

## ASSOCIATION INTELLIGENCE.

### METROPOLITAN COUNTIES BRANCH.

AN adjourned ordinary meeting of this Branch will be holden at the rooms of the Medical Society of London, 32A, George Street, Hanover Square, on Wednesday, March 17th, at 7.30 P.M., when the discussion on Hospital Administration will be resumed.

A. P. STEWART, M.D. } *Honorary Secretaries.*  
ALEXANDER HENRY, M.D. }  
London, March 11th, 1869.

### SOUTH-EASTERN BRANCH: EAST SURREY DISTRICT MEETINGS.

THE next meeting of this Branch will be held at the Crystal Palace Hotel, Norwood, on Thursday, March 18th. The Chair will be taken at 4 P.M., by Dr. Corbould of Sydenham.

Papers, etc., are promised by Dr. J. M. Bright, Dr. Horace Jeaffreson, the Honorary Secretary, etc. Dinner will be provided at 6 P.M.

HENRY T. LANCHESTER, M.D., *Hon. Secretary.*  
Croydon, March 3rd, 1869.

### SOUTH-EASTERN BRANCH: EAST KENT DISTRICT MEDICAL MEETINGS.

THE next meeting of the above Branch will be held at the Pavilion Hotel, Folkestone, on Thursday, March 25th, at 3 P.M.

March 1869. ROBERT L. BOWLES, *Hon. Secretary.*

### WEST SOMERSET BRANCH.

THE spring meeting of the above Branch will be held at the Clarence Hotel, Bridgewater, on Thursday, April 1st, at 5 P.M.; W. L. Winterbotham, M.B., President.

Gentlemen intending to be present at the dinner (which will be served at 5.15), or to read papers after, are requested to give notice to the Honorary Secretary.

Taunton, March 1st, 1869. W. M. KELLY, M.D., *Hon. Sec.*

### BIRMINGHAM AND MIDLAND COUNTIES BRANCH.

#### THIRD GENERAL MEETING, JANUARY 14TH, 1869.

*Present:* C. A. NEWNHAM, Esq., President, in the Chair; and thirty-four members and visitors.

*New Members.*—The following gentlemen were elected members of the Branch:—Dr. Quirke, Lozells; Mr. Jackson, Smethwick; Mr. Warwick, Bloomsbury; Dr. Cotterill, West Bromwich; Mr. Llewellyn Summers, Wolverhampton.

*Papers.*—1. Dr. MILLER of Wolverhampton exhibited a specimen taken from the body of a man aged 47, who died of Cancer of the Stomach and Liver. The left kidney was found in the pelvis, of natural size, and a little lobulated. The apex reached the promontory of the sacrum, from which the kidney sloped downwards and outwards. It was entirely covered by peritoneum, and quite fixed. The left ureter was four inches and a half in length. The left renal artery arose at the bifurcation of the aorta. The left suprarenal capsule was in its normal position. The right kidney (not hypertrophied) and the right suprarenal capsule were in their normal positions. The rectum and sigmoid flexure of the colon made a very wide bend to the right side of the pelvis. This specimen might, in life, have been a cause of error in examination *per rectum* or *per vaginam*, had the patient been a female.—Mr. BARTLETT related a similar case, at present under treatment.

2. Mr. ARTHUR BRACEY exhibited a patient from whom he removed an Epithelial Cancer in May 1868. The growth had invaded the whole of the lower eyelid, the skin covering the lacrymal sac and inner half of the upper lid. Mr. Bracey removed the whole of the growth, and filled its place by transplanting a piece of integument from the cheek to form the lower lid, and by extending the remaining half of the upper lid. The case was very successful, so far as the operation was concerned; but there is now (January 1869) a tendency to the recurrence of the cancer.

3. Mr. WEST presented a patient who had been the subject of Femoral Aneurism, which had been successfully treated by ligature of the external iliac artery.

4. Mr. WEST read an account of a case of Caries of the last Lumbar

Vertebra, occurring in a strumous young man aged 25, which came on as an acute disease of a rheumatic character, after exposure to great alternation of heat and cold in working at his trade as an engine-fitter. After the lapse of eighteen months, an abscess formed in the course of the psoas and iliacus muscles on the left side, which, after some weeks, burst. About this time, the head of the femur became dislocated on to the dorsum ilii; fresh abscesses formed in the gluteal, inguinal, and hypogastric regions; and the patient gradually sank from hectic fever and profuse suppuration. Mr. West showed the pelvis, with the last lumbar vertebra attached. Caries had partially destroyed the body of the last lumbar vertebra; but the arches were entire, and free from disease. The intervertebral cartilage between the fourth and fifth vertebrae had almost disappeared; but, in its place, Nature had endeavoured to afford a substitute by a sort of arch or "flying buttress" of new bone, one inch in length and half an inch in breadth, which reached from the front of the body of the fourth to the front of the body of the fifth lumbar vertebra. The carious head, arch, and trochanters of the left femur lay in a bed of pus on the dorsum ilii. The acetabulum was roughened, and its posterior wall had almost disappeared. The psoas and iliacus muscles were almost gone.

5. Mr. SOLOMON exhibited a Melanotic Tumour, of the size of a boiled marrow-fat pea, growing from the choroid coat. The presence of the growth excited acute ophthalmitis. In another case, the vitreous space was occupied by carious matter, of the colour and consistence of boiled yolk of egg. The choroid had also undergone important changes. The removal of the eye has been followed by the growth of a tumour within the orbit. Full details of this case will be laid before the Pathological Section.

6. Dr. B. W. FOSTER read an interesting paper on Mitral Stenosis, which was illustrated by diagrams of pulse and breathing tracings.

### FOURTH GENERAL MEETING.

*Present:* C. A. NEWNHAM, Esq., President, in the Chair; and sixty-seven members and visitors, among the latter many students of Queen's College, to whom the Council of the Branch have offered the opportunity of attending these meetings.

*New Members.*—The following gentlemen were elected members of the Branch:—Mr. Picket, Wolverhampton; Mr. Macdonald, Wolverhampton Hospital; Mr. Gilbert, Bilston; Mr. Harmer, Birmingham.

*The late Joseph Hodgson, Esq.*—Mr. SOLOMON proposed, and Mr. NEWNHAM seconded, that a resolution sympathising with the relatives of the late Mr. Hodgson be forwarded by the Secretary.

*Papers, etc.*—1. Mr. FURNEAUX JORDAN showed a case of Wound of the Knee-joint, treated by a new method, which had recovered without a single drop of pus or other unfavourable symptom. The wound was incised, two inches in length, gaping, and at the front of the joint. Mr. Jordan said that recovery was rare even in punctured, or valvular, or non-gaping wounds. He had never known a similar wound in a similar locality recover before.

2. Mr. PEMBERTON exhibited an Exostosis growing from the Scapula, which he had removed by operation.

3. Mr. T. UNDERHILL read a paper on Placenta Prævia.

4. Dr. NORRIS read a paper on the Formation of Rouleaux in the Blood. The paper was copiously illustrated by diagrams, and explained by numerous experiments.

### SOUTH EASTERN BRANCH: WEST KENT DISTRICT MEETINGS.

THE third meeting of the twelfth session, 1868-9, was held at Gravesend, on March 5th; CHARLES J. PINCHING, Esq., in the Chair.

*The next meeting* was appointed for the 20th of April, at Dartford.

*Communications.*—1. The working of the Contagious Diseases Act of 1866, at St. Bartholomew's Hospital at Chatham. By Arthur W. Nankivell, Esq.

2. Case of Section of the Supraorbital Nerve, for Neuralgia of the Eyeball. By J. Z. Laurence, Esq.

3. Affection of the Carpus in elderly people. By John Armstrong, M.D. Four cases had been observed. No *post mortem* examination had been made. The lesion was presumed a change in the cartilage, with a porcellaneous alteration of the bone. Liver disease (Amyloid?) succeeded in a few months, and proved fatal within two years.

4. Clinical Notes. By J. F. Brown, M.D. a. *Puncture of the Bladder in the Female.* Age 46. Ovarian tumour of ten years' duration. Vagina extraverted, one year. Fourth attack of retention of urine. Failure of catheterisation in third as well as in present attack. Parts turgid and indurated. Puncture beneath the pubic arch, on December

10th, 1867. Relieved; but died four days subsequently. Two large Ovarian Tumours and Suppurative Nephritis were found *post mortem*.  
*b. Twin Pregnancy, supposed erroneously to be complicated with Ascites.* A woman (subject to biliary seizures), at three months of pregnancy doubled her size in the course of eight days. Biliary symptoms became extremely urgent. Labour set in spontaneously at 5½ months of pregnancy, on December 21st, 1866. The amount of liquor amnii was very great. An obstetric physician from London pronounced the case to be pregnancy complicated with ascites, and counselled delay. The medical attendants had been thinking of paracentesis abdominis. This case shows that under urgent circumstances threatening life, puncturing the fetal membranes would be safer than any attempt to relieve abdominal distension by paracentesis abdominis. *c. Concealed Accidental Hemorrhage.* Age 36. Ninth child within a week of full time. Delivery on December 12th, 1865. Sudden collapse at 8.30 A.M., caused by the foetus kicking *intra uterum*. Ammonia was given and no further steps taken, for the case was not understood. The woman was subject to functional heart disease, and the present seizure was erroneously attributed to such. Three loose motions occurred at the commencement of the collapse, further misleading. Tonic contractions of uterus at noon. Sudden escape of a pint and half of blood and coloured serum at 3 P.M. The attendant now ruptured the membranes, and gave ergot. No more hemorrhage. Child born (still) at 4.50 P.M. Placenta was removed in eight minutes, preceded and accompanied by clots of several hours' duration. No fresh hemorrhage. The centre of the placenta had been detached originally, and the edge had separated at 3 P.M. The patient recovered but suffered from spinal congestion, requiring leeching, on December 17th. Some of the members doubted whether a foetal kick could separate the placenta, and attributed the detachment to cramp. The mother felt the sensation of a kick. I have known the placenta to be detached by the kick of a child sleeping in the same bed with its mother, also by the act of coitus. *d. Fracture of the neck of the Femur in a woman aged 66 years; neglected for six weeks,* then treated by Dupuytren's method, viz., the prolonged use of the long splint. The splint was retained for three months. Recovery.

## REPORTS OF SOCIETIES.

### PATHOLOGICAL SOCIETY OF LONDON.

TUESDAY, MARCH 2ND, 1869.

RICHARD QUAIN, M.D., President, in the Chair.

DR. LANGDON DOWN brought forward a living child, the subject of Arrested Development. The child was five years old, two feet three inches in height, and weighed twenty-two pounds. It had the appearance of about two years of age, and had the intellectual capabilities of a child of a year or less. It was an example of a class of which he had seen twenty to thirty. After the first dentition, they never increase much in size, the teeth decay, and a vascular tumour appears on each side of the neck. They are physically and mentally wanting. He believes the possible cause to be procreation under the influence of alcohol. In answer to the President, Dr. Bastian, and Mr. Adams, he stated that in six cases which came under his observation, alcohol was the probable cause; that the idiotic character did not manifest itself so much at birth; and that the father was, he thought, the parent generally responsible. The greatest age he had met with in this class of cases was twenty-two. —Dr. GREENHOW thought the Society ought to know more of the antecedents of the parents or grand-parents, as it appeared strange that out of so many children procreated in drunkenness in this country so few presented similar characters to the present case. In answer to the President, Dr. DOWN said there was in the present instance no family history of syphilis, nor had he found it a prominent factor in these cases, in not more than 1 per cent. There was neither any history of insanity or epilepsy. The venous enlargement was caused by dilated veins.

Mr. BRUCE showed a Mulberry Calculus, measuring six inches by five in circumference, and weighing three ounces, taken from a boy, aged 14, who had made a good recovery.

Mr. BRUCE also exhibited a case of Stricture of the Œsophagus, which had ulcerated into the posterior part of the right lung and formed an abscess. Referred to Committee.

Dr. LEGGE showed the Parotid Gland of a boy who had been admitted into University College Hospital with albuminuria. He in a few days contracted mumps, and four days afterwards pericarditis. Three days after this he died. There was obtained a greyish-white fluid from the cut surface of the gland, with rounded cells, granular contents, and

bright single nucleus. There was no reddening. All the arteries were found atheromatous—a very rare condition in a boy of 16—and the kidneys were atrophied.

Dr. C. T. WILLIAMS showed a Thyroid Gland, supposed to be cancerous, from a patient aged 65, who had suffered from dysphagia and dyspnoea. The right lobe was the size of a small orange, and infiltrated around, there was a warty ulcerated growth in the posterior wall of the Œsophagus and extending through it. An abscess had formed below the trachea, and pressed upon the Œsophagus.—Dr. CHURCH said that one part of the thyroid looked like a cyst with steatomatous products.—In answer to Mr. Hulke, Dr. Williams was not able to state whether the growth arose from the connective tissue or not. Referred.

Mr. FAIRLIE CLARKE brought forward for himself and Dr. SUTTON a case of Gangrene of the Foot from a child who had had measles. On the twenty-eighth day of the gangrene the foot dropt off; and ten days afterwards, the ends of the tibia and fibula were sawn off, and a stump made. He was sorry to be unable to give any definite account of the state of the arteries.

Dr. GREEN showed a specimen of Chronic Pneumonia from a patient aged 56, who had suffered from winter cough and profuse expectoration. The lower lobe of the right lung was completely adherent and consolidated; the lung-tissue was deeply pigmented, and there were numerous bands throughout. Was the state due to a chronic pneumonia, or an extension of the bronchitis to lobular pneumonia? In answer to the President, he said the bronchi were not dilated.

Dr. HICKMAN brought forward an interesting case of complete Transposition of the Viscera from a woman aged 28, who had died comatose. There were nine small spleens. The colon ascended and descended twice. The ventricles of the brain were filled with large clot, and there was old clot in the posterior lobes.

Dr. CHURCH showed a rare example of Fungus Hæmatodes of the Dura Mater bones, etc. The patient was admitted into hospital with complete facial palsy of one side, and impairment of sensation on the other. He died in a state of coma. After death, there was found a small nodule on the forehead, and several others in the scalp, none so large as a cherry. The dura mater was everywhere covered with pinkish granulations, and also the inner surface of the skull. There was blood also in the dura mater which had escaped from several points. From the sella turcica to the tentorium there was a similar condition, but none where the cerebral nerves issued. The temporal bone was considerably diseased. The ribs and sternum were also affected; almost all the internal organs were affected with the cancer; the spleen, however, was free. The specimen did not support the idea that in all secondary cancer one centre affects the other organs. Referred.

Dr. DICKINSON showed a case of Rupture of the Chordæ Tendineæ of the mitral valve, where they were torn off nearer the heart than the valve, from a man, aged 21, who, when lifting a weight, was seized with pain in the chest and dyspnoea. There was a murmur over the whole heart, and he had blueness of the face. He had great dulness over one lung, and hæmoptysis. There was no sign of heart disease.—The President remarked on the rarity of the accident in a healthy heart.—Dr. MURCHISON stated that Dr. Peacock had tabulated ten cases of aortic, four of mitral, and three of tricuspid rupture.

### DUBLIN PATHOLOGICAL SOCIETY.

SATURDAY, FEBRUARY 13TH, 1869.

FLEETWOOD CHURCHILL, M.D., President of the College of Physicians, in the Chair.

*Fibrinous Clot Extending from the Left Ventricle into the Aorta, and Simulating Aortic Patency.*—Dr. STOKES exhibited the Brain and Heart of a boy who had died suddenly in an Epileptiform Fit at the Meath Hospital. The patient was a boy, aged 14, admitted on February 7th, suffering from febricula. It was deemed so trifling, as scarcely to demand attention. A trifling bronchitis came on after a few days; but it was not deemed necessary to make any very accurate physical examination of the chest. On the 12th, it was found that a portion of the base of one lung had become solid; and Mr. Macnamara, one of Dr. Stokes's clinical clerks, discovered a double basic cardiac murmur characteristic of aortic patency. The heart had been previously examined and noted down as healthy, but it was evident that some latent lesion existed. The pulse now presented a well-marked collapsing character, and the carotids throbbed violently, but the action of the heart was tranquil. At 1.30 P.M. on the 12th, he had been attacked with an epileptiform fit, followed by a period of unconsciousness, and attended by violent action of the heart and congestion of the face. The pupils were contracted; and the patient did not bite his tongue. Ice having been applied to the head, the pupils dilated, the tumultuous action of the heart

**PHARMACY ACT (1868) AMENDMENT.**—The following is the text of a Bill to amend "The Pharmacy Act, 1868," brought in by Lord Robert Montagu. Whereas it is expedient to exempt from the provisions of the Pharmacy Act, 1868, all duly qualified medical practitioners and veterinary surgeons in Scotland. Be it enacted by the Queen's most Excellent Majesty, by and with the advice and consent of the Lords Spiritual and Temporal, and Commons, in this present Parliament assembled, and by the authority of the same, as follows. 1. Nothing contained in the first fifteen sections of the recited Act shall extend to or interfere with the business of any legally qualified medical practitioner in Scotland duly registered under "The Medical Act," or of any legally qualified veterinary surgeon in Scotland.

**MEDICAL RELIEF.**—Dr. Lush will, on March 12th, move for a return of the total amount charged in the column headed "Medical Relief" in the last annual report of the Poor-Law Board; and a statement of the expenditure charged under this head, setting forth the actual amounts paid—1. To the medical officers; (a.) By way of salary; (b.) As extra medical fees; (c.) For vaccination; 2. For medicines; 3. Medical and surgical appliances; 4. Subscriptions to hospitals, etc.; 5. Maintenance of sick in hospitals; 6. Wines, spirits, etc.; 7. Other outlay not included under any of the preceding heads.

## UNIVERSITY INTELLIGENCE.

### UNIVERSITY OF OXFORD.

**RADCLIFFE TRAVELLING FELLOWSHIP (MEDICAL).**—This Fellowship has been awarded, after examination, to Mr. Henry N. Moseley, B.A., of Exeter College. Mr. Moseley was placed in the first class in the Natural Science Examination, in Easter Term, 1868.

### UNIVERSITY OF CAMBRIDGE.

**NATURAL SCIENCE SCHOLARSHIPS.**—Competitive Examinations in Natural Science, for Scholarships, are about to be held as follows in the several Colleges. Downing College (£40 *per annum*), on Tuesday, March 16th. Clare College (£50 *per annum* for three and a half years), on Wednesday, March 17th. Trinity College (£80 *per annum*), on Easter Monday. St. John's College (£50 *per annum*), Friday, April 9th. The Examination at Trinity College is open to all undergraduates of Oxford or Cambridge. The examinations at the other Colleges are open to all Students who have not begun to reside in the University, or who have only recently done so. These Scholarships and others are offered each year. Information respecting them may be obtained from the tutors of the respective colleges.

## MEDICAL NEWS.

### THE NEW NOMENCLATURE OF DISEASES.

WE are happy to be able to announce that the Lords Commissioners of Her Majesty's Treasury, in a letter dated Treasury, March 10th, direct that 20,000 copies of the work entitled *Nomenclature of Diseases* shall be procured for gratuitous distribution among the registered medical practitioners of the United Kingdom. This new Nomenclature has been prepared by the gratuitous labour of the College of Physicians, and its use is essential for public purposes of death-certificates required by law, and often unpaid. Its distribution to medical practitioners is an useful and graceful act by Mr. Lowe, the Chancellor of the Exchequer.

### THE ROYAL COLLEGE OF SURGEONS.

At the Council-meeting on Thursday evening, Mr. Curling's motion, to which we last week referred, for including Midwifery in the examination for the Membership, was, we are glad to learn, carried almost unanimously.—Mr. Erasmus Wilson's liberal offer to present £5,000 and a fine collection of casts, and to found a professorship of Cutaneous Pathology, was brought forward, unlogged by conditions of any kind. It was received with the warmth which such an offer merits, and was referred to a Committee for the settlement of details.—Thus two important steps in the direction of useful progress were accomplished in this sitting.

### MEDICAL OFFICERS' SUPERANNUATION (IRELAND).

MR. BRADY will to-night once more introduce a Bill to provide Superannuation Allowances to Medical Officers of Poor-law Unions in Ireland. Mr. Pim, member for the city of Dublin, and Mr. Hamilton, representing the county, will also back the Bill as its promoters. The second reading is not likely to be taken till after Easter. The subject will be brought before the Parliamentary Bills Committee of the British Medical Association, at the wish of Mr. Brady. The Association will undoubtedly be desirous to do all in its power to further the objects of our members and medical brethren in Ireland in this matter, and we doubt not that they will find means to make adequate representations on the subject to the Government.

### SECONDARY EDUCATION: PETITIONS OF THE GENERAL MEDICAL COUNCIL AND OF THE BRITISH MEDICAL ASSOCIATION.

THE following petition has been prepared in accordance with a resolution passed at the Oxford meeting, and will, we believe, be presented to the House of Commons on Monday next.

*To the Honourable the House of Commons in Parliament assembled.*

THE Humble Petition of the British Medical Association, at its Meeting at Oxford this Twentieth day of August, 1868,

SHEWETH,—That the British Medical Association, consisting of more than four thousand British medical practitioners, takes a deep interest in the advancement of medical science, and in all measures calculated to promote the efficiency of persons engaging in the profession of medicine and surgery.

That the Association is of opinion that, for the successful study of medicine, sound general education is of the utmost importance.

That the Association has reason to believe that the education of many medical students is hindered and rendered less efficient than it ought to be by their defective general education.

That the Association has reason to fear that, notwithstanding the regulations of the Medical Corporations and Universities of the United Kingdom which have been designed to secure the preliminary general education of medical students, some of them have great difficulty in maintaining a sufficient standard of acquirement, owing to the inefficient state of Secondary Education in the schools of the Country.

That the Association is aware that the subject of Secondary Education in schools has engaged the attention of Commissioners appointed by Her Majesty to inquire into it, and that the Reports of these Commissioners have been for some time before the public.

The British Medical Association, therefore, humbly prays that your honourable house will allow but little time to elapse before such Laws shall be enacted as will remedy existing defects in Endowed Schools, and otherwise place the Secondary Education of the country in a satisfactory state.

And your petitioners will ever pray.

On behalf of the British Medical Association.

HENRY W. ACLAND, Regius Professor of Medicine in the University of Oxford, and President of the Association.

At the last meeting of the Executive Committee of the General Medical Council, on February 24th, a draft of a petition to each House of Parliament, praying for early legislation on the subject of secondary education in schools, was read and settled. It had previously been, by the General Medical Council, referred to the Executive Committee to prepare such petitions; and the President was authorised to sign and affix the seal of the Council to them, and to take measures for their presentation. The Registrar has also been instructed, with a view to such arrangements as will enable the various licensing boards to secure a proper preliminary education of medical students, to procure copies of any Bill that may be introduced into Parliament for the improvement of general education, as soon as such Bill is printed, and to distribute them among the members of the Executive Committee.

**APOTHECARIES' HALL.**—Names of gentlemen who passed their examination in the science and practice of medicine, and received certificates to practise, on Thursday, March 4th, 1869.

Allen, Thomas, Fylingdales, Whitby  
Büsenberg, Andreas G. H., Cape of Good Hope  
Henry, George, Kingstown, Dublin  
Kidger, Alfred Armitage, Ashby-de-la-Zouch  
Lloyd, William Howell, Broad Oak, Llangathen  
Thompson, George, Wakefield  
Warren, Thomas, Princes Risborough

At the same Court, the following passed the first examination.

Atkinson, Alfred James, University College  
Barringer, Thomas S. W., St. Bartholomew's Hospital  
Collins, Henry William, Guy's Hospital  
Gray, Clement Frederick, St. Bartholomew's Hospital  
Horsford, Joseph A., University College  
Hudson, Hubert E., Guy's Hospital  
Manby, Alan R., Guy's Hospital  
Milles, George R., King's College

As an Assistant in compounding and dispensing medicines.

Clarke, Josiah, Long Buckby

### MEDICAL VACANCIES.

The following vacancies are declared:—

**ARDWICK AND ANCOATS DISPENSARY**, Mill Street, Manchester—Junior House-Surgeon (£100 per annum, with rooms, coal, gas, and attendance).  
**BRADFORD (Yorkshire) INFIRMARY AND DISPENSARY**—Two Physicians; Two Resident Medical Officers (each £110 per annum, with board and residence in the Infirmary).  
**CARMARTHENSHIRE INFIRMARY**, Carmarthen—Physician.  
**CHAILEY UNION**, Sussex—Medical Officer for District No. 3 (£20 per annum); Medical Officer for District No. 4, and the Ditching Workhouse.  
**CHARING CROSS HOSPITAL MEDICAL SCHOOL**—Professor of Comparative Anatomy.  
**CITY OF LONDON FREEMEN'S ORPHAN SCHOOL**, Brixton—Surgeon.  
**CRAIGNISH**, Argyleshire—Parochial Medical Officer.  
**EASTERN DISPENSARY**, Bath—Surgeon.  
**GENERAL HOSPITAL**, Birmingham—Dispenser (£70 per annum, and board, without lodging).  
**GREAT OUSEBURN UNION**, Yorkshire—Medical Officer for the Boroughbridge District (£25 per annum).  
**HOLYHEAD UNION**—Medical Officer for the Holyhead District (£60 per annum, with extra fees for Surgical Operations and Midwifery, and Vaccination Fees).  
**ISLINGTON DISPENSARY**—Surgeon.  
**KELLS UNION**, co. Meath—Medical Officer for the Moyalty Dispensary District (£100 per annum, exclusive of Registration and Vaccination Fees).  
**KENT AND CANTERBURY HOSPITAL**—Physician.  
**LONDON HOSPITAL**—Surgeon.  
**LURGAN UNION**, co. Armagh—Medical Officer for the Moyntagh Subdistrict (£100 per annum, and Registration and Vaccination Fees).  
**MIDDLESEX HOSPITAL**—Physician's Assistant.  
**NEWPORT UNION**, co. Mayo—Medical Officer for the Achill Dispensary District (£80 per annum, and Registration and Vaccination Fees).  
**OLD MEETING FRIENDLY FUND**, Birmingham—Surgeon.  
**NORTHERN HOSPITAL**, Liverpool—Dental Surgeon.  
**ROYAL ORTHOPÆDIC HOSPITAL**, Oxford Street—Assistant-Surgeon.  
**ST. IVES UNION**, Huntingdonshire—Medical Officer for the Somersham District (£70 per annum, and extras).  
**ST. LUKE'S HOSPITAL FOR LUNATICS**—Resident Medical Superintendent (£200 per annum, with apartments and board in the Hospital).  
**STAFFORDSHIRE GENERAL INFIRMARY**, Stafford—Assistant to the House-Surgeon.  
**STEPNEY UNION**—Medical Officer for the Ratcliff, Shadwell, and Wapping District (£220 per annum, to include everything, except medicine).  
**SUNDERLAND INFIRMARY AND DISPENSARY**—House-Surgeon (£100 per annum, with board and residence).  
**UTTOXETER UNION**, Staffordshire—Medical Officer for the Abbots Bromley District (£40 per annum, and extras); Medical Officer for the Leigh District (£20 per annum, and extras).  
**WEOLLEY UNION**, Herefordshire—Medical Officer for the Weolley District (£75 per annum, and Vaccination Fees); Medical Officer for the Workhouse (£10 per annum).  
**WHITEHAVEN UNION**, Cumberland—Medical Officer for the Workhouse (£35 per annum, to include everything).

### BIRTHS.

**JOYNSON**.—On February 18th, at Northwich, Cheshire, the wife of \*George Thomas Joynton, Esq., Surgeon, of a son.  
**SMITH**.—On March 8th, the wife of \*J. E. Smith, Esq., Surgeon, Hay, Breconshire, of a son.

### MARRIAGE.

**MORRIS**, James, M.D. Lond., Fellow of University College, of 13, Somers Place, Hyde Park Square, to Agnes, only daughter of John Turner, Esq., late of Glasgow, at St. John's, Richmond, on March 9th.

### DEATHS.

**JONES**, J. D., M.D., at Dalston, aged 58, on March 9th.  
**SMITH**.—On February 8th, at Seaforth, Lucy Mabel, youngest child of \*C. Swaby Smith, L.R.C.P. Ed.  
**Wood**, Herbert, Esq., Surgeon, at Ashton-under-Lyne, aged 27, on March 7th.

### OPERATION DAYS AT THE HOSPITALS.

**MONDAY**.....Metropolitan Free, 2 P.M.—St. Mark's, 9 A.M. and 1.30 P.M.—Royal London Ophthalmic, 11 A.M.  
**TUESDAY**.....Guy's, 1.30 P.M.—Westminster, 2 P.M.—Royal London Ophthalmic, 11 A.M.—National Orthopedic Hospital, 2 P.M.  
**WEDNESDAY**...St. Mary's, 1.15 P.M.—Middlesex, 1 P.M.—University College, 2 P.M.—London, 2 P.M.—Royal London Ophthalmic, 11 A.M.—St. Bartholomew's, 1.30 P.M.—St. Thomas's, 1.30 P.M.—Samaritan Free Hospital for Women and Children, 2.30 P.M.—Great Northern, 2 P.M.  
**THURSDAY**....St. George's, 1 P.M.—Central London Ophthalmic, 1 P.M.—Royal Orthopedic, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Hospital for Diseases of the Throat, 2 P.M.  
**FRIDAY**.....Westminster Ophthalmic, 1.30 P.M.—Royal London Ophthalmic, 11 A.M.—Central London Ophthalmic, 2 P.M.  
**SATURDAY**...St. Thomas's, 9.30 A.M.—St. Bartholomew's, 1.30 P.M.—King's College, 1.30 P.M.—Charing Cross, 2 P.M.—Lock (Clinical Demonstrations and Operations), 1 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Free, 1.30 P.M.

### MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

**MONDAY**.—Royal College of Surgeons, 4 P.M. Professor Huxley, "On the Construction of Vertebrate Animals."—Medical Society of London, 8 P.M. Dr. John Thompson Dickson, "On Matter and Force in relation to Mental and Cerebral Phenomenon."—Entomological Society.  
**TUESDAY**.—Pathological Society of London, 8 P.M.—Anthropological Society of London.  
**WEDNESDAY**.—Royal College of Surgeons, 4 P.M. Professor Huxley, "On the Construction of Vertebrate Animals."—Meteorological Society.  
**THURSDAY**.—Harveian Society of London, 8 P.M. Mr. Victor de Méric, "On Sulphate of Soda in the Treatment of Syphilis."—Royal Society.—Chemical Society.—Linnæan Society.  
**FRIDAY**.—Royal College of Surgeons, 4 P.M. Professor Huxley, "On the Construction of Vertebrate Animals."  
**SATURDAY**.—Association Medical Officers of Health.

### NOTICES TO CORRESPONDENTS.

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

WE CANNOT UNDERTAKE TO RETURN MANUSCRIPTS NOT USED.

CORRESPONDENTS not answered are requested to look to the Notices to Correspondents of the following week.

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

AUTHORS of PAPERS, desirous of having extra copies printed for their own use, are requested to communicate with the printer, Mr. Richards, 37, Great Queen Street.

CASES for Binding the Volumes of the JOURNAL may be had on application to Mr. Richards, 37, Great Queen Street. Price 1s. 6d. each; by post, 1s. 8d.

**NOTICE TO ADVERTISERS.**—Advertisements should be forwarded direct to the Printing-Office, 37, Great Queen Street, W.C., addressed to Mr. Richards, not later than *Thursday*, twelve o'clock.

#### THE BRIGHTON CHILDREN'S HOSPITAL.

SIR,—I was glad to see the letter of your correspondent at Birkenhead in such close contact with the extracts from Dr. Taaffe's letter regarding the Brighton Children's Hospital. Our hospitals and dispensaries certainly do not lack patients: on the contrary, I believe, they attend somewhere about half of the people of Brighton as it is, and how it will be if a new hospital be equally patronised, I will leave you to imagine. The local practitioners have been complaining bitterly for many years of the injustice done them by the wholesale and indiscriminate medical relief given at the different medical institutions; but it seems to be of no service to complain, for, instead of anything being done to reform the existing charities, and root out their abuses, it appears that still more of the proper work of the general practitioner is to be abstracted by a new candidate in the doctor-you-for-nothing line. I hope the action of the Association will not be limited to the metropolis in this matter; believe me, that in the large provincial towns the local practitioners are robbed of their means of living by indiscriminate gratis doctoring quite as much as in London. Perhaps, London-super-Mare more closely resembles London in the extent to which the system is carried than most other provincial towns; but it is quite certain that thousands on thousands a year have been kept out of the pockets of the profession in Brighton for a long time past by the old charities, and now a new one is about to lend them a helping hand in impoverishing the profession. If this multiplication of medical charities is to go on I don't know what is to become of the general practitioner, for how can he expect people to pay even moderate charges if attendance and medicines can be obtained for nothing? It is a wonder that he has so long and so well held his ground in the face of such unequal and unjust competition. A great many here do not believe in Children's Hospitals, seeing that the diseases of children are so contagious; but whether it be proper to congregate children together at the risk of disseminating contagious diseases or not, there could be no need for a special hospital, for the general hospital has beds for children, and if anything more were required funds could have been raised to develop the arrangements or treating their diseases there. I am old, however, that the beds for children are not all occupied now. I am, etc., A BRIGHTON M.D.

NOTICES of Births, Marriages, Deaths, and Appointments, intended for insertion in the JOURNAL, should arrive at the Office not later than 10 A.M. on Thursday.

#### THE ADMINISTRATION OF CHLOROFORM.

SIR,—May I ask a small space in your JOURNAL in reply to a letter on the "Best Mode of Administering Chloroform?" This is a subject of very great interest to all, and one that should be especially considered for the benefit of those practising in the country. With all due deference to Dr. Kidd, I cannot quite coincide with him that the napkin is at all a safe method of exhibiting chloroform, on account of the extreme uncertainty of the amount of chloroform vapour inhaled, as has been already proved by the highest authorities on this subject. By this means, a patient inhales a very high per centage of chloroform vapour one minute and, probably, pure atmosphere the next. The only safe method, undoubtedly, is by means of "Clover's apparatus;" for a full description of which *vide* a paper by Mr. Clover, read before the Odontological Society of Great Britain, March 2nd, 1864, and *Medical Times and Gazette*, August 9th, 1862. By this means, the highest amount of chloroform vapour is about 4 per cent.; it can, if necessary, be diluted even to 1 per cent. The late Dr. Snow proved that a vapour containing 5 per cent. was dangerous to human life; therefore, much greater must that danger be when administered on a cloth, when a much greater percentage may be produced. Dr. Snow filled a bag with the vapour of about 4 per cent., and his results were invariably the same. With regard to deaths when Clover's apparatus has been used, I can only add that such accidents will sometimes occur when no chloroform has been inhaled, from fright only. In Dr. Sansom's work on Chloroform, he mentions, I think, five such cases where death occurred from fright. Dr. Snow also makes some remarks on this subject; therefore, the two deaths that Dr. Kidd mentions might have been produced in this way; they are, I think, the only ones. One great point, however, is, that the administrator should confine his whole attention to the patient, and not allow anything to engage his attention during the operation. I also think that both the respiration and pulse should receive equal attention. The respiration may be good, but the pulse may become intermittent, or suddenly cease; or *vice versa*, the pulse may be good, and the breathing may cease. But, I think, every necessary information has already been fully detailed in the Treatises on this subject, therefore I will not further trespass upon the space in your JOURNAL, the only observation more I have to make, is that everyone before attempting to administer anaesthetics should first of all be familiar with the literature of the subject, and then practise under the supervision of one accustomed to administer them.

I am, etc., GEO. CHAS. COLES,

Anæsthetist to the Great Northern Hospital.

20, Gt. Coram Street, Russell Square, W.C., March 1869.

THE *Sheffield Daily Telegraph* of February 4th, 1869, gives a graphic and amusing account of the "bullying the vaccination inspector" at the recent meeting of the Board, by a gentleman who holds that, if there had been frosts, there would have been less small-pox, and that the weather was more to blame than the Board for the excessive mortality from neglect of vaccination. The chairman is able to quote Scripture in favour of the prevalence of small-pox. We trust that public opinion will be influenced by the figures and facts, to which we lately referred, to compel these gentlemen to use those means of preventing small-pox which science affords, and which religion as well as reason countenances and encourages.

We are indebted to correspondents for the following periodicals, containing news reports and other matters of medical interest:—The Wiltshire County Mirror, March 3rd; The Aberdeen Free Press, March 5th; The Oldham Chronicle, Feb. 27th; The Brighton Times, March 6th; The Cambridge Express, Feb. 27th; The Birmingham Daily Post, March 3rd; The Nottingham Journal, March 3rd; The Parochial Critic, March 3rd; The Cambria Daily Leader, March 4th; The New York Medical Record, Feb. 15th; The Llandudno Register and Herald, Jan. 9th; The Japan Times' Overland Mail, Jan. 13th; The Birmingham Daily Post, March 8th;

#### COMMUNICATIONS, LETTERS, ETC., have been received from:—

Mr. G. T. Joynson, Northwich; Messrs. MacLachlan and Stewart, Edinburgh; Dr. Trotter, London; A Brighton M.D.; Mr. Armstrong, Ripon; Dr. G. A. D. Mahon, Mazagony, Bombay; Mr. J. Birt, Stourbridge; Dr. Bywater, Coniston, Ambleside; Mr. O. P. Thomas, Liverpool; W. G., Campbelltown; Mr. Towle, Manchester; Dr. J. Cooke, Hastings; Dr. Saunders, Clifton; Dr. H. B. Spencer, Oxford; House-Surgeon to One of the Metropolitan Hospitals; Mr. W. Rivington, London; Mr. J. Hutchinson, London; Mr. Steele, London; Dr. W. Aitken, Woolston, Southampton; Mr. W. T. Grant, Wolverhampton; Mr. J. L. Williams, Liverpool; Mr. H. Thomson, Bangor, co. Down; Mr. Key, London; Dr. R. T. Cooper, Southampton; Mr. E. Bradley, Cheltenham; Mr. E. Long, Barham, Canterbury; J. E. L., Durham; Dr. Stewart, London; M.A., Tenby; Dr. S. L. Haynes, Salisbury; Adelpheos, Doncaster; A General Practitioner; Dr. Alfred Walker, London; Dr. Nicholls, Chelmsford; Mr. Gamgee, Birmingham; Dr. Duddield, London; Mr. Davenport, M.P.; Mr. Brady, M.P.

#### LETTERS, ETC. (with enclosures) from:—

Sir James V. Simpson, Bart., Edinburgh; Dr. Mapother, Dublin; The Honorary Secretary of the Athenæum Medical Students' Association, Manchester; Dr. J. H. Bartlett, London; Mr. Hutchins, London; Dr. Burman, Exminster; Dr. Felce, London; Dr. E. G. Clarke, London; Dr. G. Street, London; Messrs. Whitfield and Sons, Birmingham; Messrs. Southall, Son, and Dymond, Birmingham; Dr. F. Simms, London; Mr. J. B. Curgenven, London; Mr. E. Johnson Smith, London; Dr. Paul, London; Mr. Wanklyn, London; Dr. Leard, London; Mr. Sewill, London; Dr. C. S. Smith, Seaford; Dr. G. M. Humphry, Cambridge; The Secretary of Apothecaries' Hall; The Registrar-General of Ireland; The Registrar-General of England; Mr. T. M. Stone, London; Dr. Treutler, Kew; Dr. John Murray, London; The Registrar of the Medical Society of London; Dr. J. Hughlings Jackson, London; Mr. St. George Mivart, London; Mr. J. Z. Laurence, London; Dr. A. Ogston, Aberdeen; Mr. Sarjeant, Sandy, Beds; Dr. A. Smith, Dublin; The Honorary Secretary of the West Kent District Branch; Mr. Nankivell, York; The Secretary of the Medical Society of London; Dr. F. J. Brown, Rochester; Dr. H. Bennet, London; Mr. J. E. Smith, Hay; Dr. Spitta, London; Dr. H. Blane, Brussels; Mr. D. Thompson, Lancaster; The Honorary Secretary of the Harveian Society of London; Dr. C. B. Fox, Scarborough; Mr. M. A. Wood, jun., Ledbury; Dr. G. Hill, Chester; Dr. E. C. Garland, Yeovil; Mr. R. Wood, Ashton-under-Lyne; Mr. G. C. Coles, London; Mr. E. Chapman, Oxford; Dr. Heaton, Leeds; Dr. T. Cole, Bath; Dr. Bowles, Folkestone; Dr. Barclay, Leicester; Dr. Leard; Mr. Dixon, London; Dr. Kelly, London.

### Results of Meteorological Observations, for the week ending Saturday, March 6th, 1869.

NAMES OF STATIONS AND OBSERVERS.	BAROMETER. Reduced to 32 deg. F. & mean sea lev.		MEAN TEMPERA- TURE.		Mean degree of Humidity (sat. -100)	SELF-REGISTERING THERMOMETERS.								Mean amount of Clouds (0-10).	Mean amount of Ozone (0-10).	WIND.										RAIN.		
	Mean.	Range.	Of Air in Shade.	Of Evaporation.		Dew-point.	Maximum.	Minimum.	Range.	Mean of all Maxima.	Mean of all Minima.	Black bulb Maxim. in Sun.	Minimum ex- posed on grass.			Number of days it blew in certain directions.										Mean Force 0-12.	Number of days it fell.	Amount in inches.
																N.	N.E.	E.	S.E.	S.	S.W.	W.	N.W.	Calm, etc.				
BATH Dr. Barter, F.M.S.	29.931	1.097	43.2	40.6	37.5	74	55.0	33.9	21.1	48.7	37.5	93.0	..	7.7	3.6	1	1	0	0.5	0	0.5	1	2.5	0.5	4.2	5	0.22	
BOURNEMOUTH Dr. Compton, F.M.S.	29.983	1.020	43.7	40.6	36.9	76.7	54.3	33.0	21.3	49.0	37.0	106.0	29.8	4.8	4.4	1	0	0	0	0	0	1.7	4.3	0	4.6	4	0.34	
DUBLIN Dr. J. W. Moore.	30.022	1.005	42.8	40.4	37.5	82.6	50.8	33.0	17.8	47.3	36.6	..	30.0	7.0	..	0.3	0	0.7	0	0.7	1.5	2.0	1.8	0	3	5	0.68	
KEW Dr. Treutler, F.L.S., etc.	29.905	1.166	41.4	38.2	34.2	76.6	52.3	27.5	24.8	46.2	34.7	106.3	21.0	6.1	6.6	1	1.3	0	0	0	0.3	0.7	3	0.7	4.4	3	0.35	
LLANDUDNO Drs. Nicol and Dalton.	29.908	1.200	43.6	40.6	37.1	77	53.2	34.2	19.0	48.2	37.0	..	..	7.0	..	0.5	0.5	1	0	0	0	2	3	0	2.5	6	0.57	
MALVERN Messrs. W. and J. Burrow.	30.014	1.183	42.0	38.3	33.8	74	53.3	29.6	23.7	47.2	35.8	86.2	28.8	4.9	6.1	0.3	0.6	0	0	0	0	1.0	5.0	0	1.5	3	0.30	
SCARBOROUGH Dr. Fox, M.R.C.P., etc.	29.810	1.288	38.0	34.7	30.2	73	49.6	28.8	20.8	43.2	32.6	..	..	4.3	2.7	1.3	1	0	0.3	0	0	0.3	4	0	5.1	6	0.38	
SIDMOUTH Dr. Mackenzie, F.M.S., etc.	29.998	0.810	45.2	41.9	38.1	76.4	54.5	34.3	20.2	50.9	42.1	..	..	3.3	4.5	0	0	1	0	0	0	1	5	0	(?)	5	0.81	
WORTHING W. J. Harris, Esq., M.R.C.S.E.	29.917	1.131	43.0	39.5	35.3	74.5	54.3	31.7	22.6	49.6	36.7	..	23.5	5.9	2.9	1.3	0	0	0	0	0.7	1.7	2.3	1	2.8	3	0.30	

REMARKS.—There has been a general and considerable decrease in atmospheric pressure during the week, while the range has also been very much greater, being in most cases double what it was in the previous week. Temperature has diminished a little at most stations, and there is this peculiarity about it, that while the mean temperature is lower at all stations (except Worthing), the actual maximum readings are higher in all cases (except Scarborough), and hence the range has also been generally greater. The greatest range occurred at Kew, and the least at Dublin. Winds have been generally fresh and from all quarters, but chiefly from N.W. The amount of clouds has been somewhat less on the whole, and ozone has been fairly abundant. The rainfall has been general, but the quantity rather less than last week; the greatest amount was collected at Sidmouth, and the least at Bath. A heavy gale blew at Bath, Dublin, and Kew, commencing in the S.W. on the afternoon of the 1st, veering to the N.W. during the night, and continuing so until the evening of the 2nd, when the wind veered to N.E. and abated. Its greatest force at Bath was estimated = 11, and at Kew = 10. Its influence was also felt at Bournemouth and Worthing. Snow and sleet were observed on the 28th ult. at Dublin and Worthing, on the 2nd (with lightning) at Bath and Bournemouth, and on the 3rd in Dublin. Another fresh N.W. gale blew over Kew on the 5th. On the whole, winds and weather have been very variable and unsettled. Influenza is reported as prevalent at Sidmouth; otherwise the general health is fairly good at all stations.

Chief Plants first observed in flower at Kew during the week—*Buxus sempervirens*; *Viscum album*.

Kew, W., March 10th, 1869.

W. J. TREUTLER.