Surgeons, Lord Horder, Sir Walter Langdon-Brown, Sir William Willcox, Sir Alfred Webb-Johnson, Sir Charles Wilson, Professor Grey Turner, and Dr. W. A. Daley, Chief Medical Officer of the London County Council. Dr. A. D. Morris, in proposing the toast of "The Harveian Society," mentioned the curtailment of the society's activities which the war has imposed, but he said that events—or the lack of events—had made possible a partial resumption of the programme, and advantage was taken of the opportunity to present the Buckston Browne prize and to welcome the new president to the chair. Professor Langmead, in response, said that it had sometimes been asked what claim the society had to the name of Harvey. There was possibly this consideration in the minds of the founders—that Harvey believed in the meeting together of doctors, not only for the furtherance of their professional knowledge but also for convivial reasons, and the society endeavoured to uphold both sides of that tradition. Sir Buckston Browne then presented his prize to Dr. Robert Kemp and Dr. J. Aitken for the best and second-best essays respectively on the subject of "The Value of Periodical Medical Examinations in Middle Life." Sir Buckston Browne said that the present gathering showed how determined the Harveians were to carry on. He had been a member of the society for sixty-six years. When he was quite a young man the society honoured him by making him Harveian lecturer. The remuneration was not to be despised in those days—fifteen guineas for the three lectures—but the giving of those lectures had an immense effect on whatever success he had met with in his profession as a private surgical practitioner in London.

#### Course on Mental Deficiency

A course of lectures and clinical instruction for medical practitioners on mental deficiency and allied conditions is being arranged by the University Extension and Tutorial Classes Council in co-operation with the Central Association for Mental Welfare. The course will begin on Monday, April 8, and end on Friday, April 20. It is based on the requirements for the University of London Postgraduate Diploma in Psychological Medicine, and is intended for qualified medical practitioners, more especially those who are engaged as school medical officers, certifying officers to local authorities under the Mental Deficiency Acts, or as medical officers of institutions, or who are otherwise definitely concerned with the care of subnormal or abnormal persons. It

includes instruction and practice in mental testing under the supervision of a psychologist. All lectures will be given at the University of London, London School of Hygiene and Tropical Medicine, unless otherwise stated on the students' time-tables. The clinical work consists of attendance at one or more demonstrations of individual cases of defect to small groups of students, and endeavours will be made to arrange visits to certified institutions and special schools if war-time conditions allow. The mental testing of individual children will be carried out as centrally as possible, but, if more travelling is entailed than usual, students are asked to bear in mind the difficulty of organizing this type of work under present conditions. Detailed time-tables will be sent not later than March 30 to each person proposing to attend the course. The University will grant certificates of attendance to those who attend regularly, taking both theoretical and practical work. Registration fee (to be paid at time of application), 10s. 6d.; fee for course (payable before March 17), £5 15s. 6d. As the course can be held only if sufficient applications are received, intending candidates should apply at the earliest possible date, but in any case by February 28. At the beginning of March those who have applied will be informed whether the course is to be proceeded with or not. The right to cancel the course is reserved, however, should war conditions make it impracticable to hold it. Cheques should be made payable to Miss Evelyn Fox, C.B.E., Central Association for Mental Welfare, and crossed Barclays Bank, Ltd. All communications should be addressed to her, c/o University Extension Department, University of London, London School of Hygiene and Tropical Medicine, Keppel Street, W.C.1.

#### Maternity Service for the Wives of Officers and Men

A special maternity service for the wives of junior officers and other ranks of H.M. Forces is being established at the Middlesex Hospital, London. Individual members of the honorary medical staff have offered to give their services and have declined to accept any fees. Accommodation will be provided in small ward units, with a curtained cubicle for each patient, adjacent to the Lord Ludlow wards. An inclusive charge, which is at present fixed at twenty guineas, will cover any length of stay in hospital, including the period before the birth of the baby and expert medical and nursing care, and supervision of the baby by a children's specialist. Applications from the wives of officers and other ranks should be made in the first instance to the secretary, Woolavington Wing, Middlesex Hospital, London, W.1. This maternity service is not available for the wives of officers above the rank of lieutenant in the Navy, captain in the Army, or flight lieutenant in the Air Force.

#### Treatment of Tuberculosis

The Minister of Health has received a number of inquiries concerning the responsibility as between different local authorities for the treatment of tuberculous patients who have been evacuated either under the Government scheme or under private arrangements. In a circular to local authorities the Minister states that the primary responsibility for the examination and treatment of patients suffering or suspected to be suffering from tuberculosis, including all dispensary facilities, and such additional help as extra nourishment, artificial pneumothorax refills, etc., must rest with the authority of the area in which the patient is living at the time. Local authorities will follow their usual practice as regards contributions from patients, but it is suggested that all patients should be treated alike in this matter, whether they lived in the area before the war or have gone there since. No contribution, however, should be required for the treatment of unaccompanied children evacuated under the Government scheme. This cost will be settled under the general arrangements for reimbursing local authorities for the care of casualties under the Emergency Hospitals Scheme.

In reply to a deputation from the Socialist Medical Association the Minister of Health stated that 125 tuberculosis institutions had been released entirely from their obligations

to the Emergency Medical Service since November 1, 1939, so that the whole of their accommodation could be devoted to their normal work. The various associations concerned in the treatment of tuberculosis had at his invitation appointed a small committee to maintain contact with the Department. More than two-thirds of the 28,000 beds in England and Wales for the treatment of tuberculosis were still available for that purpose, and, since there were about 3,000 vacant beds, the admission of new cases should not present any difficulty.

## SCOTLAND

### Emergency Bacteriological Service

The arrangements to provide Scotland with a bacteriological service for the duration of the war are set out in a circular issued to local authorities by the Department of Health for Scotland. The scheme is based on the central laboratories established at the four Scottish universities under the general supervision of the respective professors of bacteriology. In addition, subsidiary laboratories have been set up at various centres. In most cases these subsidiary laboratories are existing institutions, but three are in effect new. Each of the subsidiary laboratories functions autonomously but works in conjunction with the appropriate central laboratory under the supervision of the professor of bacteriology. Provision has also been made for the setting up of emergency laboratories in remote districts in the event of serious local outbreaks of infectious disease. The object of the scheme is to guard against any dislocation which might arise as a result of the war by co-ordinating the available services and utilizing to the fullest possible extent the resources, including personnel, available for bacteriological work in Scotland.

### Scottish Maternity Services

During the six months to November, 1939, 1,308 maternity cases, or 63 per cent. of the mothers in the county of Lanarkshire confined in their own homes, were dealt with under the county council's new maternity services scheme, which came into operation last May. The scheme, which was made under the Maternity Services (Scotland) Act, 1937, enables every expectant mother to obtain in her home at a reasonable charge, or free if need be, the services of a qualified midwife and a medical practitioner. If the doctor considers it necessary the assistance of a specialist obstetrician can also be obtained for the same all-in fee. Patients with incomes below the limit of national health insurance are asked to pay 30s. for the all-in service, and persons with incomes over this limit are asked to pay 65s. These charges, however, are graded down in cases where the patient cannot meet the full charge owing to financial circumstances. In Lanarkshire eighteen out of the 2,081 patients booked since the inception of the scheme paid the maximum fee of 65s., 1,753 paid 30s., 193 paid sums varying from 25s. downwards, and 117 were unable to make any payment. The total cost of the scheme to the county during the six months amounted to £4,729, of which 36 per cent. has been returned in patients' fees. No serious administrative difficulties have been encountered.

While at present the majority of the mothers taking advantage of this service belong to the population insured under the National Health Insurance Acts, it is expected that as the scheme becomes better known larger numbers having incomes above the limit for insurance purposes will apply for the benefit of the Act. It is understood that the Government does not intend that the development of local authority schemes under the new Act should be held up because of war conditions; the war has not lessened the need. Thirty-five schemes, covering thirty-seven of the fifty-five local authorities in Scotland responsible for maternity services, have been approved, and most of these are now functioning. Some fifteen further schemes are in an advanced stage of preparation.

## Correspondence

### Treatment of Infected Burns

SIR,—May I offer my congratulations to Surgeon Lieutenant Murless (*Journal*, January 13, p. 51) on his treatment of infected burns with tannic acid. I have now treated a small series of infected second- and third-degree burns and scalds, admitted to hospital 120 to 140 hours after injury. All patients were children, and were admitted with temperatures ranging from 103° to 105° F. Three cases exhibited a generalized scarlatiniform rash. After rapid and gentle cleansing under gas-and-oxygen anaesthesia, coagulation of the raw surface was obtained with either tannic acid or tannic acid and silver nitrate. Following the administration of prontosil the temperature fell to 99° F. within twelve hours. Thereafter the course of the illness was apyrexial, and separation of the coagulum occurred within ten to twenty days. Fluctuation of the coagulum was never seen, as the eschar was dehydrated with ether and painted with a 1 per cent. solution of gentian-violet in spirit at frequent intervals. The occasional use of the electric drier also assisted in keeping the coagulum dry.

As Mr. Joshua S. Horn points out in your issue of January 27 (p. 148), deep burns are usually adequately coagulated by the heat causing the injury, and severe toxæmia is rarely seen in this type of injury. Early excision of the damaged area is rarely practicable, and the application of tannic acid is surely a waste of time.

I was much interested in Dr. William Clayton's letter in the same issue (p. 148) explaining interfacial coagulation with cod-liver oil and "foille." I have had the opportunity of treating patients with tannic acid and with one or other of the above oily coagulants simultaneously. If one may presume that the injuries are comparable in both legs of a patient scalded with boiling water the following observations may be of interest:

1. The area treated with tannic acid was healed almost a week before that treated with the oily preparation.
2. The tanned area was free from pain from the time of primary coagulation; the oil-treated area was not painless.
3. The attention required by the tanned area was considerably less than that required by the part dressed with the oily preparation.
4. The patient preferred the tannic acid treatment.

Both cod-liver oil and "foille" are excellent dressings during the granulating stage of deeper injuries, but I would hesitate to depend on either to prevent the onset of secondary shock or toxæmia in an extensive superficial lesion. Incidentally, in burns treated with cod-liver oil or "foille" the temperature is erratic during the first week of the illness. With the modified Davidson or Bettman techniques the course is commonly apyrexial after the first forty-eight hours.—I am, etc.,

Glasgow, Jan. 29.

WALLACE M. DENNISON.

### Cod-liver Oil in the Treatment of Burns

SIR,—Dr. William Clayton (*Journal*, January 27, p. 148) has suggested that cod-liver oil may, due to the formation of interfacial films of proteins, etc., have a specific action on mustard-gas burns. He attributes the specific action largely to the polar groups of the molecules of the oil. I have made a study of interfacial protein films (see summary, Cold Spring Harbor Symposia, 1938), which shows that, generally speaking, the more polar an oil the less protein it absorbs per square centimetre, and the less rigid is the resultant film—that is, polar groups decrease the efficiency of protein film formation. Hence any specific action of cod-liver oil cannot be attributed to the polar groups in the general sense. But occasionally oils containing particular compounds—for example, cholesterol and soap, or lecithin with soap—form unusually thick interfacial films with proteins. This is probably due to the formation of complexes containing oil

spondent, and wrote a capital letter. Always inclinable to associate with the younger members of the profession, it was in this way that he kept himself up to date, and he was always eager to bring the latest discovery into practice for the benefit of his patients. What a delight it was to make long country journeys in his company, and how pleasantly the time passed, for he knew the life-story of so many of the folk and the history and romance with which they were surrounded. Though Dey was absorbed in his work he found time to take an interest in his garden and in the affairs of the golf club. He was wonderfully vigorous, and was at work until quite recently. He not only dressed well, but he liked other people to be well dressed, and he thoroughly enjoyed an occasional social function even if it meant a very long journey to get back home in the dead of night. He will for long be thought of in the Wooler district, and many who pass that way will remember it best because of the recollection of his outstanding personality. Dr. Dey was twice married, and is survived by a widow, a daughter, and four sons.

Dr. KATHARINE ROSEBERY DRINKWATER, who died at the end of December, had been chairman of the Denbigh and Flint Division of the British Medical Association in 1927-9 and president of the Wrexham and District Clinical Society in 1937-8. She was born in 1872, the eldest daughter of H. Mason Jay, M.D., F.R.C.S., and from Bath High School went to Bedford College, London, and the London School of Medicine for Women. She qualified as L.S.A. in 1903 after obtaining the B.Sc.Lond. in 1896, and graduated M.B., B.S. in 1906, afterwards taking the D.P.H. of Liverpool. In 1906 she married the late Dr. Harry Drinkwater of Wrexham as his second wife. From 1907 onwards she was assistant school medical officer under the Wrexham Education Committee and medical inspector of children under the Denbigh County Council. During the last war she was medical officer in charge of the women's wards in the Military Families Hospital at Malta for over a year. Dr. Katharine Drinkwater did much public work in North Wales, in social service and on the magistrates' bench.

Dr. ERNEST CHARLES YOUNG, a past-president of the Hunterian Society of London and of the Chelsea Clinical Society, died on January 6 at the age of 65. He had studied medicine at St. Mary's Hospital and Newcastle-upon-Tyne, and graduated M.B. of the University of Durham in 1905 after gaining honours in anatomy and physiology and materia medica. He was awarded the gold medal for his M.D. thesis on atonic dilatation of the stomach. When he settled in practice in London Ernest Young became clinical assistant to the West End Hospital for Nervous Diseases and to the North-West London Hospital, and was later elected physician to the Farringdon General Dispensary and physician to the Princess Beatrice Hospital. During the last war he served as senior physician to the McCall Hospital for Officers, and was mentioned in despatches. He had a large private practice, and never spared himself in the interests of his patients.

Mr. WILLIAM LEES, who died at Chester on January 11, aged 77, was for many years a familiar figure in Cheshire and North Wales. After studying medicine at University College Hospital he qualified as L.S.A. in 1884 and M.R.C.S. in the following year. He spent several years in travel, and on returning to England was appointed house-surgeon to the Chester Infirmary, then a hospital of eighty beds; he was later elected to the visiting staff. Soon afterwards he became medical officer of the Cheshire Race Meeting, and until the time of his retirement in 1933 regularly attended the Chester races and brought the ambulance arrangements to a high standard of efficiency. In the opinion of a good judge, Mr. Frank Romer, chief surgeon to the Jockey Club, the ambulance equipment and administration at Chester were second to none in the country. Dr. Lees was also responsible for the whole of the ambulance arrangements at the investiture of the Prince of Wales at Caernarvon Castle. He was a member of the Chester Council for six years, and though offered the Shrievalty and later the Mayoralty he could not accept owing to the claims of a large practice. He was a member of the British Medical Association for many years after joining it in 1887,

and had been president of the Chester and North Wales Medical Society. He was an honorary life member of the St. John Ambulance Association.

We regret to announce the death on January 21 from bronchopneumonia of Dr. HAROLD CARTER at the early age of 38. A native of Hyde in Cheshire, he was educated at Blackham Grammar School and the University of Edinburgh, and graduated M.B., Ch.B. in 1923; he later obtained the diplomas of F.R.C.S.Ed. and M.R.C.O.G. After serving as senior house-surgeon at the Leicester Royal Infirmary, Dr. Carter was for a short time in the L.C.C. Hospitals Service as a deputy superintendent, and was then appointed medical superintendent of the Mill Road Infirmary, Liverpool. His administrative ability was recognized by transference to the post of medical superintendent of the Central Middlesex County Hospital, an institution with 910 beds, and his standing in the eyes of his colleagues by election as chairman of the Willesden Division of the British Medical Association in 1937.

Mr. WILLIAM HENRY KELSON, who died in retirement on January 24 in his seventy-eighth year, was formerly well known in laryngological circles, having been for many years surgeon to the Throat Hospital, Golden Square. He was educated at Gresham's School, Holt, and at the London Hospital, where, after qualifying in 1883, he served as house-physician. In 1889 he graduated M.B.Lond., took the M.D. in the following year, and the B.S. (with honours) and the F.R.C.S. in 1893. After a few years in psychiatry he began to specialize in diseases of the throat, nose, and ear, and was elected to the staff of the Golden Square Hospital. Mr. Kelson published a book on his specialty, and had been honorary secretary and vice-president of the Otological Section of the Royal Society of Medicine and honorary secretary and president of the Laryngological Section. He was a member of the British Medical Association for nearly the whole of his professional life.

## The Services

### NAVAL COMPASSIONATE FUND

At the quarterly meeting of the directors of the Naval Medical Compassionate Fund, held on January 26, Surgeon Vice-Admiral Sir Percival Nicholls, K.C.B., K.H.P., Medical Director-General of the Navy, in the chair, the sum of £116 10s. was distributed among the several applicants.

### CASUALTIES IN THE MEDICAL SERVICES

#### ROYAL ARMY MEDICAL CORPS

On January 30 was published a list of officers of the Army and Royal Air Force who had died on service since the beginning of the war. It contained the names of six medical officers—namely, Lieutenant-Colonel William Leonard Eliot Reynolds, M.C., Lieutenant Arnold Norman Fletcher Critchley, Lieutenant Archibald Edgar Hill, Lieutenant Ivor Lloyd, Captain Geoffrey Henty Saunders, and Acting Major Thomas Fraser Todd. The death of Lieutenant-Colonel Reynolds was recorded in the *Journal* of December 9, 1939 (p. 1168), and those of Lieutenant Critchley and Acting Major Todd in the *Journal* of December 16, 1939 (p. 1209).

Lieutenant ARCHIBALD EDGAR HILL was elected a member of the British Medical Association in 1926, and was president of the Griguland West Branch in 1934. Lieutenant IVOR LLOYD qualified M.B., Ch.B. of the University of Liverpool in 1922. Captain GEOFFREY HENTY SAUNDERS took the M.R.C.S., L.R.C.P. in 1934, and had held a short service commission in the Royal Army Medical Corps since 1937, being promoted captain in the following year.

### DEATHS IN THE SERVICES

#### COLONEL SIR CHARLES BRIERLEY

Colonel Sir Charles Isherwood Brierley, C.I.E., I.M.S. (ret.), died of acute bronchitis at Leckhampton, Cheltenham, on January 25, aged 60. He was born on March 24, 1879, the son of the late Prebendary J. H. Brierley, was educated at Leeds, and took the M.R.C.S., L.R.C.P. in 1901. He at once

went to South Africa as a civil surgeon and served with the Imperial Light Horse from November, 1901, to November, 1902, took part in operations in the Transvaal, Orange River Colony, and Cape Colony, and received the Queen's medal with five clasps. Entering the Indian Medical Service as lieutenant on August 31, 1903, he became colonel on February 17, 1933, and retired on March 4, 1936. He received the C.I.E. on March 1, 1929, and a knighthood on January 1, 1936. Almost all his service was spent on the North-West Frontier, where he was agency surgeon at Wana in Waziristan in 1907, and in the Khyber Pass in 1908. He was then appointed civil surgeon of Peshawar, where he built and administered the Lady Reading Hospital. In 1927 he was appointed chief medical officer of the North-West Frontier Province and later inspector-general of hospitals in that province. He served in various frontier expeditions during the war of 1914-21, including the third Afghan War, when he was mentioned in dispatches. He married his cousin, Zoë Brierley, and leaves a widow, a son, and a daughter.

Surgeon Rear-Admiral FREDERICK WILLIAM PARKER, O.B.E., R.N. (ret.), died at Southsea on January 8. He was educated at St. George's Hospital and took the M.R.C.S., L.R.C.P. in 1887. Entering the Royal Navy he reached the rank of surgeon captain on September 12, 1917, and retired as surgeon rear-admiral on March 30, 1922. He served through the war of 1914-18, receiving the medals and the O.B.E. in 1919. He had been a member of the British Medical Association for thirty-seven years.

Fleet Surgeon ALEXANDER RICHARD JOYCE, R.N. (ret.), died at Henley-on-Thames on January 23, aged 91. He took the L.R.C.P.I. and L.M. and L.R.C.S.I. in 1870 and, entering the Royal Navy soon afterwards, became fleet surgeon on October 27, 1891. He served in the Egyptian War of 1882 as surgeon of H.M.S. *Superb*, when he was present at the bombardment of Alexandria and landed in medical charge of a force at Ramleh Heights. He was severely wounded in the Alexandria riots. He received the Egyptian medal with clasp and the Khedive's bronze star.

Surgeon Captain PALMER DEVROY RAMSAY, R.N. (ret.), died at Plymouth on January 30. He was the son of the late Paymaster-in-Chief Andrew John Ramsay, R.N., was educated at St. Mary's Hospital, and took the M.R.C.S., L.R.C.P. in 1903. Entering the Royal Navy, he attained the rank of surgeon commander on March 1, 1917, and retired with the rank of surgeon captain on April 19, 1935. He served during the war of 1914-18, receiving the medals. His sister is Dr. Mabel L. Ramsay of Plymouth.

Colonel NICHOLAS TYACKE, late R.A.M.C., died at Weymouth on January 11, aged 73. He was born at Constantine, Cornwall, on March 22, 1866, was educated at Middlesex Hospital, and took the M.R.C.S., L.R.C.P. in 1888. He entered the army as lieutenant on January 30, 1892, and reached the rank of lieutenant-colonel on April 21, 1914. During most of the war of 1914-18 he served as assistant director of medical services of a division in France and Flanders, with the rank of colonel, received a brevet colonelcy on June 3, 1919, became full colonel on March 22, 1921, and retired the same day. He served in the campaign on the North-West Frontier of India in 1897-8, receiving the Frontier medal with a clasp; and throughout the South African War of 1899-1902, when he took part in the relief of Ladysmith, including the actions at Spion Kop, Vaal Krautz, Tugela Heights, and Pieter's Hill, and in operations in Natal, including the action at Laing's Nek, and in the Transvaal, was mentioned in dispatches and received the Queen's medal with five clasps and the King's medal with two clasps. In the war of 1914-18 he was also mentioned in dispatches. He had been a member of the British Medical Association for forty-four years.

Lieutenant-Colonel FRANCIS HENRY MERCERON BURTON, R.A.M.C. (ret.), died suddenly at Finchley on January 10, aged 80. He was born on April 20, 1859, took the M.R.C.S. in 1880, the M.B., M.S. of the University of Durham in 1881, and proceeded M.D. in 1890. He entered the army as surgeon on February 4, 1882, became lieutenant-colonel after twenty years' service, and retired on April 20, 1912. He served in the Burma campaign of 1885-7, receiving the Indian Frontier medal with a clasp; and throughout the South African War of 1899-1902, when he took part in operations in Cape Colony, in the Orange River Colony, and in the Transvaal, receiving the Queen's medal with three clasps and the King's medal with two clasps. He rejoined for service in the war of 1914-18 from December 28, 1914. He had been a member of the British Medical Association for thirty-three years.

## Universities and Colleges

### UNIVERSITY OF LONDON

The last date for obtaining the entry form for the examination for the Postgraduate Diploma in Psychological Medicine, March-April, 1940, is February 24; entry closes on March 1, and the examination begins on March 26 (Part A) and April 9 (Part B). Entry forms may be obtained from the University Extension Registrar, University of London, at Royal Holloway College, Englefield Green, Surrey.

### UNIVERSITY OF MANCHESTER

Professor F. Wood Jones, F.R.S., has withdrawn his resignation of the Chair of Anatomy which was to have taken effect from December 25, 1939. Dr. J. C. Dundon has been appointed Demonstrator in Anatomy from December 25, 1939.

### ROYAL COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS

A quarterly meeting of the Council was held at the College House on January 27, with the Vice-President, Professor Miles H. Phillips, in the chair.

#### Membership

The following were admitted to the Membership of the College, *in absentia*:

Charles Victor Salisbury (Sydney), Ebenczer A. Thomas (Vellore, India).

The following candidates were elected to the Membership of the College:

Hugh Sylvester McLelland (Brisbane, Australia), Clifford William Furneaux Burnett (Southend), James Alexander Chalmers (Royal Air Force), Alexander Culiner (Canada), Samuel Davidson (Birmingham), Arthur Leonard Deacon (London), Malcolm T. Drummond (Sydney), Ronald Eadie (Crieff), Alice Barbara Field (London), Herbert John Green (Perth), Henry Alexander Hamilton (London), Nora Louisa Keevil (London), David Ronald Kilgour (London), Oswald Lloyd (London), Robinson M. Millen (London), Robert C. Percival (London), Evan Robert Rees (Harrow), Harold Mitchell Rees (Sydney), Jane B. Roy (Dundee), Charles Scott Russell (Oxford), George Routledge Turner (Southend), Phillip Neville Simons (Sydney, R.A.N.V.R.).

### SOCIETY OF APOTHECARIES OF LONDON

The following candidates have passed in the subjects indicated:

**SURGERY.**—A. A. M. Easton, G. E. H. Enderby, R. H. Gaman, J. N. Hunt, N. W. R. Lucas, J. P. Rochford, H. Wormald.

**MEDICINE.**—E. Batley, M. G. Braham, C. Bucknall, W. Gordon, N. W. R. Lucas, A. M. McCall, H. Wormald.

**FORENSIC MEDICINE.**—E. Batley, M. G. Braham, C. Bucknall, W. Gordon, N. W. R. Lucas, A. M. McCall, H. Wormald.

**MIDWIFERY.**—D. McC. Gregg, G. T. Hammond, G. H. Miles, H. Wormald.

The diploma of the Society has been granted to E. Batley, M. G. Braham, R. H. Gaman, J. N. Hunt, N. W. R. Lucas, A. M. McCall, and H. Wormald.

### CONJOINT BOARD IN SCOTLAND

The following candidates, having passed the requisite examinations, have been admitted L.R.C.P.Ed., L.R.C.S.Ed., L.R.F.P. and S.Glas.:

J. Allan, R. Anderson, J. Balkind, S. Barclay, J. C. Brown, G. Buchanan, J. Cinder, H. I. Clapham, A. C. Clark, R. F. Clark, S. Druce, G. K. Effat, D. M. Fairley, C. Fraser, S. A.-M. Gabriel, P. Goldberg, L. Goldstein, W. R. Grant, J. H. Higgins, J. E. Holland, H. W. Horne, K. G. Huxham, B. Jacobs, M. M. Katz, J. D. Katzman, P. L. Khurana, G. B. Lamberty, D. K. Levin, B. R. Malhotra, A. A. Martin, P. G. Miller, K. Misch, M. A. L. Musa, A. M. McKinlay, A. Newman, V. O. Nurse, F. G. Obeidallah, D. A. Patel, T. M. Prosser, H. J. Richardson, G. Richmond, L. K. Rittenhouse, Doreen M. Sang, L. E. Shapiro, J. B. Safford, W. D. T. Sym, H. Q. O. Wheeler, A. R. Widlitz.

The following graduates of recognized foreign universities were also admitted Licentiate:

M. Bodian, B. C. Bose, Dorian Eisenklam, K. Eisinger, E. B. Gold, S. Horowitz, G. Maschankzer, K. F. Pollaczky, Josefina Stross, M. Sugar.