

lungs and air-passages—after twenty-five years' experience of medication by inhalation, we remain the merest barbarians, everyone breathing after his neighbour, and through the same instrument. Mark the word, breathing! These remarks do not apply to such inhalers as those which are extemporised out of a bedroom towel, lint, flannel, sponge, and the like, all of which are readily renewable, or easily washed clean. My own apparatus is simple, and being supplied with two or more flannel covers, there is no excuse for using it to two persons in succession without a perfectly clean inhaler each time. In conclusion, although I have no belief that ether will ever supplant chloroform in this country, yet, for the benefit of those of my *confrères* who have come to the conclusion that ether is safer and better, and also because it sometimes occurs to me that some patients will take ether when they will not take chloroform (thanks to the present and oft repeated raids upon the agent, with the same old, oft-repeated arguments), and lastly, because I believe that there are certain nervously constituted individuals, and patients with decidedly weak circulations, to whom it is safer to administer ether than chloroform, I have adapted my chloroform-inhaler to suit etherisation as well, and I am happy to add that it has proved to be all I could desire. I shall soon give a detailed account of it, and state where it can be procured.

It is to be hoped, that the broad hint which I have here given about the repulsiveness and disgusting nature of the practice of permitting more than one patient to breathe through the same instrument, will be taken in the spirit in which it is meant, and be acted upon without requiring repetition. If I have used strong language, or dwelt upon the subject, it is simply because I feel deeply the necessity there is for speaking plainly and impressively, in consequence of the length of time the practice has stood without rebuke, and because of the large amount of money invested in the same, both elements rendering the practice all the more difficult to alter or eradicate.

ASSOCIATION INTELLIGENCE.

COMMITTEE OF COUNCIL: NOTICE OF MEETING.

A MEETING of the Committee of Council will be held on Wednesday, the 9th day of April next, at the Office of the Association, 37, Great Queen Street, London, at 3 o'clock in the afternoon.

FRANCIS FOWKE, *General Secretary*.

37, Great Queen Street, 28th March, 1873.

WEST SOMERSET BRANCH.

THE spring meeting is appointed to be held at the Royal Clarence Hotel, Bridgwater, on Thursday, April 3rd, at 5.15 P.M.

The following question will be discussed after dinner:—"What is the best plan of preventing the spread of infectious and contagious diseases, having special reference to Dr. Budd's mode of treatment by camphorated oil and baths?"

Gentlemen who intend to be present at dinner, or who may have communications for the meeting, are requested to send notice thereof to the Secretary.

W. M. KELLY, M.D., *Honorary Secretary*.

Taunton, March 11th, 1873.

METROPOLITAN COUNTIES BRANCH: ORDINARY MEETING.

AN ordinary meeting of the Metropolitan Counties Branch was held at 11, Chandos Street, Cavendish Square, on Wednesday, March 12th, at 8 P.M.; Sir WILLIAM FERGUSSON, Bart., President, in the Chair.

Instruction, Examination, and Registration of Midwives.—Dr. J. H. AVELING read a paper on this subject. It was published at page 308 of the JOURNAL for March 22nd.

The PRESIDENT thanked Dr. Aveling in the name of the meeting for his paper. The subject was one of much importance; and he was specially interested in hearing opinions on it, as he would have to deal with it in another place.—Dr. BARNES said that the subject was one which required a good deal of ventilation. There was no ground to fear that midwives would supplant medical men; for the medical profession would have the supremacy. At the Royal Maternity Charity, the midwives, as a rule, handed down their calling from generation to generation; and in some cases the women supported their husbands. To come to the real point, there must be midwives; no power on earth could abolish them. The general practitioner could not attend to all the cases of labour, both because of the amount of work, and because of

the limitation of the supply of practitioners through the stringent regulations of the examining boards. And if midwives must be tolerated, they must also be properly instructed, registered, and supervised. The late J. G. Crosse of Norwich said that midwives must be educated better and abused less. With regard to their education, it would not do to at once import the practice of foreign countries. The practice in Germany was based on the establishment of lying-in hospitals on a large scale, in which instruction was given up to a certain point. Domestic teaching in midwifery was what was wanted; though elementary midwifery was best taught in a hospital. He did not think that the machinery existed here for making large schools of midwifery; nor was it desirable that it should. As it was, the midwives were taught in the lying-in hospitals at the expense of the lives of the inmates. Lying-in hospitals must exist to a certain extent, and should be utilised; but their utility was limited. The plan followed at the Royal Maternity Charity, by which midwives were gradually instructed and tested by Dr. Hall Davis, might be extended. In this way a very efficient class was obtained, capable of managing ordinary labour, and knowing when to call in the aid of an obstetrician. Similar institutions should, he thought, be formed in all large towns. A diploma and some form of registration were necessary consequents on instruction. The initiative in the matter lay with the Medical Council, or the bodies connected with it. The corporations were to blame for not forcing the subject on the Council.—Mr. LORD said that his opinion would not be in accordance with that of others; but he thought that it was a mistake to bring the subject before the Branch. He did not think that so many women were attended by midwives as was supposed. There existed in every town a club or provident dispensary, where competent assistance might be obtained from members of the medical profession. He foresaw that if midwives were encouraged, the profits of the hard-working practitioners would be diminished. It was suggested to establish an army of midwives. Little by little their influence would be felt; and they would displace the medical practitioner. He could not believe that so much mischief was to be attributed to the existing midwives. If this great army of midwives were distributed through England, that would take place which he had observed in Spain; the regular practice of midwifery being taken from the general practitioners, who were called in in severe cases, they lost their familiarity with the practice. He thought that the members of the British Medical Association should not be foremost in the discussion of the subject now brought forward.—Mr. P. H. HOLLAND thought the question was one which the Branch could very rightly discuss; and he thanked the Council for having caused it to be brought forward. He knew that in Manchester fifty per cent. of labours were attended by women. Some of these midwives were pretty well taught; they could manage ordinary labours, and knew when to send for medical officers in cases of difficulty. But the practice was not confined to these trained midwives; there was a large number of ignorant women hanging on and professing to be hospital midwives. The midwives should be instructed. If every one could be made rich enough to pay a doctor, it would be well; but, as the matter stood, many went to midwives. He had suggested that the licence should be annual; but Dr. Aveling's proposal of constant supervision was better. He proposed the following resolution. "That the Council be requested to appoint a Midwifery Committee to inquire into and report upon the best means of instructing, licensing, registering, and controlling midwives."—Dr. EDMUNDS seconded the motion. He did not think that the medical profession feared the competition of women. Dr. William Farr had stated that he believed that a great majority of the poor of this country were without skilled attendance in their labours. The Female College did not exact a preliminary education, except from those who applied for certificates of special proficiency. The Committee had abstained from granting diplomas, in order to obey the law; and it was hoped that some steps would be taken for recognising the position of ladies educated in the college. Some of them were employed in the lying-in hospitals at Manchester and elsewhere. He thought that midwives of an useful kind were wanted.—Dr. TILT was much indebted to Mr. Lord for the candid expression of his opinion. He had made it plain that a certain number of the medical profession would say that, by training midwives, the bread would be snatched out of the mouths of medical men. He thought that the adoption of such measures as had been proposed would tend to raise the standard of our profession. A young practitioner might very well for a limited time attend labours for nothing or for a few shillings; but that men should settle down for life to practise cheap midwifery, was not calculated to be creditable. We must have educated midwives; it was absurd to say that a supply could be found in other countries, and not in England.—Dr. DRYSDALE said that in France the practice of midwifery was more satisfactory than in England. At the Maternité in Paris, from fifty to seventy

respectable females studied all the medical sciences and had lectures every day. He objected to the supervision proposed by Dr. Aveling; the women should make their own reputation.—Dr. FOTHERGILL had no objection to midwives, and would like to see them better educated; but he had never yet found a woman who had confidence in women in cases of emergency. He did not see how midwifery could be separated from general practice; and he agreed with Mr. Lord as to the danger of losing skill in practice.—Dr. HARRIS (of Madras) had been concerned in the education of midwives in India. He had seen many cases in which women were brought into the lying-in hospital in Madras, in consequence of the treatment which they received at the hands of the uneducated native midwives. In Madras, about twenty years ago, a class was instituted, of women who could read and write; they were taught at the bedside, and occasionally by lectures and examinations, and had opportunities of conducting labours. If, after some months, they were found on examination to be qualified, they were sent out to practise among the natives.—Dr. SHRIMPTON said that the education of midwives was well carried out in Paris. But here we must make use of the materials at hand, and have regard to the domestic tendencies of the English.—Dr. SNOW BECK would be glad if some practical result were arrived at. He did not think that a well educated body of midwives would encroach on the medical profession. The education should be given where every facility was afforded; viz., in lying-in institutions.—Dr. AVELING, in reply, said that he did not propose to form an army of midwives; it existed already, but it required to be regulated. He maintained that the midwives must be supervised in the same way as asylums and factories were supervised.

The proposal for the appointment of a Committee was then put to the vote and carried.

In connection with this discussion, we have been requested to publish the following letter.

24, Harley Street, Cavendish Square, March 15th, 1873.

My dear Dr. Aveling,—It was my intention to have made some remarks after your excellent paper, read at the last Metropolitan Branch meeting of the British Medical Association, on Midwives and their Instruction, proposed to be rendered compulsory by Legislative enactment; but I was urgently required elsewhere.

My opinion is quite in accordance with yours, that our poorer sisters are in large numbers sadly neglected, through their attendance in their confinements by incompetent self-styled midwives; the result of which is, that the mortality produced or injuries left by their rashness on the one hand, or by passiveness on the other hand, are frightful to contemplate. Having been engaged as Physician and Lecturer to the Royal Maternity Charity for thirty years past, I have been able to observe, and with great satisfaction, the good effects of teaching candidates carefully in all the duties of a midwife, ere they are appointed. By order of the Committee of that Charity, I have had from time to time, as vacancies have occurred, to deliver lectures in order to keep up our stock of midwives (at present forty-one in number). The respectability of the candidates is first guaranteed by sureties satisfactory to the Committee. I then give them two courses of lectures, between which they attend cases, of which they deliver to me reports in tabular form. At the end of the instruction, I submit them to examination, when those only I accept whose answers are satisfactory. In some years, I have had to reject two, three, or four out of twelve candidates. In this way we secure intelligent women, in whom we can repose trust for the safe delivery of our poor patients, and the certainty of their appealing in due time in all necessary cases to the physicians, or their district auxiliary surgeons. Our annual deliveries amount to upwards of 3,000 cases, all attended at the patients' homes, with the small mortality very rarely indeed exceeding 1 in 400 from all causes. In 1872, our deliveries were 3,666; our deaths 4, or 1 in 916, including one from phthisis. Such results speak well for the kind of attendance given to the poor lying-in women of this Charity, and furnish a strong contrast to the results of midwifery attendance by un instructed women.

As a specimen of such women, I may mention one instance of a middle-aged person, who came to my class for instruction, she having for some years practised midwifery after receiving, as she said, a few lessons. I found her wholly incapable of receiving instruction, and advised her, therefore, to change her occupation. She then said she had learnt from me sufficient to convince her that she must have sacrificed many lives; and she declared her intention for the future of relinquishing midwifery practice entirely. I am aware that some other institutions, as various hospitals, have on a smaller scale done good work in education of midwives, and also the recently organised school of midwifery in Great Portland Street. From these sources, as well as where we could spare from our supernumeraries, various country districts have been supplied with properly educated midwives. Nevertheless, many union patients and poor populations are still miser-

ably and cruelly neglected in the hour of their greatest trial; and some church lying-in charities have, although unknowingly, I believe, provided themselves with uneducated midwives. Two such women were rejected at a recent examination by the Obstetrical Society's Examining Board.

That your praiseworthy movement, fully endorsed by the profession, may, in the interest of humanity, meet with the entire success which it deserves, is the earnest wish of,

Yours very sincerely,

J. HALL DAVIS.

SOUTH EASTERN BRANCH: WEST KENT DISTRICT MEETING.

THE third meeting of the session 1872-73 was held at Gravesend on March 11th; JOHN CHRISTOPHER ARMSTRONG, Esq., in the Chair.

New Member.—Alfred Shewen, M.B., of Gravesend, was elected.

Communications.—1. *Starvation.*—Dr. CLAPTON of St. Thomas's Hospital read a paper on starvation, in which he showed that there were positive signs discoverable without information from the patient or friends. The tongue presented peculiar appearances, and the temperature was high.

2. *Cardiac Disturbance and Enlarged Liver.*—Mr. J. C. ARMSTRONG narrated a case of paroxysmal galloping heart and enormous tumefaction of the liver, terminating in ten days by a fecal evacuation of black colour. There were four attacks—viz., April and June 1869, September 1870, and July 1872. The last attack terminated in death on 7th August, probably owing to an intercurrent diphtheric affection. The disease was considered to be a functional affection of the ganglionic centres, probably an unusual manifestation of malaria.

3. *Pulmonary Embolism after Parturition.*—Dr. J. V. BELL narrated a case of pulmonary embolism occurring eight weeks after childbirth. The lady had suffered from oedema of the left lower extremity throughout gestation. The seizure consisted of collapse, extreme anxiety, imminent suffocation, and rapid feeble action of the heart (130-180). On the fifth day the pulse fell to 120, and a loud systolic murmur was detected to the right side of the heart's apex. The murmur gradually diminished, and ceased after a duration of fourteen days, whilst the pulse had fallen to 100. About this time oedema of the right upper extremity occurred, but did not last longer than a fortnight. The patient ultimately recovered. The case was considered to be one of phlegmasia alba dolens of the left lower extremity, followed by pulmonary embolism and venous embolism of the right upper extremity. The treatment consisted in the administration of brandy, ether, digitalis, and Virginian prune, with a beef-tea diet.

Dinner.—The members and visitors dined at the Old Falcon Hotel.

OBITUARY.

BENJAMIN HOBSON, M.B., M.R.C.P.

DR. HOBSON died, after a very brief illness, on the 16th of February, aged fifty-seven years. Having chosen medicine for his profession, he went through the usual course of study at University College, London, with great success. After taking his degree as M.B. of the University of London, in 1839, he went to China as a medical missionary, in connection with the London Missionary Society. He first had charge of a missionary hospital at Macao, afterwards at Hongkong, when that place became a British colony, and eventually at Canton, at each of which hospitals healing and Christian teaching were uniformly combined. At Canton, he succeeded in establishing a hospital in the face of the greatest difficulties and opposition, arising from the prejudices of the Chinese against foreigners. By slow degrees confidence was gained, opposition ceased, and patients came in large numbers, many from considerable distances round, whither the fame of the foreign doctor had reached.

The hospital at Canton was in full activity from 1848 till the close of 1856, when it was abruptly vacated in consequence of the rupture between the Chinese and British authorities. The report for that year shows that the average number of in-patients was 50, whilst the aggregate attendance was over 24,000. Nearly all the work of the hospital was attended to by Dr. Hobson himself, with little or no aid, except latterly, when a young Chinese, his pupil, was able to act as an assistant, and a medical friend, practising in Canton, kindly gave assistance by performing surgical operations.

Dr. Hobson prepared several medical works in Chinese. The first was on Physiology and General Anatomy, published in 1851. It contained numerous illustrations, taken from English works, done by the

LOCAL GOVERNMENT AND SANITARY DEPARTMENT.

THE PUBLIC HEALTH ACT.

HUNSLET.—The rural sanitary authority of the Hunslet Union have unanimously elected Mr. Nowell, of Woodlesford, surgeon, to be the medical officer of health to their district, comprising the townships of Middleton, Oulton-with-Woodlesford, Templenewsam, and Thorpe Stapleton. They have also elected Mr. W. Whitehead, of Oulton, to be the inspector of nuisances for the same district.

BOLTON.—Mr. Gregory, of Bolton, has been appointed Medical Officer of Health for the Rural Sanitary District of Bolton-le-Moors. The district is large and scattered, being of about 23,000 statute acres, with 16,000 inhabitants, and of a rateable value of £80,000. The salary is only £100 per annum, half to be paid by the Local Government Board. The appointment of medical officer to the urban district was eagerly contested, although the salary offered was only £200. The population is nearly 90,000, and the rateable value of property £270,000. Government aid was declined. Eleven candidates sent in testimonials; three local men, however, namely, Dr. Livy, Mr. R. Patrick, and Mr. F. Waterhouse, were selected, and requested to appear before the sanitary committee of the council, who subjected each to an examination as to his knowledge and views of sanitary matters. After this, Dr. Livy was appointed, winning the day by a majority of one. It is earnestly to be hoped, that a borough which can afford to spend £150,000 on a townhall, will give a better salary for the onerous duties required. From Dr. Ballard's report of the state of the town a few months ago, the amount of work to be done must be enormous, and although it is not required that the medical officer should give up private practice, every moment of his time must be occupied by his public duties, if they are to be done at all efficiently.

MEDICO-PARLIAMENTARY.

HOUSE OF COMMONS.—March 24th.

THE LOCAL GOVERNMENT BOARD.—Mr. Corrance asked the President of the Local Government Board, in consequence of a letter recently issued from the Local Government Board respecting the appointment of inspectors and health-officers, whether it was the intention of the Local Government Board to issue any general instructions to the local authorities concerning their appointments, indicating with greater precision the intention of the Local Government Board to disallow subventions or to prohibit certain appointments?—Mr. Stansfeld did not think it desirable to issue any particular instructions more precise than those which had been already issued on the subject of inspectors and health-officers. Their instructions were to consider each case on its own merits, and to spare neither time nor expense in order to arrive at a proper conclusion. If the honourable gentleman wished, the instructions issued would be produced.

MEDICAL NEWS.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—The following members were elected Fellows of the College, at a meeting of the Council, on March 13th.

Damant, Thomas William, L.S.A., Fakenham, Norfolk: diploma of membership dated June 1842.
Davies, William Joseph, L.S.A., Newport, Monmouthshire: November 1839.
Mathias, John Edward, Southport, Lancashire: May 1838.
Morris, John, L.S.A., Hereford: March 1837.
Rendle, William, L.S.A., Forest Hill: March 1838.

APOTHECARIES' HALL.—The following gentlemen passed their examination in the science and practice of medicine, and received certificates to practise, on Thursday, March 20th, 1873.

Couldrey, James, Abingdon, Berkshire
Finemore, James Harman, Plymouth, Devon
Kay, Hildreth, Upton Place, Commercial Road
Ley, John William, Lacey Street, Bow
Parry, Thomas Sharp, Mold, Flintshire

The following gentleman also on the same day passed his primary professional examination.

Clift, Martin Luther, St. Bartholomew's Hospital

MEDICAL VACANCIES.

The following vacancies are announced:—

ABERFOYLE, Perthshire—Parochial Medical Officer: £90 per annum. Applications to H. R. B. Peile, Esq., Catter House, Drymen, by Glasgow.
ABINGDON, Bradfield, Cookham, Easthampstead, Hungerford, Newbury, Wallingford, and Windsor Rural Sanitary District, and Abingdon, Maidenhead, Newbury, Speenhamland, and Wallingford Urban Sanitary Districts, combined—Medical Officer of Health: £750 per annum. Applications to J. S. Bowles, Esq., Milton Hill, Steventon.
ABINGDON UNION—Medical Officer and Public Vaccinator for District No. 5: £100 per annum.
BELPER RURAL SANITARY DISTRICT—Two Medical Officers of Health: £150 per annum each.
BRACKLEY, Brixworth, Daventry, Hardingstone, Kettering, Market Harborough, Newport Pagnell, Northampton, Oundle, Potterspury, Thrapstone, Wellingborough, Towcester, and Uppingham Rural Sanitary Districts, and Daventry, Northampton, and Oundle Urban Sanitary Districts, combined—Medical Officer of Health: £800 per annum. Applications to W. Tomalin, Esq., Northampton.
CARMARTHEN INFIRMARY—House-Surgeon: £100 per annum, lodging, coal, and candles. Applications to H. Howell, Secretary.
CHESTERFIELD RURAL SANITARY DISTRICT—Medical Officer of Health: £550 per annum. Applications to George Haslehurst, Esq.
CLITHEROE UNION, Lancashire—Medical Officer for the new Workhouse and Infirmary: £20 per annum.
COCKERMOUTH RURAL, and Cockermouth, Keswick, and Workington Urban Sanitary Districts—Medical Officer of Health: £400 per annum.
COLCHESTER URBAN SANITARY DISTRICT—Medical Officer of Health: £150 per annum.
CRIECH, Fifehire—Parochial Medical Officer and Public Vaccinator.
DONEGAL COUNTY LUNATIC ASYLUM, Letterkenny—Physician: £100 per annum. Applications to Charles J. McMullen, Esq.
EAST PRESTON UNION, Sussex—Medical Officer for District No. 28.
EDINBURGH VETERINARY COLLEGE—Professor of Anatomy. Applications to Alex. Harris, Esq., City Chambers, Edinburgh.
FROME RURAL AND URBAN SANITARY DISTRICTS, combined—Medical Officer of Health: £200 per annum.
GALWAY UNION—Apothecary to the Workhouse and the Galway Dispensary: £70 and £30 per annum, and furnished apartments. Applications to Thomas Sack, Esq., Galway.
HARTLEPOOL UNION—Medical Officer and Public Vaccinator for the Greatham District: £30 per annum.
HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton—Two Resident Clinical Assistants.
KANTURK UNION, co. Cork—Apothecary to the Newmarket Dispensary: £40 per annum. Applications to G. Smith, Esq., The Cottage, Newmarket, co. Cork.
KELLS UNION, co. Meath—Medical Officer to the Workhouse and Fever Infirmary: £110 per annum.
KING'S COLLEGE, London—Professor of Anatomy.
LEEDS—Public Analyst: £200 per annum. Applications to C. A. Curwood Esq., Town Clerk.
LONDON FEVER HOSPITAL—Resident Medical Officer: £200 per annum, residence, coal, gas, and attendance.
MANCHESTER ROYAL EYE HOSPITAL—House-Surgeon and Secretary: £50 per annum, to commence, board, lodging, and washing.
MIDDLESEX COUNTY LUNATIC ASYLUM—Assistant Medical Officer: £150 per annum, board and residence. Applications to R. W. Partridge, Esq.
NOTTINGHAM DISPENSARY—Assistant Resident Surgeon: £140 per annum, furnished apartments, coal, and gas.
OWENS COLLEGE, Manchester—Practical Brackenbury Professorship of Physiology and Histology. Applications to J. G. Greenwood, Esq.
RADCLIFFE INFIRMARY, Oxford—Resident Dispenser: £80 per annum, board and washing.
ROYAL ACADEMY—Professor of Anatomy.
ST. HELENS (Lancashire) URBAN SANITARY DISTRICT—Medical Officer of Health: £200 for 12 months. Applications to H. Pilkington, Esq.
ST. MARY'S HOSPITAL, Quay Street, Manchester—Honorary Surgeon.
SALFORD URBAN SANITARY DISTRICT—Medical Officer of Health.
SUNDERLAND GENERAL INFIRMARY AND DISPENSARY—Junior House-Surgeon: £80 per annum, board, lodging, and washing.
SUSSEX COUNTY HOSPITAL, Brighton—Physician.
TYRRE, Parish of—Medical Officer for the New Pitsligo District.
WELLINGTON (Salop) URBAN SANITARY DISTRICT—Medical Officer of Health.
WESTMINSTER HOSPITAL—Surgeon.—Assistant-Surgeon.
WEST SUSSEX, etc., INFIRMARY, Chichester—House-Surgeon: £80 per annum, board, lodging, and washing.
WISBECH RURAL SANITARY DISTRICT—Medical Officer of Health: £160 per annum.
WOODBIDGE UNION, Suffolk—Medical Officer for District No. 4: £78 p. a.
WOOLWICH UNION—Medical Officer to the Workhouse.
WORCESTER AMALGAMATED FRIENDLY SOCIETIES MEDICAL ASSOCIATION—Medical Officer: £170 per annum, and residence. Applications to C. J. Richards, Esq., 5, Lansdowne Villas, Lansdowne Road, Worcester.

MEDICAL APPOINTMENTS.

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

FERGUSON, Daniel William, Esq., appointed Medical Officer, Public Vaccinator, and Registrar of Births and Deaths for the Newport District of the Howden Union, Yorkshire.

HAWKES, John, M.D., F.Z.S., Assistant Resident Physician to the Middlesex County Asylum at Hanwell, appointed Resident Medical Superintendent of Westbrooke House Asylum, Alton, Hants.

BIRTHS, MARRIAGES, AND DEATHS.

DEATHS.

DIX, Richard, Esq., Surgeon to the Derby Infirmary, at Long Buckby, Northamptonshire, on March 9th.

OPERATION DAYS AT THE HOSPITALS.

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

TUESDAYGuy's, 1.30 P.M.—Westminster, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.—West London, 3 P.M.—National Orthopaedic, 2 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, 1.30 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, 2 P.M.

SATURDAY....St. Bartholomew's, 1.30 P.M.—King's College, 1.30 P.M.—Charing Cross, 2 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.—St. Thomas's, 9.30 A.M.—Royal Free, 9 A.M. and 2 P.M.

MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

MONDAY.—Medical Society of London, 8 P.M. Dr. Farquharson, "On an Epidemic of Roseola or Spurious Measles"; Dr. Broadbent, "Cases"; Mr. Bryant, "Cases"; Mr. Maunders will show Cases of Excision; and other Communications.

TUESDAY.—Pathological Society of London, 8 P.M. Dr. Tilbury Fox: Parasitic Syphilis of the Chin—a living subject. Discussion on the Anatomical Relations of Pulmonary Phthisis to Tubercle of the Lungs. Specimens and Drawings of Tubercle will be exhibited by Dr. Moxon, Dr. Cayley, Dr. Lionel Beale, Dr. Bastian, Dr. Powell, Dr. Payne, Dr. Henry Green, Dr. Crisp, etc. The Microscopical Specimens will be open for inspection for half-an-hour before the meeting.

WEDNESDAY.—Obstetrical Society of London. 7.30 P.M.: Meeting of Council. 8 P.M.: Dr. Tilt, "On the Progress of Pelvic Pathology during the last Twenty-five Years"; Dr. Wiltshire, "On the common Skin-Diseases of Children"; and papers by Dr. Bantock and Mr. Roper.

THURSDAY.—Harveian Society of London, 8 P.M. Dr. Thomas Morton, "On Cases of Puerperal Septicæmia treated by Elimination."—Hunterian Society, 8 P.M. Dr. Clapton, "On the Action of Tea and Allied Substances, and on the effect of Tea-tasting"; Mr. Howell will exhibit an improved Tracheotome; Mr. Toulmin, "A Tumour of the Pericardium ulcerating into the Aorta"; Mr. Bryant, "Case of Complete Occlusion of the Rectum."

NOTICES TO CORRESPONDENTS.

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

WE CANNOT UNDERTAKE TO RETURN MANUSCRIPTS NOT USED.

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

COMMUNICATIONS respecting editorial matters should be addressed to the Editor; those concerning business matters, non-delivery of the JOURNAL, etc., should be addressed to the General Manager, at the Office, 37, Great Queen Street, W.C.

THE RECENT ARMY MEDICAL WARRANT.

SIR,—In an able article on the above, in your esteemed paper of March 15th, is the following sentence. "It is true that the option of claiming half-pay after twenty years has been made absolute, instead of depending on the decision of a Medical Board."

Now, I think you will find that, under the old Warrant, medical officers, of twenty years' service, could have made the same claims for half-pay. Medical officers of the relative rank of captain, after fifteen years' service, had 17s. 6d. a day under the old Warrant. Under the new Warrant, they have only 15s. a day. Forage, under the old Warrant, was granted to medical officers of the relative rank of major and upwards. Under the new Warrant, "forage shall be granted to officers of the Army Medical Department for such number of horses as are necessarily kept by them for duty." Allowance for forage for duty horses is no boon, but a right. Under the old Warrant, two medical officers did duty with a regiment, and could thus relieve one another, and consult on professional matters. Under the new Warrant, I fear, all this will be changed.

I am, etc.,

RAMBLER.

* We are indebted to "Rambler" for reminding us that the absolute right to retire after twenty years' service was granted by the Supplementary Warrant of 1867. Shorn of this novelty, Mr. Cardwell's new scheme literally does nothing to stimulate promotion, unless his confident statement in the House, and the withdrawal of the extra 2s. 6d. a day after fifteen years' service, indicate some future regulations to insure seniority after that period. It is true, that the redistribution of medical officers is causing wide-spread dissatisfaction throughout the service; but the general hospital system has been shown by recent events to be so absolutely necessary in war time, that its adoption during peace is clearly demanded—in part, at least—by the progress of the age.

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

THE WEST INDIES AS A FIELD FOR PRACTICE.

SIR,—Will you kindly permit me to ask whether any of my medical brethren will do me the favour of informing me what would be the prospects of a medical man seeking a practice or appointment in the West Indies? and also, what would be the proper steps to take in order to hear of or to obtain such?

March 1873.

I am, etc.,

M.D. CANTAB.

EQUINE CALCULI.—The *Aberdeen Daily Free Press* relates the particulars of a case of equine calculus. The animal, a carter's horse, 14 or 15 years of age, had evidently been a severe sufferer from stone, if that complaint had not been the cause of death. The number of completely formed stones found in the bladder, apart from what might be called mere "grounds", was one hundred and four. The largest of them weighed about half an ounce; and the weight of the whole quantity was three-quarters of a pound avoirdupois.

FAMILY HISTORY.

SIR,—Family history being often of great use and interest to the practitioner, and perhaps hardly less so to the patient, I would suggest the desirability of parents keeping a family register, in which they should enter everything relating to the health of their children—such as weight, colour of hair and eyes at birth; the course, duration, and peculiarities of the exanthemata and other diseases as they occurred. By some such plan, family history, now often inaccurate, might become a definite and reliable aid in diagnosis; the frequency of the exanthemata recurring in the same individual and other interesting points would be better understood; and, in course of time, a large addition would accrue to the laws of disease; whilst, if a note were taken of concurrent diseases of the lower animals, some light might be thrown upon the subject of comparative medicine.

I am, etc.,

Southam, March 3rd, 1873.

WALTER LATTEY.

ERYSIPELAS, ETC., AFTER VACCINATION.

SIR,—The suggestion of your correspondent the public vaccinator for Lanchester, that "all accidents occurring in vaccination should be recorded," however desirable, is probably quite impracticable; and, as nothing is so misleading as imperfect statistical records, the attempt to carry out the plan would probably do more harm than good. All experienced vaccinators are aware that erysipelas and pyæmia, in some rare exceptional cases, follow vaccination, just as occasionally happens after operations of the most trivial character, or as the result of a scratch of a pin or other slight injury. It is to be feared that sometimes these unfortunate accidents may have resulted from a want of due care. I have known blood-poisoning to be caused by using moist lymph stored in one of those most objectionable bottles with a tongue-like stopper on which the lymph is deposited, and frequently, especially in hot weather, as in the instance in question, becomes decomposed and produces all the effects of an animal poison.

I am, etc.,

A. B. STEELE,

Member of the National Vaccine Establishment.

PRIZE MEDAL OF THE BRITISH MEDICAL ASSOCIATION.

THE HASTINGS GOLD MEDAL, value Twenty Guineas, is offered annually by the British Medical Association as a Prize for an Essay on some subject connected with Medical Science. The subject selected for competition for 1873 is, "On the Pathology and Treatment of Ovarian Diseases"; and the award will be made at the Annual Meeting of the Association in that year. Essays must not be in the handwriting of the author. Each essay, which must not exceed in length twenty-four pages of the BRITISH MEDICAL JOURNAL, must be sent, under cover, with a sealed envelope bearing the motto of the essay and the name and address of the author, to the General Secretary of the Association, 37, Great Queen Street, on or before the 1st of May, 1873. The successful essay will be the property of the Association, and will be published in the BRITISH MEDICAL JOURNAL.

WE are indebted to correspondents for the following periodicals, containing news, reports, and other matters of medical interest:—The Liverpool Weekly Albion, March 22nd; The Manchester Guardian, March 26th; The Aberdeen Daily Free Press, March 22nd; The Bath Express, March 22nd; The Birmingham Daily Post, March 24th; The Constitution, or Cork Advertiser, March 21st; The Newcastle Daily Journal; The Eastern Morning News and Hull Advertiser; The North of England Advertiser; The Bedfordshire Times; etc.

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

Dr. C. B. Radcliffe, London; Dr. R. Liveing, London; Dr. T. Skinner, Liverpool; Mr. Haviland, London; Mr. T. H. Bartleet, Birmingham; Dr. George Johnson, London; Dr. Thomas Jones, London; Mr. Richard Davy, London; A Correspondent; Mr. J. W. Langmore, London; Dr. Smart, Penge; Our Dublin Correspondent; Dr. Althaus, London; Dr. J. W. Moore, Dublin; The Secretary of the Pathological Society; Dr. F. J. Brown, Rochester; Dr. Harris, Redruth; The Registrar-General of England; The Secretary of Apothecaries' Hall; The Registrar-General of Ireland; Mr. Wanklyn, London; The Registrar of the Medical Society of London; Mr. W. Fairlie Clarke, London; Dr. Bagshawe, St. Leonard's; Dr. W. Garstang, Blackburn; Medicus Rusticus; The Secretary of the Harveian Society; Dr. R. Barnes, London; The Secretary of the Hunterian Society; Mr. Warren Tay, London; Dr. Morell Mackenzie, London; Our Paris Correspondent; T. T. B.; Dr. McCrea, Belfast; Dr. Ransome, Manchester; An Associate; Mr. Eassie, London; Dr. Procter, York; Mr. F. W. Dix, Long Buckley; Mr. E. T. Payne, Bath; Mr. W. Lattey, Southam; Mr. Lawson Tait, Birmingham; Mr. J. S. Wilkinson, London; Dr. W. A. Hollis, London; Mr. J. Higham Hill, London; Mr. E. D. Tomlinson, Curragh; Mr. F. Warner, Guildford; Mr. Oglesby, Leeds; Mr. J. Hawkes, Hanwell; The Secretary of the Obstetrical Society; Dr. Ogston, Aberdeen; Dr. Bryan, Northampton; Mr. D. Kent Jones, Beaumaris; Mr. Wolff, London; Dr. De la Cour, London; Mr. O. K. Jones, Beaumaris; Mr. J. Hinton, Warminster; Dr. Sansom, London; Dr. Myrtle, Harrogate; Surgeon-Major Black, Cheltenham; Mr. J. H. Gornall, Warrington; Dr. J. S. Holden, Sudbury; etc.