

THE

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BRITISH MEDICAL JOURNAL:



BEING THE

JOURNAL OF THE BRITISH MEDICAL ASSOCIATION.

EDITED FOR THE ASSOCIATION BY

ERNEST HART, Esq.

VOLUME I FOR 1872.

JANUARY TO JUNE.

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MDCCCLXXII.

Hospital was twice as large as this. The time it had lasted did away with the idea of ranula.

Interstitial Pneumonia.—Dr. GREEN exhibited a specimen of Interstitial pneumonia from a man aged sixty, who came into Charing Cross Hospital with a broken thigh. He had suffered from chronic bronchitis, and died of an acute attack of that malady. The right lung was adherent; its pleura was thickened and soft. There was no consolidation or caseation, but the lower lobe looked like a piece of sponge, and was made up almost entirely of dilated bronchi and fibrous tissue. It was quite soft to the feel. The left lung was like the upper lobe of the right. The kidneys were slightly indurated. In the right lung was a fibro-nuclear growth round the bronchi and blood-vessels. The nuclei were in part fusiform, and the tissue was fibrillated. In some parts the alveoli were little affected. He supposed that the bronchitis had led to dilatation of the bronchi, due to increase of the peribronchial connective tissue, which invaded and obliterated the alveoli in parts. He was inclined to doubt the existence of primary fibroid change. He thought it arose from antecedent pleurisy, pneumonia, or bronchitis.—Dr. WILSON FOX said the case was a very rare one; for simple induration arising in the interalveolar substance, without the alveoli being affected, was very rare. He thought Dr. Green's explanation was correct. Primarily, there had been chronic bronchitis, with dilatation and consolidation around, spreading into the alveoli. There was also some catarrhal pneumonia; but the thickening of the septa exceeded its products in amount. There was no phthisis here.—Dr. PAYNE asked what was the condition of the heart, especially on the right side. He did not care to advance views, but he would suggest an explanation—viz., that the soft thickening of the pleura, the induration of the lung, and the dilatation of the bronchi were connected with dilatation of the heart. Stoppage of the due supply of blood was often the starting point of such changes.—Dr. POWELL said twelve years' bronchitis would render congestion of the base probable; and from that Dr. Green's explanation was clear. He did not well understand dilatation of the bronchi as a primary change. He thought obstruction to the exit of the blood more likely to cause induration than insufficient supply.—Dr. GREEN said the right heart was perhaps slightly dilated, but that was not easily judged of. The absence of pigment at the base of the lung militated against the idea of congestion.—Dr. DICKINSON had reported a case where plugging had given rise to hardening.

Dilated Stomach.—Dr. CRISP exhibited a model of dilated stomach from an elderly lady who had suffered from pain in the region of the cæcum. She was much troubled with vomiting; there was slight jaundice, and she died exhausted. The greater curvature of the stomach reached the pubes, and the pylorus was near the cæcum. Around the pylorus were some hardened glands. The liver was cirrhotic. He thought the kind of food had a good deal to do with enlargement of the stomach; so, also, had tight-lacing.—Mr. SPENCER WATSON thought that living on vegetable food gave rise to gastric enlargement.

Hip-disease.—Dr. CRISP also showed a specimen of hip-joint disease, complicated with Bright's disease, in a boy aged 16. He died of uræmia. The hip-disease had probably been induced by a fall.—Dr. DICKINSON thought the kidneys were probably lardaceous. They were referred to him for examination.

Dr. SIMMS exhibited a specimen of Malignant Disease of the Liver. The organ was greatly enlarged and smooth. Ascites came on, and vomiting. (Referred to Committee on Morbid Growths.)

SPECIAL CORRESPONDENCE.

VIENNA.

[FROM OUR OWN CORRESPONDENT.]

The Weather.—Prevalence of Pulmonary Tubercle.—Accident to Professor Schneider.

The weather is severe to a degree uncommon here so early in the winter. A feeble and inefficacious thaw, after trying to maintain itself during two or three days of fog, has given up the attempt; Jack Frost has again undisputed sway, and the sun is trying to peer through the mist. The Danube is frozen, and the water being very shallow, it is said to be frozen down to its bed. This frost has brought out skates, for the ice seems to have the same distracting effect upon Anglo-Saxon medical students (nor does the possession of M.D. alter their nature) that the inter-University games have upon the students of England's two leading Universities. The cold is just as great this morning in the main street as it was in the coldest midnight of last winter in Great Britain.

Very naturally one's attention has been drawn to the subject of the

effect of this cold upon the mortality. It does not increase the daily tale at the dead-house here; nor is there that accession of bronchitis which would be looked for in England. The atmosphere here is different from that of Britain, as personal experience demonstrates in the unusually good behaviour of a troublesome winter cough. We are not without a fearful proportion of pulmonary tuberculosis; but there is some connexion betwixt the absence of bronchitis and the unusual prevalence of lung-consumption—the "morbus Viennensis" of Oppolzer. It would be an interesting subject for investigation to inquire into the causes which determine in England a rapid growth of abortive epithelial cells, or bronchial mucus, from repeated exposure to atmospheres of widely different temperature, and the comparative absence of it here, with a corresponding increase of more slowly forming cacoplastic tubercle-cells. As a matter of personal observation and experience, neither in the street, nor in the wards, nor in the dead-house, is there to be found evidence of the unusually wide-spread prevalence of pulmonary tuberculosis here to warrant the above denomination, except in acute tuberculosis, of which a number of cases find their way into the *post mortem* room, along with a heavy percentage of typhoid cases. The latter do not usually show large tracts of ulceration—though once during this autumn this was the rule—but extensive thickening and roughening of the intestinal canal, extending far down to the transverse colon, and often considerable infiltration of the mesenteric glands. By far the most common cause of death is implication of the lungs. In many cases death is apparently the result of exhaustion, before any lesion sufficient to cause death itself is apparent. There is no reserve stock of vitality in the patients of the Krankenhaus to endow them with a margin of spare power with which to resist the invasion of acute specific disease, while the inactive tendency of therapeutics here is not likely to do much to supplement this deficiency.

Professor Schneider is another to be added to the lists of victims to science. He is an adventurous chemist, and has had another explosion in his laboratory, from which he has, unfortunately, suffered severely. Both eyes are implicated, and, it is feared, are lost.

ASSOCIATION INTELLIGENCE.

BIRMINGHAM AND MIDLAND COUNTIES BRANCH.

A MEETING of this Branch will be held at the Midland Institute, Birmingham, on Thursday, January 11th, at 3 P.M.

T. H. BARTLETT, *Honorary Secretary.*

BATH AND BRISTOL BRANCH.

THE third meeting of the session will be held at the York House, Bath, on Thursday evening, January 18th, at 7 P.M.: CROSBY LEONARD, Esq., President, in the Chair.

R. S. FOWLER, }
E. C. BOARD, } *Honorary Secretaries.*

BIRMINGHAM AND MIDLAND COUNTIES BRANCH: GENERAL MEETING.

THE third General Meeting of this Branch was held at the Midland Institute, Birmingham, on Thursday, December 14th, at 3 o'clock, P.M. Present—OLIVER PEMBERTON, Esq., President of the Branch, in the Chair, and seventy-two members and visitors.

New Members.—The following gentlemen were elected members of the Branch:—Mr. Wesley Thompson, Cradley; Dr. Tomkins, Leamington; Dr. Rowland, Malvern Wells; Mr. Black, Birmingham; Mr. Clement Hadley, Birmingham; Mr. Charles Roberts, Leamington; Dr. Arlidge, Newcastle-under-Lyme.

Papers.—The following papers were read. 1. *Conical Cornea.*—Mr. SOLOMON exhibited two patients upon whom he had operated. The disease was in each instance double. He had recently treated this deformity of the eye by four different methods: 1. Excision of the summit and the application of caustic to the posterior elastic lamina; 2. Excision, and, when the wound was small, allowing it to heal by the natural processes; 3. Excision, and bringing the edges of the wound together by suture. In all these operations the cornea was flattened, and the near-sightedness (myopia) much lessened. The chief objection consisted in the presence of a life-long central opacity. This deformity had been entirely avoided in one of the cases presented to the meeting. In it Mr. Solomon had removed a wedge-shaped piece of cornea near to its upper border, bringing the edges of the wound together with a suture. The effect of

the operation was the removal of the cone and the absence of all apparent blemish, as the resulting leucoma was covered by the upper eyelid. In extreme cases of conical cornea, Mr. Solomon would operate upon two sides of the cornea, and afterwards select the least astigmatic part for an extension of the pupil laterally. The operation of iridodesis, from the dangers to which it exposed the eye, he considered should be abolished from surgery.

2. *Encephaloid Cancer of the Right Testicle.*—Mr. JOLLY exhibited a specimen (with diagram) which he had removed from a man aged 43. The growth had existed for eighteen months, and had originated without any apparent cause or assignable injury. The testis had increased to a great size: the scrotum had ulcerated, and a sloughing fungus protruded, which was extending rapidly, discharging profusely, and bleeding repeatedly. The cord was thick and full, but there was apparently no contamination of the inguinal, iliac, or lumbar glands. The tumour, on section, presented much the same appearance as encephaloid disease in other parts of the body; and, on microscopic examination, was found to consist of typical cancer-cells intermixed with a large quantity of molecular matter.

3. *Malformation of the Hand of a Child.*—Mr. LAWSON TAIT shewed a case in which there were originally only two digits on the hand, a thumb and a thick ungainly stump representing the index and middle fingers. There was no depression to indicate the structures of the several fingers, and the nails and ungual phalanges were united. Mr. Tait established a commissure by the plan recommended by Mr. Syme, consisting of wearing an India-rubber band passed through the site of the future commissure and worn until the track healed. He then slit up the union of the two fingers. The result was in great measure satisfactory; but there was, as in all such cases, a tendency for the commissure to creep forwards and thus interfere with independent use of each finger. To remedy this, Mr. Tait proposed to use Mr. Tamplin's clamp, for the possession of which he was indebted to the kindness of his friend, Mr. Adams.

4. *Meningeal Apoplexy.*—Mr. WHITCOMBE exhibited the brain, with the meninges and spinal cord, of a man aged 51, who died on December 11th. The patient was admitted into the asylum on the 28th of November last, suffering from paralysis, with accompanying symptoms of insanity. He was in a helpless and feeble state. From this he somewhat rallied, so as to be able to move about with difficulty, but on the morning of December 10th, he was found in an apoplectic state, and died twenty hours afterwards. The necropsy revealed a large clot, and about eight ounces of fluid blood, between the parietal and cerebral layers of the arachnoid, extending over the posterior two-thirds of the right hemisphere, depressing that hemisphere to such an extent, as to give it a concave form. The sulci of both hemispheres were scarcely traceable, and the remainder of the arachnoid membrane was unusually dry. There was extensive pulpy softening of the cord in the dorsal region. The heart and vessels were healthy. Mr. Whitcombe remarked on the length of time the patient survived after such extensive effusion and consequent pressure.

5. *Puerperal Insanity.*—Dr. MALINS related the case of Mrs. W., aged 23, who had always had good health until the time of her first pregnancy. When about six months advanced, she became silent and dejected, with great apprehension as to her future recovery from her confinement. She sent for Dr. Malins on October 11th. He prescribed a tonic, with twenty-five grains of chloral hydrate at bedtime, and endeavoured to reassure her mind, and cautioned her husband not to leave her alone. There was no albumen in the urine, and no hereditary disposition to insanity. The following day, at 11 o'clock, and while her attendant was down stairs, conveying a message to Dr. Malins, who had called to see her, she jumped from the bedroom window—a height of more than twenty feet. She was carried up stairs insensible. A small wound on the right temple, and a contusion of the right shoulder, were all the external marks visible. She continued unconscious; and at 2 P.M., with the view of saving the child, Dr. Malins turned and delivered. The child, full-grown, was dead. The mother never rallied, but died sixty hours after the receipt of the injuries. After delivery, the convulsions, which had been very severe, ceased, and did not again return, showing a strong analogy between puerperal convulsions and those arising from traumatic causes. No necropsy was allowed.

6. *Tumours of the Breast.*—Mr. PEMBERTON shewed two tumours of the breast which he had removed on the previous day. One was a Cystic Sarcoma; the other a Scirrhus Cancer.

7. *Cancer of Liver.*—Mr. RICKARDS brought a liver, from a patient lately under the care of Dr. Foster, affected with malignant disease. The cancer in it occurred as an infiltration, and in distinct centrally depressed nodules.

8. *Galvanism.*—Dr. MACKEY read a paper on some points in galvanotherapy. After alluding to the different teachings of the German and

the French schools, and also to recent practice in London, and acknowledging obligations to Dr. Radcliffe, Dr. Russell Reynolds, Dr. Althaus, and Dr. Anstie, the paper proceeded to narrate results of personal practice. The cases quoted as illustrating treatment by the *continuous* current were four: one of hemiplegia with hyperæsthesia; one of epilepsy; one of extreme "nervous debility"; and one of convulsive attack and brain-disturbance after hard drinking. The first mentioned case was not relieved, but the others were very much so. It was recorded also that the symptom of "tinnitus aurium" was often much relieved by this current. The cases treated by the interrupted current included one of dyspepsia; one of hemiplegic paralysis; one of miscarriage; one of delayed menstruation; and one of obscure nervous disease, probably spinal: the two first mentioned with decided benefit—the others not so. The continuous current used was generated from large cells packed with carbon and containing a plate of zinc, the exciting fluid being a strong solution of common salt: of such cells, ten to forty were used, according to circumstances. The interrupted current used was generated from twelve Smee's cells, and the coil was constructed of a single thick wire, with an interrupter so arranged as to allow the inverse and the extra current only to pass through the patient—these, of course, being in the same direction, so as to give a more equable and less jerky sensation. Other machines shewn were: 1. A small portable one of similar construction to the last mentioned, but with one cell; 2. Gaiffe's small chloride of silver battery; 3. Maw and Sons' new magneto-electric machine; 4. Browning's ditto; and 5. Foveaux's continuous current battery (Weiss).

CORRESPONDENCE.

THE COMING RACE.

SIR,—I have read with great interest Mr. Gascoyen's letter in the JOURNAL of the 23rd inst., and beg to offer a few remarks on the subject which he has so ably treated.

I agree with Mr. Gascoyen that the manner in which the Examinations are conducted at the Royal College of Surgeons is not in any way the cause of the deficiency of knowledge possessed by those entering upon the practice of their profession; but I hope to make a few comments on the Primary Examinations, with which I am especially concerned, further on. I feel sure, also, that Mr. Gascoyen is correct in saying that the students entering the medical profession are, each year, of a more gentlemanly stamp, and have received a better preliminary education.

A most important passage in Mr. Gascoyen's letter, and one that is worthy of the attention of those in authority, is that in which he advises that the student, "having passed an examination in these (Medicine, Surgery, Midwifery, etc.) should receive, not a diploma, but a *license to practise as an assistant*." It is not unusual for a student who has failed to pass his primary examination at the College of Surgeons to take temporary refuge in the situation of "unqualified assistant" (the adjective is, I think, hardly misapplied); and there are many others who, for reasons of a pecuniary nature, are tempted to seek the same objectionable post. Now these are, especially, the students who are apt to bring discredit upon themselves and their teachers. In fact, out of the five men from the school to which I am attached, who were rejected for their primary examination last April, no fewer than three were or had been acting as unqualified assistants. One sympathises with the poorer patients, who naturally fall into the hands of many of these men, but one can hardly fail to see how prejudicial such a system must be to the interests of those students themselves. How very few of them are really allowed "sufficient time for attendance on lectures and hospital practice!" I know that their work in the dissecting-room is sadly interfered with; and their evening studies, from the frequent interruptions to which they are subject, become hardly worthy of the name. How some of them manage to attend midwifery cases, and work in the dissecting-room, is, for more reasons than one, a subject deserving of investigation. I cannot help believing that not a few of the out-patients who are said to be abusing our hospital charities, have been compelled to apply there for such advice as the unqualified assistant of the general practitioner in the neighbourhood was unable to afford.

I now come to the second grievance.

The students complain, and with good reason, of their being compelled to attend, willing or unwilling, so many lectures. We know that "one man may lead a horse to water, whilst nine can't make him drink." If a man find that he adds an adequate amount to his store of knowledge by attending a certain lecture, he is glad to avail himself

OBITUARY.

NATHANIEL HECKFORD, Esq., M.R.C.S.

WE deeply regret to record the death of Mr. Nathaniel Heckford, which took place at Ramsgate on December 14th. Mr. Heckford was born at Calcutta in 1842. His father, Captain N. Heckford, was well known in India as the author of several excellent works on Navigation. On coming to England in 1857, he was apprenticed to Dr. A. Banks, of Stratford; and two years afterwards, he entered as a pupil at the London Hospital. During his student career, he gained successively the gold medals in Surgery and in Medicine, and filled the posts of Resident Accoucheur, House-Surgeon, and Medical Registrar and Tutor, acting also on several occasions as House-Physician. He held also for a short time the House-Surgeoncy of the Metropolitan Free Hospital.

When cholera broke out in 1866, he worked both night and day in the newly opened cholera hospital at Wapping, then under the care of his friend and a fellow-student, Dr. Bathurst Woodman, displaying much singleness of heart and intelligent energy. Soon after the hospital was closed, he returned to India for a time, and returned in charge of troops. On leaving for India, his fellow-students at the London Hospital presented him with a silver cup as a token of their esteem. In January 1867, Mr. Heckford was married to Miss Sarah Goff, who had acted as one of the lady-nurses at the Wapping Hospital; and on the first anniversary of their marriage, they founded and took up their abode in the East London Hospital for Children, the scene of their future devoted and romantic labours. The hospital building was an old warehouse hard by the bank of the river, and situated in one of the most wretched neighbourhoods of the East End. They purchased the old building for £2,000, the freehold of which they presented to the hospital committee last year. At first, the young couple commenced their work of love with ten beds, the entire cost of maintenance being defrayed through their liberality. But with the assistance of a few gentlemen—the Rev. Mr. Burnall, of Wapping, the Rev. Mr. Ather-ton, and others—a committee was formed, and funds were raised which soon enabled them to increase the benefits of the institution and open thirty-seven beds, and now a large new hospital is about to be commenced. How Mr. and Mrs. Heckford toiled for the welfare of their little hospital, how they devoted themselves to the physical and moral well-being of the neighbourhood, the writer can bear the warmest testimony from frequent association with them.

The graphic pen of the late Charles Dickens has well and truthfully depicted the little hospital. His visit made a deep impression on him, which he attempted in some measure to reflect on in an article "The Small Star in the East," an interesting narrative published in *All the Year Round* of December 19th, 1868. His impression of Heckford was very striking and faithful. He says:—"An affecting play was acted in Paris years ago, called *The Children's Doctor*. As I parted from my Children's Doctor now in question, I saw in his easy black necktie, in his loose-buttoned black frock coat, in his pensive face, in the flow of his dark hair, in his eyelashes, in the very turn of his moustache, the exact realisation of the Paris artist's ideal as it was presented on the stage. But no romancer that I know of, has had the boldness to prefigure the life and home of this young husband and young wife, in the Children's Hospital in the East of London."

It is not too much to say that Heckford's labours there laid the foundation of that pulmonary disease which two brief visits to Italy, shortened by his intense love of his hospital only, relieved for a time, and which eventually carried him off suddenly. His remains were followed to the Woking Cemetery by crowds of the poor of Ratcliffe, who had good and substantial cause for sorrowing for their departed friend.

Although Mr. Heckford devoted most of his time to his hospital, he yet found spare moments to add to the literature of his profession, and latterly acted as Secretary to the Beaumont Society. He revived with gratifying, although partial success, the operation of paracentesis capitis in hydrocephalus, published several papers of merit mostly in the *London Hospital Reports*, and, jointly with Dr. Woodman, one on the Wapping Cholera Hospital.

It is characteristic of the man that he devoted fees obtained from private patients to the use of the Children's Hospital, having a strong objection to practising for money. He had consulting-rooms for a short time in Broad Street; and for some time before his death he lived in a retired nook in Essex, surrounded by, and keenly interested in, a perfect menagerie of animals. He continued to act as Surgeon to the Hospital, and Mrs. Heckford as a member of committee, until quite recently. A man of high aspirations, of noble impulses, straightforward in his dealings, alike with everyone, whether rich or poor, and truly charitable, Heckford's memory will not be easily effaced.

MEDICAL NEWS.

APOTHECARIES' HALL.—The following gentlemen passed their examination in the science and practice of medicine, and received certificates to practise, on Thursday, December 28th, 1871.

Bower, Augustus Edward, Nantwich
Edwards, John Ellis, Aberdare

The following gentlemen also on the same day passed their first professional examination.

Charlesworth, Henry, Middlesex Hospital
Cooke, John, London Hospital
Whately, George Frederick, Middlesex Hospital
Wright, John Frederick, Middlesex Hospital

MEDICAL VACANCIES.

The following vacancies are announced:—

AXBRIDGE UNION, Somersetshire—Medical Officer and Public Vaccinator for District No. 11: £60 per annum, and extra fees.

CANCER HOSPITAL, Brompton—Resident House-Surgeon: £52:10 per annum, board and residence.

CLAREMORRIS UNION, co. Mayo—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Ballindine Dispensary District: £100 per annum, and fees.

COOTEHILL UNION, co. Cavan—Medical Officer for the Drum Dispensary District: £85 per annum, and fees.

DARLINGTON HOSPITAL and DISPENSARY—Resident Medical Officer: £110 per annum, apartments, attendance, firing, and gas.

EAST LONDON HOSPITAL FOR CHILDREN and DISPENSARY FOR WOMEN—Surgeon.

EAST SUSSEX, HASTINGS, and ST. LEONARD'S INFIRMARY—Assistant-Surgeon.

HARRIS, Inverness-shire, Parish of—Medical Officer.

KILMUIR, Skye—Medical Officer: £140 per annum, house and enclosure.

LANCASHIRE LUNATIC ASYLUM, Prestwich—Medical Superintendent: £600 per annum, house (partially furnished, and free of rates and taxes), coal, gas, and washing.

LOYAL UNITED BRETHREN BENEFIT SOCIETY—Surgeon and Apothecary: £40 per annum.

MIDDLESEX COUNTY LUNATIC ASYLUM, Hanwell—Medical Superintendent of the Female Department: £600 per annum, furnished house, rates and taxes free, coal and gas.

MIDDLESEX HOSPITAL—Resident Obstetric Physicians' Assistant.

MULLINGAR UNION, co. Westmeath—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Multyfarnham Dispensary District: £100 per annum, and fees.

NORTH BIERLEY UNION, Yorkshire—Medical Officer for the Drighlington and Tong District: £20 per annum.

NORTH MAVINE and DELTING, Shetland, Parishes of—Medical Officer.

NORTH WALES COUNTIES LUNATIC ASYLUM, Denbigh—Assistant Medical Officer: £80 per annum to commence, rooms, board, and washing.

PETERBOROUGH UNION—Medical Officer for the Castor District.

POCKLINGTON UNION, Yorkshire—Medical Officer for the Pocklington No. 2 District: £40 per annum, and extra fees.

PORTLAND TOWN DISPENSARY, Henry Street, St. John's Wood—House-Surgeon.

QUEEN'S UNIVERSITY, Ireland—Professor of Chemistry, Queen's College, Cork.

ROYAL CORNWALL INFIRMARY, Truro—House-Surgeon, Secretary, and Dispenser: £120 per annum (rising £10 per annum for three years), furnished apartments, firing, gas, and attendance.

ROYAL UNITED HOSPITAL, Bath—Resident Medical Officer.

ST. THOMAS'S HOSPITAL—Surgical Registrar.

SUNDERLAND INFIRMARY—Junior House-Surgeon: £60 per annum, board, lodging, and washing.

THINGOE UNION, Suffolk—Medical Officer and Public Vaccinator for District No. 8: £13:18 per annum, and extra fees.

THOMASTOWN UNION, co. Kilkenny—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Knocktopher Dispensary District: £95 per annum, and fees.

WEST HAM UNION, Essex—Medical Officer for the West Ham No. 2 District: £80 per annum.

WEST RIDING LUNATIC ASYLUM, Wakefield—Clinical Assistant.

WHITECHAPEL UNION—Medical Officer for District No. 4.

MEDICAL APPOINTMENTS.

Names marked with an asterisk are those of Members of the Association.

*BAGSHAW, Frederic, M.A., M.D., elected Assistant-Physician to the East Sussex, Hastings, and St. Leonard's Infirmary.

BARRY, Robert, L.R.C.S.Irel., appointed Resident Medical Officer to the City Dispensaries, Limerick, *vice* Michael Kennedy, L.R.C.P. Edin., resigned.

BRAYE, Hardwick Hubert, Esq., appointed Medical Officer of the Fourth District of the Whitechapel Union, *vice* Edward Richardson, M.D., deceased.

*POLLARD, Fredk., M.D., appointed Medical Registrar to St. Thomas's Hospital.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths, is 3s. 6d., which should be forwarded in stamps with the communication.

BIRTHS.

BROWNE.—On December 27th, 1871, the wife of Thomas Browne, M.D., Her Majesty's Dockyard, Devonport, of a daughter.

PERKINS.—On December 30th, 1871, at Hendon, Middlesex, the wife of John Robert Perkins, Esq., of a son.

OPERATION DAYS AT THE HOSPITALS.

MONDAY Metropolitan Free, 2 P.M.—St. Mark's, 1.30 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.

TUESDAY Guy's, 1.30 P.M.—Westminster, 2 P.M.—National Orthopaedic, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Free, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.

WEDNESDAY .. St. Bartholomew's, 1.30 P.M.—St. Mary's, 1.30 P.M.—Middlesex, 1 P.M.—University College, 2 P.M.—St. Thomas's, 2 P.M.—London, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Great Northern, 2 P.M.—Samaritan Free Hospital for Women and Children, 2.30 P.M.—Cancer Hospital, Brompton, 3 P.M.—King's College, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.

THURSDAY ... St. George's, 1 P.M.—Central London Ophthalmic, 1 P.M.—Royal Orthopaedic, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Hospital for Diseases of the Throat, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.

FRIDAY Royal Westminster Ophthalmic, 1.30 P.M.—Royal London Ophthalmic, 11 A.M.—Central London Ophthalmic, 2 P.M.—Royal South London Ophthalmic Hospital, 2 P.M.

SATURDAY ... 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, 2 P.M.—East London Hospital for Children, 2 P.M.—Hospital for Women, 9.30 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.

MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

MONDAY.—Medical Society of London, 8 P.M. First Lettsomian Lecture, by Dr. Habershon: "The Liver and its Nerves."

TUESDAY.—Royal Medical and Chirurgical Society, 8.30 P.M. Dr. Wm. Ogle, "Complete Recovery after Removal of a Cervical Vertebra"; Dr. John Ogle and Mr. Henry Lee, "Case of Tracheotomy: detachment of Tube from its Shield, and escape into Trachea: removal by Second Operation Fourteen Months afterwards."

WEDNESDAY.—Hunterian Society, 7 P.M.: Council Meeting, for the nomination of Officers and other business. 8 P.M.: Dr. Herbert Davies, "On some Cases of Continued Fever treated by the External Application of Cold."—Epidemiological Society, 8 P.M. Dr. James Christie (Physician to the Sultan of Zanzibar), "On Kidinga Pepo; a peculiar form of Exanthematous Disease recently epidemic in Zanzibar."

FRIDAY.—Clinical Society of London, 8.30 P.M. Dr. Ogle, "On the Temperature in certain affections of the Nervous System, but especially in Tetanus"; Mr. R. Brudenell Carter, "Case of Paralysis of External Rectus cured by Iodide of Potassium, Paralysis, and Operations"; Mr. Cooper Forster, "Case of Popliteal Aneurism, with Remarks on Treatment."

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.

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

TO PURCHASERS.—To insure attention, it is requested that all orders sent to the Office for extra copies of the JOURNAL, be accompanied with *halfpenny* stamps for the amount.

WE CANNOT UNDERTAKE TO RETURN MANUSCRIPTS NOT USED.

FOR replies to questions concerning Poor-law medical questions, see Poor-law Medical Department, under charge of Mr. Benson Baker, London, and Dr. Maunsell, Dublin.

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

A. B.—Either Rolleston's or Nicholson's *Treatises*.

MR. TAYLOR'S and MR. BARRETT'S wishes shall have attention.

J. G.—The Shropshire Tariff of Fees may, in such a case, be accepted as a minimum standard.

DR. ELLIOTT (Hull).—Many thanks.

VARIOLA (Plymouth).—The works of John of Arden are in the Library of the College of Surgeons. John of Gaddesden, Physician to Edward II, directed his patients to be wrapped up in scarlet dresses; and he says that, "when the son of the renowned king lay sick of the small-pox, I took care that everything around the bed should be of a red colour: which succeeded so completely, that the prince was restored to perfect health without a vestige of a pustule remaining." Avicenna contended that red bodies moved the blood. Everything of a red colour was employed in these cases.

We are very sorry that Mr. Gant takes the criticism of his book in bad part: and, as he particularly wishes us to announce that he now in consequence resigns his membership of the Association, we shall not refuse to do so, much as we regret it for his own sake. We observe that the opinions expressed in the review are amply supported by the *Edinburgh Medical Journal*, one of the ablest and most independent organs of medical criticism.

The Royal Medical and Chirurgical Society never intended its election of a member to be advertised by paragraphs such as that which announces in the *Lincoln Gazette*, that Dr. O'Neill "is the only physician in the county on whom this has been conferred", and that "its Fellows are the *élite* of the profession". Both statements are misleading, and it must be hoped that Dr. O'Neill has nothing to do with their publication.

The *Liverpool Porcupine* does not agree with Dr. Skinner's strictures published in a recent number of this JOURNAL, on Drs. Parkes and Sanderson's Report; and makes some very prickly comments upon his letter.

COMMUNICATIONS, enclosing subscriptions to the Journal, have been received from the following members of the profession. A large number of these have also asked for forms of application for membership of the Association, which have been forwarded.

Dr. J. Morris, London; Dr. J. W. Miller, Dundee; Mr. E. P. Edwards, Llanfyll, Holyhead; Mr. W. H. Denham, Southsea; Mr. J. A. Mac Donagh, London; Mr. W. B. Rainey, Hogsthorpe; Mr. C. Bevis, London; Sir H. Holland, London; Dr. Arthur Farre, London; Mr. W. C. Musson, Clitheroe; Mr. D. P. Evans, Belper; Mr. A. E. Barrett, King's Lynn; Dr. F. Harris, London; Mr. G. Macdonald, Markwick; Mr. J. J. Bunch, Wolverhampton; Dr. W. Bodkin, Chelmsford; Mr. J. B. Marshall, London; Mr. J. Cross, Stoke, Devonport; Mr. J. C. Douglas, Greenock; Mr. R. Ryder, Dalston; Mr. C. Hunter, London; Dr. W. B. Hunter, Forres; Mr. W. Moorman, St. Columb; Mr. J. W. Morison, Pembroke; Mr. C. J. Meteyard, Clunbury; Mr. C. J. Morris, Edmonton; Mr. P. Campbell, Bridge of Allan; Mr. W. Cox, Winchcombe; Dr. W. Mac Fadyen, Alva; Mr. L. Oppenheim, London; Dr. J. Kennedy, Clie; Mr. H. Churchill, London; Mr. W. Rosser, Perth; Mr. J. Arthur, Henley-in-Arden; Mr. F. H. Ward, Tooting; Dr. A. Evans, Belper; Mr. A. E. Jones, Bromley; Dr. Campbell, Manly; Mr. A. C. Reade, Chester; Dr. Rayner, Malvern; Dr. Walsh, Buttevant; Dr. P. M. Deas, Caclesfield; Dr. J. Dawson, Yarmouth; Dr. Fitzsimon, Basingstoke; Dr. Horniblow, Writtle; Mr. Ludlow, Hinchley; Dr. Madden, Exbourne; Dr. Hamilton, Windermere; Dr. Wood, Douglas; Mr. P. Ray, London; Mr. Byerley, Seacombe; Dr. A. Rabagliati, Bradford; Dr. Cleland, Galway; Dr. O. Richards, Bala; Mr. A. A. Beardsley, Grange-over-Sands; Mr. W. Leigh, Chiswick; Mr. H. Robinson, Chesterfield; Dr. J. C. Robertson, Monaghan; Mr. A. Henderson, Malvern; Dr. Swayne, Carrick-on-Shannon; Mr. G. E. Barron, Hollymount; Mr. J. Elmes, Limerick; Mr. J. R. Perkins, Hendon; Dr. F. Flint, Norwich; Mr. J. B. Hislop, Glasgow; Dr. T. H. Keown, Belfast; Dr. Frodsham, Streatham; Mr. W. L. Denzielo, West Allington, Bridport; Mr. W. House, New Swindon; Mr. R. Plowman, Coventry; Mr. R. G. Long, Stalbridge; Mr. J. C. Douglas, Greenock; Mr. R. Craig, Kilmichael; Mr. W. Johnson, Shenstone; Dr. J. Compson, Leicester.

We are indebted to correspondents for the following periodicals, containing news, reports, and other matters of medical interest:—The *Lincoln Gazette*, Dec. 23rd; The *Liverpool Weekly Albion*, Dec. 30th; The *Scotsman*, Dec. 26th; The *Harrogate Herald* and *Weekly List of Visitors*, Dec. 27th; The *Scarborough Express*, Dec. 30th; The *Brighton Daily News*, Jan. 2nd; etc.

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

Dr. Murchison, London; Mr. Bartlett, Birmingham; Dr. Maudsley, London; Dr. Wilks, London; Dr. Shapter, Exeter; Colonel Miller, Exeter; Mr. Francis Mason, London; Dr. Brunton, London; Dr. J. H. Aveling, London; Dr. B. W. Foster, Birmingham; Mr. Sydney Jones, London; M.D. Edin.; Mr. Furneaux Jordan, Birmingham; Dr. Tilt, London; Dr. Paul, London; Mr. C. Hunter, London; Mr. Spencer Smith, London; Mr. Durham, London; Mr. Paine, London; Mr. Greenway, Plymouth; Mr. Beck, Sandringham; Dr. Falconer, Bath; Dr. Wynn Williams, London; Dr. Brabazon, Bath; Dr. A. White, Sevenoaks; A Member; Mr. Bradley, Blackheath; Mr. W. Lattey, Rugby; The Librarian of the Middlesex Hospital; Dr. Corfield, London; Mr. Sargeant, London; Our Liverpool Correspondent; Dr. Aldis, London; Mr. H. Harvey, Liverpool; The Editor of the *Medical Directory*, London; Mr. Rooke Pennington, Bolton-le-Moors; Dr. Stanley Haynes, Malvern; Dr. Waldenburg, Berlin; Mr. Henry Grace, Downend; Dr. Mackintosh, Callington; Dr. Barclay, Banff; The Editor of the *Medical Directory*, Birmingham; Dr. Athill, Dublin; Mr. B. Wilson, London; Dr. Batty Tuke, Cupar, Fife; Dr. Foley, Stamford; Mr. Skeg, London; The Registrar-General of England; The Secretary of Apothecaries' Hall; The Registrar-General of Ireland; Mr. T. M. Stone, London; The Registrar of the Medical Society of London; Dr. H. Davies, London; The Secretary of the Royal College of Physicians; Dr. D. Toler T. Maunsell, Dublin; The Secretary of the Hunterian Society; Mr. Perkins, Hendon; Dr. Waters, Liverpool; The Secretary of the Epidemiological Society; Dr. G. F. Elliott, Hull; The Secretary of the Clinical Society; Dr. Morton, Glasgow; Mr. Moore, Reading; Mr. Taylor, Corfe; Mr. Townshend, Weston-super-Mare; Mr. A. M. Barrett, London; The Secretary of the Royal Medical and Chirurgical Society; Mr. J. Rawlings, Hartlepool; Mr. E. Noble Smith, Paddockhurst; Mr. J. Godwin, Twyford; An Associate; Mr. Mitchell, London; Mr. S. R. Henson, Grimsby; Our Dublin Correspondent; Mr. E. F. Fussell, Brighton; Mr. G. Keverne, Helston; Dr. W. Mac Cormac, London; Mr. Waterhouse, Bolton; Mr. James, Leeds; Dr. Leared, London; Dr. Bagshawe, St. Leonard's; Mr. G. E. Bearpark, Leeds; Rev. Dr. Haughton, Dublin; Dr. R. H. Supple, Collon; Mr. Hoare, Maidstone; Mr. Procter, Shiffnal; Mr. Worthington, Worthing; Dr. Walker, Sandown; Mr. Bradley, Manchester; etc.

BOOKS, ETC., RECEIVED.

The Fourth Annual Report of the Doncaster General Infirmary and Dispensary for the year 1870-71. Also, the Third Annual Report of the Scholfield Convalescent Fund. Doncaster: 1871.

The Power above Matter. An Address read before the Hunterian Society, on the 11th October 1871. By Dennis de Berdt Howell. London: 1871.

The Reflecting Media of the Atmosphere; a Natural Law: etc. By James Shaw, L.R.C.P.E. London and Manchester: 1871.

The Prince of Wales and Sanitary Reform. "An Englishman's House is his Castle." Not now. Why? By Captain Flower. London: 1871.

Recollections of Past Life. By Sir Henry Holland, Bart., M.D., F.R.S., D.C.L. London: 1871.