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Miller, A. R. Assistant-Surgeon R.A.
Newport, Monmouth

Mewport, Monmouth
Moriarty, Thomas, M.D. Staff AssistantSurgeon Royal Army, Control Barracks, Woolwich

racks, Woolwich
Murray, John, M.D. Inspector-General
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Orton, J. W. R. Esq. Assistant-Surgeon
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General Royal Navy

General Royal Navy

General Royal Navy
Raby, J. L.R.C.P. Bombay Med. Service
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Inverness Skues, W. M. M. D. Staff-Surgeon Royal

Skues, W. M. A. A. Skues, W. M. Army Sloggett, William H. Esq. Staff-Surgeon Royal Navy, London Taylor, F. H. Esq. H.M.S. Devastation,

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lege, Calcutta (dead)
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Mary's Hall, Oxford
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New College, Oxford
Stokes, G. G. M.A. F.R.S. Professor of
Mathematics in the University, Cambridge
Virchow, Rudolph, M.D. Berlin

ASSOCIATION INTELLIGENCE,

SOUTH-EASTERN BRANCH: WEST KENT DISTRICT MEDICAL MEETING.

THE next meeting is appointed to be held at the Union House, Dartford, on Tuesday, May 13th, at 4.30 P.M.; RICHARD H. HUNTER, Esq., in the Chair.

Dinner will be provided at the Bull Hotel at 6 P.M.

Frederick James Brown, M.D., Honorary Secretary. Rochester, April 28th, 1873.

SOUTH-EASTERN BRANCH: EAST KENT DISTRICT MEDICAL MEETING.

THE annual meeting will be held at the Fountain Hotel, Canterbury, on Thursday, May 15th, 1873, at 3 o'clock; Mr. WILKS, of Ashford, in the Chair.

Dinner at 5 o'clock precisely. Charge 5s., exclusive of wine.

The following papers will be read at the meeting:—I. Dr. Parsons: "Case of Incarcerated Placenta." 2. Mr. Reid: "Induction of Premature Labour." 3. Mr. Rigden: "Is the appointment of Medical Officers of Health to Extensive Districts satisfactory to the Profession as being most conducive to the Public Health of the Inhabitants?'

Gentlemen who intend to be present at the dinner are particularly requested to inform me on or before Tuesday, the 13th instant:

CHARLES PARSONS, M.D., Honorary Secretary. 2, St. James's Street, Dover, April 30th, 1873.

SOUTH-EASTERN BRANCH: EAST SUSSEX DISTRICT MEDICAL MEETING.

THE next meeting of the above district will be held at the County Asylum, Hayward's Heath, on Friday, May 16th, at 3 o'clock; Dr. S. D. WILLIAMS in the Chair.

All members of the South-Eastern Branch are entitled to attend, and to introduce professional friends.

Dr. Williams will read a short paper, entitled "Remarks on the Diagnosis of General Paralysis of the Insane, illustrated by cases in the Asylum"; which also will be visited under his superintendence.

Dinner will be provided at the Station Hotel.

Notice of intended communications is requested at once by the Secretary.

THOMAS TROLLOPE, M.D. Cantab., Honorary District Secretary. 35, Marina, St. Leonard's-on-Sea, April 29th, 1873.

CAMBRIDGESHIRE AND HUNTINGDONSHIRE BRANCH.

THE annual meeting of the above Branch will be held at the Town Hall, Royston, on Friday, May 23rd, at 3 P.M.; D. B. BALDING, Esq., President, in the Chair.

The dinner will take place at the Bull Hotel, at 6 P.M. Tickets, 3s. each.

J. B. Bradbury, M.D., Honorary Secretary. 13s. each.

Corpus Buildings, Cambridge, April 19th, 1873.

WEST SOMERSET BRANCH: SPRING MEETING.

THE spring meeting of this Branch was held at the Royal Clarence Hotel, Bridgewater, on Thursday, April 3rd, at 5.15 P.M. Ten members were present. H. W. RANDOLPH, Esq., of Milverton, was voted to the Chair in the absence of the President.

Prevention of Infectious Disorders.—After dinner a discussion took place on the question-of which notice had been sent to each member-"What is the best plan of preventing the spread of infectious and contagious diseases, having special reference to Dr. W. Budd's mode of treatment by camphorated oil and baths?" The strongest testimony was borne to the almost certain efficacy of Dr. Budd's method, when duly carried out, in preventing the spread of scarlet fever; but, excepting in those diseases where a skin-eruption was present, the use of oil and baths was thought to be doubtful. It was objected by some that oiling a patient all over while the skin was throwing off a disease might interfere with the natural processes, and probably induce renal or other internal mischief; but to this it was answered that the use of hot baths would fully counteract any such risk. The addition of camphor to the oil was thought to have some special use in promoting disinfection by its action as an ozoniser; and similarly, iodine hung up over the patient's bed (mentioned to be the practice of some medical men), and the use of scents, as well as the ordinary disinfectants, all probably acted in an analogous manner by their influence in furthering the oxidation of the infecting medium, whatever that might be. Heat was spoken of as the most valuable and convenient of all modes for disinfecting woollen clothes and articles which could not be washed. A temperature of 300 deg. Fahr. should be employed, and that was easily managed by means of gas. Isolation was insisted upon as always to be had recourse to when practicable; and, above all, to breathe pure air and drink pure water were points to be aimed at, as not only conducing to prevent the spread of this class of diseases, but also to prevent their occurrence altogether.

Nitrite of Amyl.-Mr. W. A. HUNT read a paper illustrative of the use of nitrite of amyl to obviate faintness and to relieve asthmatic dyspnœa. A bottle of the liquid was exhibited, and the mode of administering it explained.

Inversion of the Uterus .- Mr. PRANKERD read notes of an interesting case of inversion of the uterus which occurred a week after parturition, and, having resisted ordinary modes of reduction, gradually gave way under the continued employment of an air-pessary.

BIRMINGHAM AND MIDLAND COUNTIES BRANCH: GENERAL MEETING.

THE sixth general meeting of the session 1872-73 was held at Birmingham on March 13th, 1873. Present: THOMAS EBBAGE, Esq., President, in the Chair, and fifty-four members.

New Members.—Dr. Spence (Burntwood), Dr. Haynes (Leamington), Dr. N. L. Bayles (Stourbridge), and Mr. Wheatcroft (Hednesford) were elected members of the Branch.

Dr. Fleming.—A letter was read from Dr. Fleming, regretting that the state of his health necessitated his declining the office of President of the Branch. It was resolved unanimously—"That the Branch deeply regrets that Dr. Fleming is compelled by ill health to decline the office of President of this Branch, but trusts that he may soon be restored to his public and private duties."

A Resolution of Sympathy with Dr. Keyworth in connection with an inquest at Witton was passed unanimously.

1. Scarlatina: Parotitis: Extension of Disease to Brain: Death.— Dr. Balthazar Foster related a case of scarlatina which proved fatal by extension of inflammation from the left parotid gland to the brain along the internal jugular vein. The patient was under five years of age, and had been admitted into the General Hospital with well marked scarlatinal rash and slight sore-throat. The case was complicated by severe bronchial catarrh, which, however, yielded to treatment; but on the fourth day after admission, parotitis of the left gland began, and was followed by a new crop of the rash. In the course of three days, the left parotid gland was so much enlarged, that the jaws could not be separated. The patient died on the eleventh day after admission, death being preceded by stupor and great exhaustion, but no convulsions. During the last day of life, the enlarged gland was reddish on the surface, but there was no fluctuation. There was no discharge from the ear and no albuminuria during life. The necropsy disclosed a healthy condition of the thoracic and abdominal viscera; the bronchial tubes were hyperæmic; the kidneys healthy to the naked eye and under the microscope. The parotid gland of the left side was found enlarged to four times its natural size; the central part was softened and broken down. The inflammatory mischief could be distinctly traced along the internal jugular vein, through the foramen jugulare to the under surface of the cerebellum. There was great thickening of the walls of the left lateral sinus and clotting in its cavity. The internal and middle ears were healthy and the Eustachian tubes. The tonsils were only superficially ulcerated. Dr. Foster exhibited the parts showing the course of the inflammation, and argued that the parotitis was due rather to the effect of the scarlatinal poison, than to extension of local mischief from the buccal cavity, as in some

2. Clot of Blood in Brain.—Mr. WHITCOMBE exhibited an organised clot of blood, weighing three ounces six drachms, of the shape of a kidney, which he found between the layers of the arachnoid membrane on the left hemisphere of the cerebrum of a patient, aged 52 years, who died in the Borough Lunatic Asylum on February 22nd, from phthisis. There were no symptoms of pressure for two months before death nor previously, so far as could be ascertained; and, with the exception of slight delirium for seven days, ending February 2nd, the faculties were clear. The delirium Mr. Whitcombe could not attribute to the presence of the tumour.

3. Excision of the Elbow.—Mr. John St. S. Wilders exhibited a patient whose elbow-joint had been excised. The man, aged 25, a plate-layer, was knocked down by a train on December 5th, 1872. On being admitted into the Queen's Hospital under Mr. Wilders's care, it was found that the left elbow-joint was totally disorganised; the skin was torn off the back of the upper and forearm for about two-thirds of their circumference from a part about five inches above the elbow-joint to three inches below it; the olecranon process and the condyles of the humerus were knocked off, and about two inches and a half of the shaft was split up and comminuted, and some of the muscles were torn and bleeding. Mr. Wilders sawed off the broken ends of the humerus and ulna, leaving a smooth surface, also the head of the radius, which had escaped injury. The edges of the skin were brought together as far as possible, and the arm was placed on a straight splint. It was kept in this position for a month, being dressed with carbolised oil once a week; at the end of that time it was bent to a right angle, the splint was removed, and the arm worn in a sling; skin-grafting was at the same time employed with great success. The wound is now nearly healed, and the patient will in a short time have an useful arm.

4. Calculus.—Mr. WILDERS exhibited a vesical calculus of the size and shape of an almond. The man had had lateral lithotomy performed three years ago, when a large stone was removed. Mr. Wilders operated by the median method. The man passed his urine per vias naturales on the day of operation, and on the thirteenth day he was walking about the ward. Mr. Wilders made some remarks in favour of the median operation.

5. Ulceration of Trachea after Tracheotomy.—Mr. Bennett May exhibited the trachea of a child, showing an erosive ulcer in its interior, which had terminated fatally by hæmorrhage after tracheotomy. The operation had been done for cedema of the glottis following the imbibition of boiling water. The trachea-tube was removed on the fifth day, and, on reintroducing it a few hours afterwards to relieve the dyspncea caused by the accumulation of mucus at the wound, a sudden gush of blood delayed the parts and destroyed the child. The ulcer due to the pressure of the tube was not above a line in depth, and appeared to have opened one of the anterior thyroid veins.

6. Medico-Legal Case.—Dr. James Thompson showed the lungs and heart of a child whose body had been found in a ditch near Leamington. The mother was waiting her trial at the next assizes at Warwick

under a charge of murder. The lungs floated together and separately, and weighed on removal 1,020 grains. The foramen ovale was closed by a delicate valve-like membrane.

7. Calculi without Symptoms.—Dr. THOMPSON showed nineteen calculi removed from the bladder of a man during a post mortem examination. The subject had shown no symptoms of calculous disease for two years before death. The calculi varied in size from a large bean to a small pea. One was broken in halves by intervesical violence.

8. Mr. Vose Solomon read a paper on some ophthalmic points of general interest to the profession.

At this meeting, according to the laws of the Branch, the officers and Council to be elected at the annual meeting were nominated.

SOUTH-EASTERN BRANCH: EAST KENT DISTRICT MEETING.

THE forty-seventh meeting was held at the Pavilion Hotel, Folkestone, on March 13th.

Disorders of the Genito-Urinary Organs. - Mr. TEEVAN read a paper on some common complaints of the genito-urinary organs. He commenced with the subject of irritable bladder, which was very common, and was usually caused by incipient stricture. The largest sized instrument might be passed into the bladder, and there might yet be incipient contraction, as the bulbous urethra was fully twice as capacious as the anterior part of the canal. The bougie à boule could alone detect the early stage of stricture, and a cure might generally be effected by the use of large olivary bougies. A specific injection had yet to be discovered for gonorrhea. He had lately been using the hydrastis Canadensis with great success. In order to cure a gleet, an accurate diagnosis was necessary. If there were contraction, gradual dilatation was indicated; but if there were no contraction, deep injections would effect a cure. Stricture of the urethra was nearly always caused by a long standing inflammation, of which gleet was the earliest sign. It ought to be the surgeon's aim to detect stricture in its incipiency, and this could only be done by using the bougie à boule. Pathologically speaking, there was no evidence to show that a stricture could ever be cured; and, whatever operation might be performed, a relapse was inevitable, if the bougie were not periodically used. The majority of strictures could be successfully treated by gradual dilatation with French elastic bougies. For the troubles attendant in an enlarged prostate there was no instrument like Mercier's beaked elastic catheter, for it was equally useful for the patient or the surgeon. The diagnosis of stone in the bladder was all-important. If a patient passed a few drops of blood attended with painful micturition, and if both were aggravated by exercise, a stone would nearly always be found. Every case of stone ought to be cut, unless there were clear and distinct in-dications for lithotrity. Mr. Teevan concluded his paper with some remarks on spermatorrhœa and impotence.

Paracentesis of the Chest. - Dr. Bowles related three cases of pleurisy in which paracentesis thoracis had been performed. The first case was complicated with an enormous abscess of the liver, which pushed up the diaphragm enough to give rise to the physical symptoms of pleuritic effusion, even before any pleurisy commenced. This, however, became marked on July 28th, 1872. On August 13th, the impediment to respiration was very great. There was complete dulness over the whole of the lung, except in the subclavian region; bronchial breathing and bronchophony could be heard over the whole back of the lung; and there was patchy, feeble breathing about the side and front. The heart's impulse was felt above as well as below the left nipple. On introducing a trocar, only about an ounce of blood escaped; the wound was closed. Two days later, the patient died. At the necropsy, the pleuræ were found adherent entirely at the back, and in patches at the sides; elsewhere the cavity was full of sero-purulent fluid. The trocar had entered a patch of adhesion of the size of a florin. The heart was pushed upwards by the enormous liver, and to the left by the fluid in the right pleura. The second case was one of neglected pleuritic effusion of right side, with symptoms simulating disease of the ribs or spine. The effusion had probably existed six months. All the usual remedies failed to be useful, and the chest was emptied of twelve ounces of a pale greenish, transparent serum. The patient recovered at once without discomfort. The third case was a very severe one of empyema after pleurisy of the left side. A pulsating tumour appeared below and to the left of the heart, precisely like an aneurism. The history of the case and the introduction of a grooved needle, however, proved its nature. Two and a half pints of thin pus were drawn off by an ordinary. nary trocar. For several days this had to be repeated. Air entered the cavity, false membrane was extracted from the cannula, and many

incidental troubles ensued; but, by the help of food and stimulants, the man made a very rapid recovery, and was now—fourteen years afterwards—strong and hearty. Dr. Bowles pointed out the advantages likely to arise from an early use of the aspirator in these cases.

BIRMINGHAM AND MIDLAND COUNTIES BRANCH: MICROSCOPICAL SECTION.

A MEETING of the Section took place in Queen's College, Birmingham, on April 15th, Dr. Wade, President, in the Chair.

Urinary Deposits.—Mr. MANBY read a paper on some of the rarer urinary deposits, and showed specimen slides of cystic oxide, dumbbell oxalate of lime, and hippuric acid. He considered that the principal clinical significance of the first-named deposit was, that a vesical calculus might be formed from it, but that, apart from such danger, cystinuria might continue without cause for anxiety. Schaur had found cystine in the livers of patients who had died from typhus; and there was a close resemblance between the chemical composition of cystine and of taurine. Cystinuria had a tendency to run in families. The crystals in the specimen were the characteristic six-sided tablets, but sometimes the crystalline form was that of a prism. He considered that the dumb-bell deposit of oxalate of lime arose from interference with crystallisation. Probably, the presence of ropy mucus, or mucoid flakes, would influence the process. The author showed an excellent specimen of hippuric acid, and stated that its occurrence as a urinary deposit had, as at present known, no clinical significance whatever. It was produced by eating prunes and bilberries, and had been found in very various pathological states.

Apparatus for Minute Injections.—Mr. W. J. FOSTER exhibited and explained the structure of an apparatus for the above purpose, and which he had constructed to act by means of compressed air, the materials being an air-tight bottle, two tubes of caoutchouc, and a hand-

compressor.

Sycosis and Microscopical Features.—Dr. CARTER read a paper on the sycosis-fungus, with illustrative specimens, in which the spores, sporidia, mycelium, and stroma of the microsporon mentagrophysis, were well-marked. He exhibited also a specimen of doubtful parasitic character, also taken from a case of sycosis, closely resembling that form of the disease in which the fungus developed in the substance of the hair, causing a local thickening, and subsequent bursting of the shaft, and then exhibiting a brush-like rim around its circumference of that part. Since no very distinct appearance of fungoid elements could be made out, he adopted the general opinion, that the appearances were the result of perverted nutrition of the hair.

Phosphate of Lime as an Urinary Deposit.—Dr. MACKEY read a short paper on this subject. As compared with the stellate and prismatic forms of the triple phosphate, the phosphate is known to be rare. The specimens shown were crystalline rods, and were obtained from the neutral urine of a man aged 26, in his average health, and under observation for two months, without any grave symptoms. Relief was given to some extent by tincture of perchloride of iron, and still more by benzoate of ammonia. A tendency to relapse during mental anxiety was

observed.

MIDLAND BRANCH: ORDINARY MEETING.

A MEETING of the Midland Branch of the Association was held in the Board Room of the General Hospital, Nottingham, on Friday, April 18th, at seven o'clock. The Chair was occupied by Dr. ROBERTSON, the President of the Branch. An interesting paper on the Pathology and Treatment of Uterine Flexions was read by Dr. Alfred Meadows. Physician-Accoucheur to St. Mary's Hospital. An interesting discussion followed the reading of the paper; and a cordial vote of thanks to Dr. Meadows was moved by Mr. G. E. Stanger, seconded by Mr. M. H. Higginbottom, and carried.

NORTHERN BRANCH: SPRING MEETING.

THE spring meeting of this Branch was held at the Athenæum, Sunderland, on Thursday, April 24th, 1873; Dr. W. H. DIXON, in the absence of the President, Charles Trotter, Esq., through indisposition, in the Chair.

Vote of Sympathy with the President.—It was moved by the CHAIR-MAN, seconded by Mr. W. GOWANS, and carried by acclamation—"The members of the Northern Branch of the British Medical Association, having heard of the recent illness of the President, beg to express their sincere sympathy with him, and their earnest hope that his health may soon be restored."

The CHAIRMAN delivered an address, which was chiefly occupied with a consideration of the Contagious Diseases Act, the Public Health Act, and the out-patient department of hospitals.

Mr. C. S. JEAFFRESON read a paper on a new instrument for measuring the Field of Vision, and exhibited it. The contrivance may also be used to determine the degree of astigmatism, the angular measurement of diplopia, and the sensitiveness of different parts of the retina. The instrument has been entered at the International Exhibition.

Dinner. -After the meeting, the members dined together at the Palatine Hotel.

SOUTH-EASTERN BRANCH: EAST SUSSEX DISTRICT MEETING.

THE first meeting of the above district for the present year was held on Friday, March 21st, at the Castle Hotel, Hastings; F. TICEHURST, Esq., in the Chair. Fifteen members and three visitors were present.

The Complications and Sequelæ of Measles. - Dr. BAGSHAWE read a paper on measles, its complications and sequelæ, showing that these latter are to be looked for exclusively in affections of the mucous tracts. He pointed out that every morbid poison has a definite manner of affecting the system, attacking definite tissues or organs; and that the morbid poison of measles, in its slightest form—that of rubeola sine catarrho-attacked the skin; while in the more ordinary form, the mucous lining of the mouth and air-passages became affected. normal march of the complaint depended upon the equilibrium being preserved between the two kinds of determination. That which spread itself on the skin ought in general to dominate; if, on the other hand, an undue flux to the mucous membrane prevailed, the result was inflammation of those membranes. In scarlatina, the skin, the tonsils, the lymphatic glandular system, and the kidneys were the proper recipients of the poison. In scarlatina, the redness was superficial and punctiform, and seemed to be seated between the epidermis and the corium. The inflammation occurred in the subcuticular network of lymphatics. In measles, the redness was duller, and was limited to elevated irregular patches; this, with the papular appearance and the ecchymoses or even hæmorrhages which often existed, denoted that the inflammation was in the vascular network of the skin. To show the effects of measles, two tables were drawn up-one of sixty cases taken from brief notes kept in the out-patient department of the Hospital for Sick Children in London; the other of twenty cases in dispensary or private practice. The first table showed the following complications in sixty cases: bronchitis, 19; ozæna, 1; tuberculosis of lung, 15; general cachexia and debility, 7; diarrhœa or stomatitis, 7; ophthalmia, 5; tubercle in brain (with paralysis), 1; otorrhœa, 5; suppurating glands in neck, 2; abscesses, 1. Of twenty cases seen in an earlier stage, eight had more than one complication, viz.: laryngitis, 7; broncho-pneumonia, 6; pleuritis (slight), 1; bronchitis, 3; congestion of brain, 1; pharyngitis, 1; diarrhœa, 4. Six had single complications; viz., laryngitis, 2; broncho-pneumonia, 2; bronchitis, 1; and diarrhœa 1. Tuberculosis of the lung was present in 2 cases; tubercular meningitis in 1; otorrhœa in 2; conjunctivitis in 1; cancrum oris in 1; and persistent jaundice in 1. In but one of these cases did an inflammation occur in a serous membrane, and that was slight. Albuminuria was rare in measles, and then seemed to be the result of mere congestion. Bronchitis and pneumonia formed the most frequent and most fatal complications of measles. The latter assumed the lobular form, and ran on to abscesses. Stomatitis and pharyngitis not unfrequently became ulcerative, or false membranes might be formed on the mucous surfaces, but ulcerations did not attack the Cancrum oris supervened only in cachectic subjects. Seven out of the twenty recent cases had laryngitis; in some of these there was false membrane. A very severe form of laryngitis had been met with, of which an instance was given. Within twenty-four hours of the first symptom laryngitis appeared. On the fourth day, a copious eruption came out. Broncho-pneumonia developed itself, the eruption receded, and death took place on the seventh day. In this case the rash persisted after death, and all the mucous surfaces were deeply injected. Next to pulmonary affections, intestinal congestions were most common. Fifteen out of sixty cases seen in out-patient practice were suffering from phthisis. In one class of cases, the irritant effect of the poison on the system would seem to result in the production of acute miliary tuberculosis. In a second class, the irritation of bronchial catarrh communicated itself to the bronchial glands, which underwent caseation; or unhealthy suppuration going on in bronchial abscesses led to caseous formations. Dr. Bagshawe regarded those authors as being in error who class measles and scarlatina together as alike tending to produce tuberculosis, and remarked that Dr. Hyde Salter found that a large number of patients suffering from spasmodic asthma dated their first attack and liability to this affection to the time of their recovery from measles.

Tumour in a Child.—Dr. TURNER showed a child with a large rapidly growing tumour in the neck.

Tubal Gestation.—Dr. Trollope showed a specimen of tubal gestation, fatal at or about the sixth week by rupture and profuse hæmorrhage. The cyst was about the size of a small pigeon's egg, situated one and a half inches from the uterine extremity of the left Fallopian tube, which was impervious from the cyst up to its entrance into the uterus. The uterus was lined with a fine membrana decidua. The patient was a stout fair woman, aged 36, a multipara, having had twelve pregnancies in thirteen years. She had, as usual in such cases, slight metrorrhagia from the time of supposed conception, and certain abnormal sensations referred to the site of the affected tube, feeling "as if something were forming or had burst in her inside." She survived the symptoms of rupture of the cyst (characterised by sudden violent pain and faintness) about sixteen hours.

Diseased Heart.—Dr. Trollope showed a diseased heart from a youth aged 17. The heart was enormously hypertrophied; it weighed sixteen ounces; the aortic orifice was much contracted; the valves were replaced by thick ossific deposits hanging down into the ventricle. Embolic wedges were found in the spleen, and smaller ones in the kidneys and liver, which was greatly enlarged. A small aneutism was found on the outer side of the left femoral artery, just below the crural arch; this contained ossific material similar to that in the aortic valves. Death had resulted from double pleuro-pneumonia. The lad had never had a regular attack of rheumatic fever. The disease was detected about fourteen months before death, but at that time it had given rise to no serious symptoms; and it was only four months before his admission into the Hastings Infirmary, and six months before his death, that he began to complain of shortness of breath, and rheumatic pains showed themselves in his arms and legs. There was no history of any severe strain or over-exertion.

Dry Cupping in Acute Laryngitis.—Dr. CUNNINGHAM mentioned a case in which a patient apparently in extremis from acute laryngitis was saved by dry cupping to the nape of the neck. Very large cups were applied and kept on some time, and free serous discharge ensued.

Phthisis.—Dr. HILL read notes of three cases of phthisis. Two occurred in the persons of father and son, aged 59 and 34 respectively; the third in a young lady still living, but in whom the disease was making rapid progress. The cause of death in the first two cases, and the rapid advancement in the third, seemed solely due to the absolute anorexia which existed.

New Members.—Mr. W. Campbell of Hastings, and Dr. John Johnson of Tunbridge Wells, were nominated as members of the Association and of the Branch.

The Next Meeting will be held in May at Hayward's Heath; Dr. Williams will be invited to take the chair.

Dinner subsequently took place at the Castle, under the presidency of Mr. F. Ticehurst,

REPORTS OF SOCIETIES.

MANCHESTER MEDICAL SOCIETY. WEDNESDAY, MARCH 5TH, 1873.

D. LLOYD ROBERTS, M.D., President, in the Chair.

Diseased Heart.—Mr. CULLINGWORTH showed the heart of a young married lady, aged 30, in whom a presystolic murmur had been audible during life. There was no rheumatic history. During the last six weeks there had been general dropsy, increasing dyspnœa, and a systolic murmur over the tricuspid valve. The patient died suddenly eight hours after her premature confinement. The heart weighed nine ounces. The mitral orifice was too small to admit the tip of the finger, and of the button-hole shape, lying at the bottom of a funnel-shaped pouch. The aortic valves were healthy. The left auricle was dilated and much hypertrophied. The right auricle and ventricle were greatly dilated, and the auriculo-ventricular opening admitted three fingers readily.

Renal Abscess opening into Colon.—Mr. STOCKS showed a specimen of an abscess commencing in the upper part of the substance of the left kidney, taking a direction forwards, and opening into the descending colon by two distinct orifices. The symptoms in the patient were simply those of irritable bladder alternating with retention of urine.

The pain was confined to the hypogastrium, perinæum, sacrum, and down the urethra and inside of the thighs. The abscess was not diagnosed before death.

Unusual Dislocation of the Shoulder-joint.—Mr. STOCKS mentioned a dislocation of the shoulder-joint of an unusual character in which, although the humerus was undoubtedly displaced, there was no flattening of the deltoid or undue prominence of the acromion process. The only distortion present was a hollow under the anterior edge of the acromion, causing the coracoid to be just visible to the eye, and a projection or bulging under the posterior edge of the former process, forming an exact reverse of the normal condition of the parts. He conjectured that the long head of the biceps had been dislocated from its natural position, arching over the head of the humerus, and having slipped anteriorly to that bone, prevented its return into the glenoid fossa, while the non-rupture of the subscapularis muscle kept it from slipping behind the neck of the scapula.

Cotton for Dressing Wounds .- Mr. LUND showed a sample of Dr. Von Brun's wound-dressing cotton. It is cotton-wool prepared by a special process, so as to deprive it of all greasy and resinous or gummy matters, and, unlike ordinary cotton-wool, it is very absorbent of water, and quickly becomes moistened throughout the whole mass when dipped into any liquid. It is, therefore found to be very useful as a packing around the edges of wounds to collect the serous or other discharges which might escape from them, or as a styptic to arrest hæmorrhage in the incisions for fistulæ, or for the use of dentists in their various manipulations on the teeth and gums. Mr. Lund also exhibited a form of respirator, naso-oral in form, which was lined with this cotton-wool, by which the air could be filtered. One disease to which he thought this cotton-wool respirator might be applicable, was hay-asthma with much coryza. He had repeatedly observed, where the morbid secretion of mucus from the nostrils was very excessive, that if the external orifices of these passages were lightly plugged with cotton-wool, the discharge very quickly ceased, and much inconvenience was got rid of. The explanation was that, while the Schneiderian membrane was in a state of vascular congestion, the usual foreign constituents of the air passing over it proved intensely irritating, and provoked the formation of mucus in inordinate quantity; but the air strained by the cotton-fibres lost this property, and allowed the capillaries of the part to recover their tone. The peculiarity of the experiment was that, if the cotton-wool only checked the escape of the fluid secretion mechanically without diminishing its formation, the mucus ought to accumulate in the nostrils above the plug of wool, which practically was not found to be the case.

Cephalotripsy.—Dr. LLOYD ROBERTS showed for Dr. Bowman a child with the cephalotribe attached. The child had been removed after perforation in consequence of contracted pelvis.

Typhlitis and Perityphlitis.—Dr. DRESCHFELD read a paper on the above subject, and also mentioned some interesting cases of these diseases.

Syphilitic Gummous Tumour of the Brain.—Mr. S. M. BRADLEY showed the brain of a woman who had died from this disease, and remarked upon the advisability of early treatment in such cases.

MEDICO-CHIRURGICAL SOCIETY OF EDINBURGH. MARCH 5TH, 1873.

P. D. HANDYSIDE, M.D., President, in the Chair.

Cyst in Brain.—Dr. HANDYSIDE showed the fresh brain of a female aged 34, who had died of peritonitis a month after delivery. She had been hemiplegic on the right side since the age of 11. Below the right frontal lobe there existed a thick-walled cyst, which contained an ounce and a half of fluid; it lay in the Sylvian fissure, on the under surface of the island of Reil, involving the three subdivisions of Wagner's lobe, the posterior of which is known as Broca's convolution. The cyst-wall showed under the microscope, on its cerebral surface, bipolar nerve-cells; on its cerebral surface, remains of old blood-clot. The patient had been of a very low type of development, and partially aphasic.

Fracture of the Skull.—Mr. G. R. GILRUTH read a case of fracture of the skull with puncture of the brain. The patient, a child, had fallen seven feet on its head, and died in six days. The fissure was a complicated one of the anterior portion of the base of the skull. The lesser wing of the sphenoid bone was detached.—Mr. JOSEPH BELL remarked on the difficulty, in many cases, of reconciling the classical symptoms called concussion and compression with actual cases, and the want of precision in our nomenclature of brain-injuries. He referred the symptoms in the present case to contusion of the brain. He alluded to the occasional extensive injury and even loss of brain-substance, fol-

ENSUING ANNUAL MEETING.

able to state that the Lord Mayor of London has to offer an official evening reception at the Manabers of the British Medical Association on the meeting in August. The lists of officers of secred by the Committee of Council, and are now

... A handsome response has already been made to the alar recently issued to the metropolitan members of the Associaion inviting subscriptions to the reception fund, and no doubt a good many more of our metropolitan associates will desire to contribute. Those who do so should communicate with the local secretaries, Dr. A. P. Stewart or Dr. Henry, with little delay, in order that the recepon committee may know what funds are at their disposal. A very ge attendance may be expected on this occasion, including not only most eminent provincial Associates, but representative men from e Continent. The preliminary arrangements are in a forward state, and a brief programme will shortly be issued.

MEDICAL NEWS.

ROYAL COLLEGE OF PHYSICIANS OF LONDON.—The following gentlemen were admitted members of the College on April 24th.

men were admitted members of the College on April Allchin, William Henry, M. B. Lond., Westminster Hospital Carter, Charles Henry, M.D. Lond., 8, Old Cavendish Street Hall, Francis de Havilland, M.D. Lond., Evelina Hospital Leach, Harry, Seamen's Hospital, Greenwich Port, Henry, M.D. Erlangen, 10, Finsbury Place North Seaton, Edward, M.D. Lond., Nottingham Williams, John, M.D. Lond., 28, Harley Street

The following gentlemen were admitted licentiates of the College on

Adams, John, St. Bartholomew's Hospital
Birch, Edward Arnold, Moss Lane East, Manchester
Campbell, James, Chigwell Row, Essex
Crozier, John Beatite, 73, Southampton Row
Hall, James Thomas, Chorlton on-Medlock, Manchester
Jordan, Frederick William, 14, Plymouth Grove, Manchester
Lacy, Charles Sethward de Lacy, 63, Coleshill Street
Morgan, John. Chilcompton, Bath
Morley, John Lacy, 4, Duke Street, Adelphi

ROYAL COLLEGE OF SURGEONS OF ENGLAND. - The following gen-Jemen, having undergone the necessary examinations for the diploma, were admitted members of the College at a meeting of the Court of Examiners, on April 22nd.

Baines, Egerton C. A., Lincoln
Bennett, William Edward, Stoke, Devonport
Bomford, Gerald, L.S.A., London
Brumwell, James Parker, L.R.C.P.Edin., Kendal, Westmorland
Cheesewright, John Francis, L.R.C.P.Edin., Sturminster Newton, Dorset
Dickinson, William Wood, L.S.A., Uffculme, Devon
Donkin, Horatio Bryan, Blackheath
Fordaff, Hardy, Bradford
Greensill, Edward Samuel, Great Witley, Yorkshire
Hetley, Henry, Norwood
Hornan, George William, Surbiton, Surrey
Johnson, Tom George, Brigg, Lincolnshire
Lingard, Alfred, Derby
Murphy, George, Carlisle
Perkins, Henry Alleine, M. B. Edin., Faversham, Kent
Pinching, Charles William, L.S.A., Gravesend
Pocock, Frederick Ernest, Bow, Middlesex
Pughe, Rhinaltt N., Liverpool
Rayne, Charles Alfred, Kendal, Westmorland
Savory, Arthur Henry, Wendover, Bucks
Shapley, Henry Thomas, L.R.C.P. Edin., Torquay, Devon
Snagg, Richard, L.R.C.P. Edin., St. Vincent, West Indies
Stockwell, George Thomas, Nottingham
Taylor, Robert F. S., Staleybridge
Wood, John Edward, London
Wood, Wm. John Haram, L.R.C.S. and L.R.C.P.Edin., Boston, Lincolnshire were admitted members of the College at a meeting of the Court of

APOTHECARIES' HALL.—The following gentlemen passed their examination in the science and practice of medicine, and received

amination in the science and practice of medicine certificates to practise, on Thursday, April 24th, 1873.

Clare, John, Haverfordwest
Greet, William Ambrose, 29, Great James Street, W.C.
Haslam, Thomas Henry, Finborough Road, West Brompton Nunez, Daniel, San José de Costa Rica
Stericker, William, Grove Lane, Camberwell
Turle, Arthur, Mount Taunton, Somerset

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

Thomas, Edmund Frederick, Guy's Hospital

As Assistants in compounding and dispensing medicines, Baines, Arthur, Hanley, Staffordshire Balkwill, Joseph, Kingsbridge, Devon Birchall, Thomas Barrow, Preston, Lancashire Hargrave, Spencer, Manchester Laverack, William Henry, Westgate, Bradford Thompson, Thomas, Knaresborough

At the Preliminary Examination in Arts, held at the Hall of the Society, on the 25th and 26th of April, 1873, 64 candidates presented themselves; of whom 19 were rejected, and the following 45 passed, and received certificates of proficiency in general education.

In the First Class, in the order of merit.

1. Charles Rayley Owen. 2, A. F. G. Codd, Edward Charles Cripps, and Montague Hosking. 5. Frank Marsh, G. A. Meaden, and W. G. Tennant.

8. John McHale. 9. George Batchelor, Clulow Howard, and Lawrence

Humphrey.

In the Second Class, in alphabetical order.

H. F. Bailey, R. T. Bedford, J. A. Browne, R. D. Cameron, H. Crisp, H. W. Edwards, P. H. Emerson, F. E. Fenton, E. M. Ford, C. B. Gabb, M. D'Oyley Gilkes, T. W. Graves, Alfred Hepburn, T. G. C. Hesk, L. Houghton, J. G. Jeffreyes, J. H. Kemm, J. C. Kershaw, F. Knight, M. D. W. Levien, C. B. Lewis, Theodore Linde, T. E. F. MacGeah, L. Maybury, J. D. Miller, J. J. Muncaster, J. H. Muskett, C. J. Plummer, H. E. Price, A. Wm. Stone, Frank Taylor, Thomas Taylor, H. J. Thornton, and F. Percy Wightwick.

MEDICAL VACANCIES.

THE following vacancies are announced:—
ALTRINCHAM UNION, Cheshire—Medical Officer for the Knutsford District;
£60 per annum, and fees.
ATHY UNION, co. Kildare—Medical Officer to the Fever Hospital: £40 p. ann.
BALLYMENA UNION, co. Antrim—Medical Officer, Public Vaccinator, and
Registrar of Births, etc., for the Ahoghill Dispensary District: £90 per annum,

BRADFORD (Yorkshire) MEDICAL AID ASSOCIATION OF FRIENDLY

BRADFORD (Yorkshire) MEDICAL AID ASSOCIATION OF FRIENDLY SOCIETIES—Surgeon: £200 per annum and midwifery fees, house, rent, etc. Applications to W. B. Cawthra, Esq.
BUCKINGHAMSHIRE GENERAL INFIRMARY, Aylesbury—Resident Surgeon and Apothecary; £80 per annum, with £10 increase to £100, board, lodging, coals, and candles, in furnished apartments.

CARMARTHENSHIRE INFIRMARY—House-Surgeon: £100 per annum, lodging, coal, and candles. Applications to H. Howell, Secretary.

CENTRAL LONDON SICK ASYLUM DISTRICT INFIRMARY, Highgate—Assistant Medical Officer: £100 per annum, board and residence.

CLOGHER UNION, co. Tyrone—Medical Officer to the Workhouse: £50 p. a.

CORK DISTRICT LUNATIC ASYLUM—Resident Medical Superintendent.

EDINBURGH ROYAL LUNATIC ASYLUM—Resident Medical Superintendent.

ELY UNION-Medical Officer for District No. 5 and the Workhouse: £51 per

annum, and fees.

GORT UNION, co. Galway—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Ardrahan Dispensary District: £100 per ann., and fees.

HOLSWORTHY UNION, Devon—Medical Officer for District No. 3.

HULME DISPENSARY, Manchester—House-Surgeon: £120 per annum, apart-

ments and attendance.

INFIRMARY FOR CONSUMPTION AND DISEASES OF THE CHEST,
Margaret Street, Cavendish Square—Visiting Physician.

KIDDERMINSTER INFIRMARY—House-Surgeon: £120 per annum, rooms,

coal, gas, and attendance.

LISNASKEA UNION, co. Fermanagh—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Maguiresbridge Dispensary District: £80 per annum, and fees. Applications to Colonel Edward Archdall, Lisnaskea.

LLANDILOFAWR UNION, Carmarthenshire—Medical Officer for District

No. 3: £27 per annum.

LOCHMABEN, Dumfries-shire—Parochial Medical Officer and Public Vaccinator: £50 per annuum, and fees.

METROPOLITAN ASYLUM DISTRICT—Assistant Medical Officer for the Asylum at Leavesden: £150 per annum, board, and residence.

MORPETH URBAN SANITARY DISTRICT—Medical Officer of Health:

£30 per annum.

NORTH RIDING INFIRMARY, Middlesborough-on-Tees—House-Surgeon.

ROYAL GENERAL DISPENSARY, Bartholomew Close—Physician: £40

per annum. ST. GEORGE and ST. JAMES DISPENSARY, King Street, Regent Street—

Physician-Accoucheur.
ST. PETER'S HOSPITAL FOR STONE, etc., Berners Street—House-Sur-

geon: \$60 per annum.

SEAMEN'S HOSPITAL, Greenwich — Visiting Physician. Applications to Kemball Cook, Esq., House-Governor and Secretary.

THOMASTOWN UNION, co. Kilkenny—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Knocktopher Dispensary District: \$95 per annum, and fees. Applications to J. Bradley, Esq., Insnag, Stoneyford.

WALKER URBAN SANITARY DISTRICT—Medical Officer of Health; \$100

per annum.
WESTMINSTER HOSPITAL—Assistant-Surgeon.—House-Surgeon.
WEST BROMWICH DISTRICT HOSPITAL—House-Surgeon: £80 per annum, board, and residence.
WESTERN DISPENSARY, Broadway, Westminster—Physician.
WISBECH UNION, Cambridgeshire—Medical Officers for Districts 7 and 8.

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.

*MARTIN, John, M.D., L.D.S., of Cambridge House, Portsmouth; Keydell, near Horndean, Hants; and Mentone, Les Alpes Maritimes, at Nice, aged 6: or March 23rd.

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.

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 Orthopædic, 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.—Londen, 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, I. P.M.—Central London Ophthalmic, I. P.M.—Royal Orthopædic, 2. P.M.—Royal London Ophthalmic, II. A.M.—Hospital for Diseases of the Throat, 2. P.M.—Royal Westminster Ophthalmic, I. 30. P.M.

FRIDAYRoyal 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. Oration and conversazione

MONDAY.—Medical Society of London, 8 p.m. Oration and conversazione
TUESDAY.—Pathological Society of London, 8 p.m. Report by the Morbid
Growth Committee on Dr. Carter's Fibrous Tumour of the Ovary. Dr. Bagshawe: Epithelioma of the Glottis and Base of the Tongue. Dr. D. Powell:
Aneurism of Aorta close to Sinus of Valsalva. Dr. Bristowe: Two Cases of
Ruptured Chordæ Tendineæ. Dr. Bristowe: Hydatid of the Brain. Dr.
W. Legg: Changes in the Liver produced by high Temperature. Dr.
Curnow: Renal Calculi. Mr. Wagstaffe: Myxoma of the Genitals. Mr.
Wagstaffe: Tumour of the Jaw. Mr. S. Wilkinson: Bifurcation of the
Urethra of a Dog; Renal Cyst from a Pig. Mr. Butlin: Recurrent Osteosarcoma unconnected with Bone. Dr. Silver: Aneurism of Aorta involving
the Orifice. Dr. Silver: Stricture of Common Bile-Duct. Mr. Kesteven:
Disease of Brain, Heart, Liver, Kidneys, and Spleen. Mr. Holmes: A
Blood-Cyst from the Leg. Mr. Holmes: Pulsating Cancer of Kidney. Mr.
Gay: Syphilitic Condylomata. Mr. Myers: Diseased Hearts from Soldiers.
Dr. Dickinson: Intrathoracic Tumours.
WEDNESDAY.—Royal Microscopical Society, 8 p.m. Mr. W. K. Parker, F. R. S.,

WEDNESDAY.—Royal Microscopical Society, 8 P.M. Mr. W. K. Parker, F.R. S., "The Development of the Sturgeon's Facial Arches."—Obstetrical Society of London, 8 P.M. Dr. Meadows, "Case of Gastrotomy for supposed Extrauterine Pregnancy"; Mr. Lawson Tait, "Note on the Diagnosis of Extrauterine Pregnancy"; Dr. Wiltshire, "On the Common Skin-diseases of Children"; and a paper by Mr. George Roper.

FRIDAY.—Clinical Society of London, 8.30 P.M. Dr. Tilbury Fox (for Dr. Fritsche), "Two Unusual Cases of Elephantiasis Arabum"; Dr. Thorowgood, "Two Cases of Chronic Dysentery successfully Treated by Ipecacuanha"; Mr. W. Spencer Watson, "Intraorbitar Nævus treated by Ligature and Actual Cautery"; Mr. W. B. Dalby, "Five Cases of Traumatic Rupture of the Tympanic Membrane."

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.

WE are requested to state that there is no vacancy at Bethnal House Asylum.

THE HASTINGS PRIZE.

THE HASTINGS PRIZE.

THE General Secretary acknowledges the receipt of Essays, in competition for the Hastings Prize Medal, with the following mottos.

"Nil tam difficile est quod non solertia vincat."

"Qui non proficit, deficit.".

"Durum telum necessitas."

LAST WORDS ABOUT THE EPIZOOTY.

THESE last words are in the form of horse-doctors' bills. The Canada Medical and Surgical Journal has seen several; but the following, from a St. Louis veterinarian, is the most striking. Sant Lewis Ganewerry the 4d 1873. Mr. — to james Hankox Vetturerinary physickian and Surgeant Dr. Too medikle advice twict, 3 dollars; Konsultation over a ded mare sed too hev hed the eppzout, 75 cents; Goin to see two sick hosses in the nite (very cold), 2 dollars; To treatment of a kream kolered hoss two days with medisuns, 4 dollars 50 cents: To making an obstetrikul examinashun of a hosses throat, 1 dollar 50 cents; To settin up all nite in a barn with a sick hoss, 2 dollars 50 cents; To writin a preeskripshun for botts, & also one for spaving, 1 dollar; To holding a postmortim examinashun on a hoss who afterwards recovered, 1 dollar 50 cents; To givin my opinyun one day on the street regardin the kause of the zoot, 4 dollars. Totil, 20 dollars 75 cents.

NOTICES of Births, Marriages, Deaths, and App for insertion in the JOURNAL, should arrive at than 10 A.M. on Thursday.

An Australian Quack appends to his advertisement the "Dr. Handfield Jones, F.R.C.P., F.R.S., Physicia says: 'In atrophy and general debility, phosphodyne medy: it invigorates the nutritive functions, and incress only acts as an absorbent, but retards or repairs the w the nutritive functions to their normal condition."

This impudent fabrication has been brought to Dr. Ha the editor of the Australian Medical Journal, and he request it in his name. It is unnecessary to state to the profession here that it is v fabricated, and that the name of Dr. Handfield Jones has been appended with this knowledge to a statement of which he knows nothing.

HOSPITAL SUNDAY.

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A CORRESPONDENT calls our attention to the following suggestion, which has been gravely put forward by another "we", evidently intended as an improvement upon his predecessor, but hardly yet a success. "May we not hope that the distribution of tickets by the Central Committee may be a first step towards som thing like the Paris system, where a Committee sits every day in order to se all proper applicants to the hospital best suited to receive them? We lool all proper applicants to the hospital best suited to receive them? We looimany reforms from the continued operation of Hospital Sunday; and this won be among the greatest that it would be possible to accomplish!" Our correspondent adds: ""One of the greatest improvements, therefore, that this writer looks for is, that patients, say from Chelsea or St. George's-in-the-East, must apply at the Mansion House before they can be admitted into St. George's or the London Hospital. The good point in the Paris system is some economy in management, and especially in the purchase of stores; the bad feature is the way in which the patients are sent from one office to another before they come to the physician. The central committee plan is bad enough in Paris. What would it be in London—about four times the size of Paris? These gentlemen must be making a joke of the editor of the paper in which they write. For the benefit of obtuse readers, however, they should adopt Artemus Ward's plan, and add in parenthesis, '(N. B. this is a goak).' Seriously, I think it deserves to be noticed, and that somebody ought to be ashamed of printing such nonsense."

PATHOLOGICAL LABORATORIES.

SIR,—In a recent issue of your JOURNAL, you took notice of an American advertisement in which the advertisers offered to undertake investigation for their proprofession in this country might undertake such investigations with profit to themselves, and advantage to those for whom they conducted the experiment.

themselves, and advantage to those for whom they conducted the experiment. The subject is one to which we have given much consideration, and we believe that a great want may be supplied to the busy practitioner by the establishment of a laboratory in which he can get analyses of urine performed, or structures microscopically examined for a small cost. For example, it might be of grea' service to a practitioner to obtain a daily record of the variation in the amount of sugar excreted by a diabetic patient, but he has not time at his disposal to make the necessary investigation for himself. We have long been engaged in making investigations for ourselves, and we would very willingly undertake similar investigations for the profession generally. We are anxious, however, to ask whether the profession generally wishes for, and whether it would encourage, such an undertaking.

We are, etc.,

J. Thompson Dickson, M.A. and M.B. GBO. CHAS. COLES, M.R.C.S.

WE are indebted to correspondents for the following periodicals, containing news, reports, and other matters of medical interest:—The Liverpool Weekly Albion, April 26th; The Manchester Guardian, April 30th; The Aberdeen Daily Free Press, April 26th; The Bath Express, March 26th; The Birmingham Daily Post, April 30th; The Birmingham Daily Mail; The Hull Packet; The Daily Bristo Times and Mirror; etc.

COMMUNICATIONS, LETTERS, BTC., have been received from :-

Dr. George Johnson, London; Dr. R. Southey, London; Dr. Robert Barnes London; Dr. D. Ferrier, London; Dr. W. M. Kelly, Taunton; Our Paris Correspondent; Dr. Morell Mackenzie, London; Dr. Liveing, London; The Secretary of the Clinical Society; Dr. Rutherford, London; Dr. Edmund Parker, London; Dr. Greenhow, London; Dr. Gardner, Box; Mr. B. Blower, Liverpool; 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. J. W. Langmore, London; The Secretary of the Pathological Society; Dr. Althaus, London; Dr. G. C. Coles, London; An Associate; Dr. Harvey, Aberdeen; Mr. Kesteven, London; Dr. J. Hughlings Jackson, London; Dr. G. H. Philipson, Newcastle-upon-Tyne; The Secretary of the Royal Microscopical Society; Dr. F. J. Brown, Rochester; Dr. Thomas Trollope, St. Leonards-on-Sea; Mr. E. Davies, Maesteg; Dr. De Chaumont, Netley; Dr. Batty Tuke, Cupar Fife; Dr. Trollope, Hastings; Mr. Cuffe, Horncastle; Dr. Aveling, London; Dr. Parsons, Dover; Mr. Dyke, Merthyr Tydfil; Dr. Tindal Robertson, Nottingham; Mr. Haviland, London; Mr. Barton, Dunfermline; Mr. W. J. Cleaver, Liverpool; Mr. Terry, jun., Northampton; Dr. Newman, Stamford; etc.

BOOKS, ETC., RECEIVED.

Guy's Hospital Reports. Third Series. Vol. XVIII. London: 1872.
Fourth Annual Report of the Sanitary Commissioner of the North Western Provinces. Allahabad: 1872.
Digest of the English Census of 1871. Compiled from the Official Returns, and Edited by James Lewis. London: 1873.
A Treatise on the Diseases of the Tongue. By W. Fairlie Clarke, M.A., M.B.

London: 1873. The Varieties of General Paralysis. By F. Pollard, M.D. Reprinted from St. Thomas's Hospital Reports. 1875.