

potassium. On November 6th, she was given a mixture containing forty-six minims of tincture of digitalis in an ounce of water, of which a teaspoonful was taken at bedtime. The digitalis acted like a charm. After a very few doses, she was quite free from the palpitation, and left the hospital on November 12th, perfectly well.

SELECTIONS FROM JOURNALS.

OBSTETRICS.

THE DELIVERY OF THE PLACENTA BY SUPRAPUBIC PRESSURE.—Dr. Goodell, in the *Transactions of the Medical Society of Pennsylvania*, writes that, judging from his own experience and from the number of laudatory papers on this subject, Credé's method of delivering the placenta, or some slight modification of it, bids fair to take the place of every other. The plan which he adopts is as follows. At the maximum of the first uterine contraction after birth of the child, the fundus of the womb is grasped through the abdominal wall, between the thumb in front and the fingers behind. It is then both forcibly squeezed, and at the same time pressed downward and backward. By means of this uterine expression, the placenta and membranes are usually at once detached and extruded; sometimes suddenly, just as the stone escapes when a cherry is compressed between the finger and thumb; occasionally it will require two or more pains to effect this. The sooner this plan is resorted to after the birth of the child, the more easy in execution will it be. Those who practise this method contend that it offers many advantages over any other. The risk of communicating any puerperal disease is lessened. The expulsion of the placenta and membranes by a *vis a tergo* is more likely to be complete than by traction on the cord, which cannot be broken, as no traction is made on it. Adherent placenta is less frequently met with. The introduction of the hand into the womb is avoided, and so also, as a consequence, is the ingress of air. Finally, the tonic and energetic contraction of the womb, following this manoeuvre, prevents the occurrence of hæmorrhage or of unruly after-pains.

THE MECHANISM OF BIRTH IN CONTRACTED PELVIS.—O. von Haselberg (*Berlin. Beiträge zur Geburt. und Gynäkol.*, vol. ii; *Centralblatt für die Medicin. Wissenschaften*, November 1) endeavours to explain why the head passes through the narrow pelvis more readily when the rest of the body has been expelled than when it comes first, and to lay down consequent indications for turning. Every obstetrician has met with cases in which the head, though presenting in a good position, cannot pass through a narrow pelvis, while, after turning, its escape is easy and rapid. The first indication of an attempt to explain this by the different relations of the diameter of the foetal head is found in Lachapelle; and Von Haselberg has arrived at the conclusion, from his own observations and from measurements, that by turning a smaller diameter of the foetal head is presented to the narrow conjugate pelvic diameter. When the head presents, it lies obliquely to the inlet of the pelvis, while the body follows it in a straight direction. But when the head follows the body, not only is the passage of the bipartite diameter through the conjugate rendered possible, but, as the pressure is distributed more equally over both parietal bones, the effects of compression of the skull are less lasting and less injurious. With regard to turning, the author does not advise that it should be resorted to very early as a prophylactic measure; it is rather indicated when, with a relatively narrow pelvis and an oblique presentation of the head, no progress is made after labour-pains have continued several hours and the os uteri is fully dilated.

ANATOMY.

DIRECT COMMUNICATION BETWEEN THE ARTERIES AND VEINS.—Hoyer, in an article in a Polish journal quoted in the *Centralblatt für die Medicin. Wissenschaften*, November 16, 1873, refers to some preparations which he exhibited at the meeting of German naturalists and physicians at Leipzig, in which he demonstrated the direct communication of arteries with veins. He was led to this by observing that, on injecting an alcoholic solution of resin mixed with vermilion into the arteries, the veins became coloured, though there was no trace of the passage of the injection through the capillaries. He was further convinced of the correctness of his observation when he added a spirituous solution of aniline blue to the alcoholic solution of resin: the veins were coloured, and microscopic examination showed that the injection had reached only the smallest arteries. For the purpose of demonstration, he gently injected rabbits' ears from the carotid artery

with a mixture of Berlin blue and gelatine, then cut them off, and immersed them for some days in a solution of one or two parts of chromic acid and from five to ten of hydrochloric acid in a thousand parts of water. The epidermis and hairs were thus removed, and only the cartilage and vessels remained, which could be examined *in situ* with low magnifying powers. These preparations were also coloured with carmine and rendered transparent by alcohol and turpentine. Besides the ordinary connection between the posterior auricular artery and the anterior and posterior auricular veins by means of the capillaries—the commencement of which only was injected—there were also, but more rarely, seen vessels from three to five times as large as the capillaries, filled with injection, and connecting the arteries with the veins; they seldom ran straight, but generally formed complicated loops, and showed the structure of arteries quite as far as their entrance into the veins. Sucquet had already, in 1862, described the immediate communication of arteries with veins in the head, nose, cheeks, ears, the convexity of the elbow and knee joints, and on the fingers and toes. These direct communications do not exist in the thoracic and abdominal organs; but they correspond with the anastomoses of arteries and dilated veins in the corpus cavernosum penis. The function of those anastomoses, and their influence on the circulation, are not understood.

TOXICOLOGY.

POISONING BY COFFEE.—H. Curschmann gives in the *Deutsche Klinik* for 1873 (p. 377-380) a careful report of the case of an anæmic woman, who, having a groundless idea that she was pregnant, took, for the purpose of procuring abortion, an infusion of 250 grammes of slightly roasted coffee in 500 grammes of water. Two hours and a quarter afterwards, her mind was confused; the countenance was pale and very anxious, and there was violent trembling of the limbs; she had very severe dyspnoea; the breathing was difficult and quick, while the state of the lungs was normal. The pulse was frequent and very tense, and the arteries were contracted; the action of the heart was violent; there were frequent diarrhoea with tenesmus, and frequent discharge of large quantities of urine of low specific gravity. In the evening, there was an improvement under the influence of morphia; and on the third day the patient had quite recovered. —*Centralblatt für die Medicin. Wissenschaften*, December 13, 1873.

PATHOLOGY.

CHRONIC HÆMORRHAGIC PERITONITIS.—In two cases of severe ascites consequent on heart-disease, in one of which tapping was performed sixteen times in four months, and in the other twice, a remarkable and hitherto undescribed form of chronic peritonitis was found after death by N. Friedreich (*Virchow's Archiv*, vol. lviii). Its characteristic signs were the formation of easily removable layers of exudation-matter in the peritoneum; the small amount and slightness of adhesions; and enormous vascularisation and consequent tendency to hæmorrhage and the formation of pigment. In the first case, the hæmorrhage had led to the formation of prominent firm knobby tumours, at first slightly resembling melanotic sarcoma; in the second, it was limited to capillary extravasation. Microscopic examination showed that the layers of exudation lying nearest the intestine were the newest; here the ground-substance presented the most elementary forms of organisation and the highest degree of vascularity, though it was destitute of any of the characters of connective tissue. These, however, increased from within outwards, so that the outmost layer presented all the characters of perfect connective tissue. The author thinks that there is no doubt that the formation proceeded from without inward; that the younger layers were the offspring of the older ones; that the hæmorrhage proceeded chiefly from the former; and that the effused blood was encapsuled by the advancing organisation of the tissue, if it were not poured out into the peritoneal cavity or between the older formed layers. The connection with chronic hæmorrhagic pachymeningitis and hæmatoma of the dura mater is not to be mistaken, and is supported by the fact that in the first case the inner surface of the dura mater presented layers of false membrane which could not be distinguished either by the naked eye or by the microscope from the most recent of the exudations in the peritoneum. The cause of this affection is no doubt to be sought in the irritation of the serous membrane through the hyperæmia resulting from the dilatation of the vessels in consequence of puncture, after their compression by the ascites. This view is favoured by the clinical phenomena—slight peritonitis after paracentesis, and symptoms of congestion of the head when ascites is increasing.—*Centralblatt für die Medicin. Wissenschaften*, November 1.

PHYSIOLOGY.

THE DELIRIUM OF INANITION.—The nature of the delirium of inanition was recently discussed incidentally by Sir William Gull at the Clinical Society. Dr. Haust describes (*Le Progrès Médical*, Jan. 3) the symptoms observed in three patients who practically died from this cause, being the victims of cancer of the stomach. The first, a man aged 55, took only a few spoonfuls of thin soup daily for the last few weeks of his life. The second and third were women who were similarly starved for the last periods of their existence. In these three patients, there was observable during this period a gradual lowering of the temperature, which in the first instance fell to 95 deg. Fahr., and in the other two to 84.2 deg. These patients during the last days of their existence presented very similar disturbances of the intellect. Their physiognomy had a striking expression of studied satisfaction and dulness. The first patient would play with morsels of bread, and hide them under his pillow; then he fell for hours into a state of profound dulness. He was several times detected in the act of onanism. The patient, when roused from torpor, was constantly smiling in stupid fashion. This woman, when she was awake, had also an expression of great beatitude; she whistled, moved her fingers in rhythmical time, burst into loud laughter, or would remain for a long time together with her eyes fixed as in ecstasy. Larrey observed similar phenomena in individuals dying from the slow effects of cold.

REPORTS OF SOCIETIES.

ROYAL MEDICAL AND CHIRURGICAL SOCIETY.

TUESDAY, JANUARY 27TH, 1874.

C. J. B. WILLIAMS, M.D., F.R.S., President, in the Chair.

THE USES OF CONIUM IN DISORDERS OF MUSCULAR MOVEMENT.
BY JOHN HARLEY, M.D.

DR. JOHN HARLEY read a second communication on this subject, and gave further details of the cases described at the meeting on December 9th (see *BRITISH MEDICAL JOURNAL*, December 27th). The patients were again exhibited.—The PRESIDENT said that he had been in the habit of giving the extract as well as the juice of conium, and had never seen any narcotic or poisonous results. He had nearly abandoned its use in consequence of its small effects; he had, however, always used it in much smaller doses than those given by Dr. Harley.—Dr. BUZZARD asked whether Dr. Harley had perceived any difference in the quality of the succus conii obtained from different druggists. He had given it at the Hospital for Paralysis in doses of an ounce and a half three times a day, to children eight or ten years old, and had never got any evidence of physiological effects. Cases of chorea had done well under its use; but this was not evidence of its therapeutic value.—Dr. JOHN HARLEY said that, if Dr. Buzzard would use the juice prepared from fresh hemlock, physiological effects would be produced. His failure to produce results was to be ascribed to carelessness in the preparation of the remedy. At present, the supply of good succus conii was exhausted; and some druggists attempted to make it by dissolving the extract and colouring the solution with caramel.—Dr. COTTON had made some experiments on the inhalation of conium at the Hospital for Consumption, and had come to the conclusion that it was inert.—The PRESIDENT thought that it was rendered somewhat more efficacious for inhalation by the addition of liquor potassæ.—Dr. GEORGE HARLEY thought that it would be dangerous to allow the idea to go forth that conium could be given with impunity in the large doses described. The strength of the preparation depended on the season of the year at which it was obtained. He related some experiments which he had made, showing that conia, in the course of time, gradually lost its power, being exceedingly volatile and unstable. He could confirm the statement that conia did not affect the intelligence; dogs remained perfectly intelligent even when quite paralysed.—Dr. JOHN HARLEY always tested fresh supplies of succus conii on himself. The principal results were disturbance of the action of the recti muscles of the eyeball and weakness of the knees. The conia in the succus was combined with a vegetable acid; and the succus was preserved good by being kept in a stoppered bottle.

CASES OF COMPLETE ECTOPIA VESICÆ WITH EPISPADIAS. BY JOHN WOOD, F.R.C.S., F.R.S.

MR. JOHN WOOD showed two cases of complete ectopia vesicæ with epispadias, which had been operated on with success by his plastic method. The patients were brothers, aged 18 and 12 years respectively. The elder had a very wide interval between the pubic bones,

the superior rami being separated to the extent of five inches, leaving a large mucous surface of the bladder and the orifices of the ureters uncovered, and discharging blood and mucus. In the younger, the defect was smaller and more favourable. Two plastic operations had been performed on each in King's College Hospital. The first consisted of a reversed flap of skin taken from the umbilical region, large enough to cover the exposed bladder, and turned down with its skin surface towards the mucous membrane. The skin of the flap was in this situation quite devoid of hair, as is usual in these cases. Two other flaps of a lancet-shape were then taken, one from each groin, with the bases downwards, and placed upon the raw surface of the reversed flap. They were held together by harelip-pins and wire sutures. The second operation was effected by the transplantation of the anterior three-fourths of the scrotum from below the malformed penis to its upper surface, covering in the urethral epispadiac groove and forming a very complete prepuce, through and under which the urine flowed, and completely enveloping the glans penis above and at the sides. The elder patient had had two attacks of erysipelas during the treatment, which prolonged the period of convalescence and necessitated his leaving the hospital for an interval. The younger, who was treated at the same time, proved somewhat intractable in the insertion and management of the India-rubber tube used in the after-dressings. The result was, in his case, a small slough at the point of junction of the flaps transplanted at the second operation, which left a fistulous opening. Upon this, two operations of a minor and trifling character had been since performed, and it was now contracted to a small chink. With this exception, the parts are all soundly healed, and were being gradually braced up and rendered more resisting by the contraction following the operation. The patients were about to have made a shield to fix on to the restored penis, and an India-rubber urinal attached, fastened to the leg like a railway urinal, an instrument which, in other cases operated on by Mr. Wood, had kept the patient dry and comfortable. A detailed description of the operations performed by Mr. Wood for this deformity is found in a paper published in the fifty-second volume of the *Medico-Chirurgical Transactions*, 1869, with coloured explanatory plates.—Mr. THOMAS SMITH asked Mr. Wood if he had found any means of removing the hairs from the inner wall, or of preventing the collection of phosphates.—Mr. WOOD said that the only way to remove the hairs was by destroying the bulbs by nitric acid before the operation. In one of his cases, the patient plucked out the hairs as they grew, and had less trouble with them now than formerly. The accumulation of phosphates might be prevented by careful cleansing with a dilute solution of nitric acid.

CASE OF PRIMARY EXCISION OF THE ANKLE-JOINT; WITH OBSERVATIONS. BY HENRY LEE, F.R.C.S.

The author described what he believed to be the only case in which complete primary section of the ankle-joint had been performed; and advocated the plan, both in primary and secondary excisions of the joint, of dislocating the tibia and fibula *outward* so as to allow the articulating surface of the tibia to be removed with comparatively little disturbance to the surrounding parts. The articulating surface of the astragalus was also more easily removed in this way than by dislocating the bones of the leg inward, as had commonly been attempted in secondary excisions of the joint. In many of the so-called excisions of the ankle, the extremities of the tibia and fibula had alone been removed, and the articular surface of the astragalus had been left either partially or altogether. In other cases, where a complete secondary resection of the joint had been performed, the bones had been divided by a thin saw whilst they remained *in situ*; a proceeding, according to the author, involving considerable disturbance and risk to the surrounding parts. In other cases, again, an incision had been made on the outside of the joint, and a dislocation of the bones attempted; but this could not be satisfactorily accomplished so long as the internal malleolus was left. The plan advocated, therefore, was to remove the internal malleolus first, and then the tibia and fibula might be dislocated outward through the external wound with great facility, and without interfering with any important structures. Such a mode of operating had not, he believed, been hitherto described. The patient was exhibited at the meeting.—Mr. BARWELL said that primary excision of the ankle had been performed in civil as well as in military surgery. It had been done successfully three times by Mr. Canton. He believed primary excision more likely to be successful than secondary. He differed from Mr. Lee as to the operation described by Mr. Holmes, which had been quoted with acknowledgment from him (Mr. Barwell). In the operation, the limb was dragged down by an assistant, so as to make a space between the tibia and the astragalus, and the surfaces of the bones were sawn off.—Mr. MAUNDER had performed excision in 1866 in the London Hospital, in a case of compound dislocation of the ankle. The

of the paper read was, "A Plea for Legislation in regard to Lock Hospitals." The essayist first described the general routine and treatment of the patients in the Glasgow Lock Hospital. The residence necessarily partakes in great measure of the character of an imprisonment, and this is especially felt by the class of persons concerned who have been accustomed to unusual freedom. Hence it happens that escape from the hospital is often urgently longed for; and, though patients are submissive enough on admission, when the disease is in a painful and acute stage, yet, whenever the pain is relieved and the acuteness of the symptoms overcome, they are apt to demand their dismissal. Many thus go out before cure is complete, and when they are just in the condition to spread the disease. The essayist then gave it as his opinion that power ought to be given by legislation to detain such patients in hospital till they are certified as fit for removal by the medical attendant. This might effect many of the purposes of the Contagious Diseases Acts, and yet the women would only come under the action of the law by voluntarily seeking admission to the hospital. A rather lively discussion followed, in which the question was mooted whether power may not be already possessed, under the Police Act, to do all that the essayist requires. It seemed the opinion of most that no such power exists, but it seems worth inquiring into.

ASSOCIATION INTELLIGENCE.

BIRMINGHAM AND MIDLAND COUNTIES BRANCH: MICROSCOPICAL SECTION.

THE next meeting will be held on Tuesday, February 10th, at 7.30 P.M., in the Council Room, Queen's College, Birmingham, when papers will be read, and specimens exhibited.

WILLIAM HANDS, } Honorary Secretaries.
LAWSON TAIT, }

Birmingham, February 1874.

NORTH WALES BRANCH.

THE next intermediate general meeting of this Branch will be held on Tuesday, the 24th instant, at 11.30 A.M., at Cambrian Hotel, Pensarn, Abergele, under the Presidency of R. Davies, Esq., Llanfairtalharn.

The dinner will take place at 2.30 P.M. Tickets, 6s. 6d. each, exclusive of wine.

Gentlemen having papers or cases to communicate, and who purpose dining, will be good enough to send early intimation to the Honorary Secretary.

D. KENT JONES, *Hon. Sec.*

Beaumaris, February 3rd, 1874.

BIRMINGHAM AND MIDLAND COUNTIES BRANCH: PATHOLOGICAL AND CLINICAL SECTION.

THE second meeting of the Session was held on Friday, November 28th, 1873; F. TURTON, Esq., in the chair.

New Members.—Five members of the Branch were elected members of the Section.

Communications.—1. Mr. VOSE SOLOMON exhibited some microscopic specimens of a Tumour of the Orbit.

2. Mr. LLOYD OWEN exhibited an Infant, seven months old, suffering from Epicanthus. Particular attention was drawn to this deformity, and the various operations devised for its relief were described, the one advocated, and illustrated by a diagram, being Van Ammon's. Von Graefe's views, as to the postponement of operation until the child had attained its fifth or sixth year, so that the natural improvement in appearance due to the raising of the bridge of the nose might be fully appreciated, were mentioned.

3. Dr. RUSSELL presented two cases of Atrophy of the Deltoid, and called attention to the difference in the behaviour of the muscular tissue under faradism in each case. In one patient, electric contractility was extinguished both to faradism and to voltaism; here there had been injury to some of the branches of the brachial plexus of six months' standing. In the other patient, although atrophy had effected destruction of a great part of the muscle, yet the muscular fibres which remained contracted actively. This latter was probably a case of progressive muscular atrophy, the commencement of the disease showing itself in the deltoid in consequence of overuse of that muscle in blowing forge-bellows. Dr. Russell also called attention to the coexistence of atrophy of the infraspinatus, and to the added incapacity inflicted by loss of power in this muscle, as pointed out by Duchenne de Boulogne, in consequence of the loss of the capability of rotating the arm outwards, necessary in car-

rying the hand across a sheet of paper whilst writing or in drawing out the needle in sewing.

4. Dr. WELCH exhibited a child, thirteen months old, with a primary Labial Chancere and commencing Secondary Symptoms. The father contracted syphilis, and infected his wife, who suffered severely from the constitutional effects of the poison. Dr. Welch considered it probable that the child, which slept with its parents, had applied syphilitic matter to its mouth and lips.

5. Dr. MALINS showed a drawing of the interior of the Cervix Uteri taken from a woman who died at the sixth month of pregnancy. The length of the cavity was one inch and quarter, the rugæ were well-marked, and the interior was filled up by a gelatinous plug. The uterus, with the contained foetus, was given to him by Mr. Newnham, of Wolverhampton. It was taken from a woman who died suddenly of oedema of the lungs and heart, a *post mortem* examination being ordered by the Coroner. Dr. Malins explained the physiological and practical bearing of the observation, and referred to the papers of Dr. Matthews Duncan in the *Edinburgh Medical Journal* for March, 1859, and to a pamphlet reprinted from that journal in 1863, also to the opinion of Stoltz and Cazeaux upon the behaviour and condition of the cervix during pregnancy, which views the preparation tended to support.

6. Mr. BARTLEET showed a stump after Roux's Amputation at the Ankle-Joint. He described the operation, and pointed out the advantages that were claimed for it, and the disadvantages that were attributed to it. Mr. Bartleet stated that an experience of five cases, some of them of several years' standing, convinced him that the advantages were real, the disadvantages merely theoretical.

7. Dr. BALTHAZAR FOSTER showed a specimen of Rupture of the Aortic Valves from accident.

8. Mr. FURNEAUX JORDAN gave clinical notes of five cases of Calculus of the Female Bladder, the specimens being also exhibited.

FORMATION OF THE SOUTH HANTS BRANCH.

A GENERAL meeting of the medical profession of Portsmouth and the surrounding towns was held at the School of Science and Art, Portsmouth, on Tuesday, January 27th, to consider the desirability of forming a Medical Association.

W. H. GARRINGTON, Esq., J.P. (Coroner of the Borough), was unanimously called to the Chair. Dr. WARD COUSINS was then called upon to address the meeting. He said that the time had come when it was absolutely necessary to form an Association in Portsmouth. The number of medical men in the immediate neighbourhood amounted to one hundred and fifty, and all had been invited to attend the meeting. He proposed that an Association be formed, including the medical officers of the army and navy who were resident at the port; and that their brethren from the surrounding towns be also invited to co-operate. Dr. Cousins then spoke of the advisability of constituting the Society at once a Branch of the British Medical Association. Having referred to the advantages the members of local societies obtain by union with the central Association, and the signal service the central Association has rendered the profession generally by promoting union and helping on the advancing science of the times, he proposed "That a Branch of the British Medical Association be formed in Portsmouth, including also the surrounding towns."

The resolution was seconded by Inspector-General Dr. SMART, R.N., and unanimously carried. After some discussion, the Branch received the name of "The South Hants Branch of the British Medical Association".

CORRESPONDENCE.

HOSPITAL STATISTICS.

SIR,—I read, with some surprise, in Mr. Erichsen's second lecture, reported in your number for January 24th, p. 99, a passage referring to Sir James Simpson's statistics, which seems to me so completely to ignore the question at issue in the controversy which those statistics excited, that I must venture again to recall the attention of Mr. Erichsen himself, as well as your other readers, to the point—though I have written so much on the subject, that I am extremely reluctant to repeat what I had hoped was quite clear already. Sir J. Simpson produced his statistics in order to prove, and he asserted that he had thereby proved, that hospitals in which the sick are aggregated are made more unhealthy, in consequence of that aggregation, than the isolated houses in which private patients are treated; and, further, that this unhealthiness increases as the time increases during which the hospital remains

WILLIAM MORRIS, M.R.C.S., PETWORTH.

MR. MORRIS, who recently died suddenly, was born in 1820, at Oswestry, and was one of a family of fourteen children. After receiving his education at the Oswestry Grammar School, he was apprenticed to his father and eldest brother, who were at that time practising medicine there. Later on, his professional education was completed at University College. He came to Petworth in 1843, as an assistant to a firm, to whose practice he subsequently succeeded.

He was an excellent example of how much a good man may do, above and beyond his professional work, to endear himself to his fellow-men, and to help them in their varied struggles of life. A kind and sympathetic nature, a gentle manner, and good common sense in the exercise of his professional skill, gradually secured for him a very wide and increasingly-extensive practice in the town and country.

In his professional capacity, he was as implicitly trusted and looked up to as he was widely known; and it was acknowledged by patients, and also by members of his own profession, that, though a country doctor of advancing years, he was fully conversant with modern and improved remedies and appliances. As a surgeon, he was no indifferent operator, and during his career it fell to his lot to perform, once or oftener, many of the most important operations.

His energy and enthusiasm in his calling abundantly evinced his love for it, and made him an assiduous worker. It was mainly through his efforts that the Petworth Cottage Hospital, which was built at the expense of the late Lord Leconfield, was started; while the general plan of its construction, and almost every detail of its fittings and arrangements, were planned and executed at his direction.

He died in the midst of his work. He fell in a fit of apoplexy, in the very act (as it is supposed), of reaching down his hat to go forth on visits to patients. This sad event was no doubt conducted to by overwork, which he had endured night and day for many years. His friends often tried to impress upon him the necessity of some relaxation, both of mind and body, but his temperament was such that he could not restrain himself from his labours, and his only thoughts were how he could best promote the comfort and alleviate the sufferings of others. He has left a widow and two sons and two daughters.

MEDICAL NEWS.

ROYAL COLLEGE OF PHYSICIANS OF LONDON.—The following gentlemen were admitted members on January 29th, 1874.

Brookhouse, Joseph Orpe, M.D. St. And., Parliament Street, Nottingham
Mackenzie, Stephen, M.B. Aberdeen, Weymouth Street, W.
Galabin, Alfred Lewis, M.D. Camb., Camberwell Grove, S.E.
Irvine, James Pearson, M.D. Lond., Mansfield Street, W.
Davidson, Alexander, M.D. Edin., Rodney Street, Liverpool
Semple, Charles Edward Armand, M.B. Camb., Torrington Square, W.C.
Rickards, Edwin, M.B. Oxon., General Hospital, Birmingham

The following gentleman was at the same time admitted as a Licentiate.

Parakh, Dhanjisha Novroji, Euston Road, N.W.

UNIVERSITY OF DUBLIN.—At examination meetings of the College, held on Tuesday, Wednesday, and Thursday, January 13th, 14th, and 15th, 1874, the following candidates obtained the License to practise Medicine.

Elliott Sanderson Browne, Martin Edward Bourke, Rowland John Denny, and Richard Nugent Stoker.

The following candidates obtained the Midwifery Diploma.

Richard Nugent Stoker and Wallace Williams Lovejoy, M.D. Harv. Univ. Camb. (Mass.), 1872.

APOTHECARIES' HALL.—The following gentleman passed his examination in the science and practice of medicine, and received a certificate to practise, on Thursday, January 22nd, 1874.

Squire, William, Hanwell, Middlesex

Thursday, January 29th, 1874.

Barnard, Thomas, Lewes, Sussex
Davis, Edwin Harry, Dorchester
Hartley, Charles, Stocking Pelham, Herts

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

Adcock, Harold, Guy's Hospital
Musgrave, Reginald Vernon, St. Mary's Hospital

At the Preliminary Examination in Arts, held at the Hall, on January 30th and 31st, 1874, 50 candidates presented themselves; of whom 16 were rejected, and the following 34 passed, and received certificates of proficiency in general education. In the First Class, in order of merit:

1. Joseph William Oglesby and Thomas F. B. Palmer. 3. Joseph L. Burchall

and John Wallis Gill. 5. Alfred C. Preston. 6. William Reed Hill, Norman Porritt, and Arthur Roberts. 9. Richard J. Dearden, George Richard Green, and Henry Newsome Oglesby.

In the Second Class, in alphabetical order:

W. B. Benison, R. O. Bunting, H. D. Chapman, R. A. S. Chard, H. F. Collier, S. A. Crick, W. E. Dawson, Wm. Eames, R. A. Fergusson, R. H. E. Knaggs, A. D. Leahy, C. S. Lewin, W. G. McLennan, L. L. de Montille, A. J. Newman, T. F. Pearce, J. Protheroe, E. J. Reilly, Herbert Smith, W. B. Thomson, G. F. Wallis, Alfred C. Wey, and H. Wigglesworth.

MEDICAL VACANCIES.

The following vacancies are announced:—

ADDENBROOKE'S HOSPITAL, Cambridge—House-Surgeon: £65 per annum. Applications, 13th instant, to F. Barlow, Sec.

ARMY MEDICAL DEPARTMENT—Surgeons. Applications to T. G. Logan, Director-General.

BRIDGNORTH INFIRMARY and DISPENSARY—House-Surgeon: £100 per annum, furnished rooms, etc. Applications, 12th inst., to Alfred Mathias, Hon. Sec.

CUMBERLAND INFIRMARY, Carlisle—Surgeon. Applications, 26th instant, to John Laver, Sec.

DEVONSHIRE—Public Analyst. Applications, 26th instant, to H. Ford, Clerk of the Peace, Exeter.

DUMFRIES and GALLOWAY ROYAL INFIRMARY—House-Surgeon, Clerk, and Apothecary: £50 per annum and board.

HOSPITAL FOR SICK CHILDREN—Assistant Physician. Applications, 18th instant, to S. Whitford, Sec.

INDIAN MEDICAL SERVICE—Eighteen Surgeons. Applications, 16th inst., to Major-General Pears.

KILKENNY UNION—Medical Officer to the Workhouse: £75 per annum.

LITTLEMORE PAUPER LUNATIC ASYLUM, near Oxford—Resident Assistant Medical Officer: £80 per annum, increasing to £120, furnished apartments, and board. Applications, 23rd instant, to the Superintendent.

LIVERPOOL ROYAL INFIRMARY—Surgeon.

LOWESTOFT Urban, Lowestoft Port, and Mutford and Lotheringland Rural, Sanitary Districts: £50, £20, and £50 per annum, and private practice. Applications, 21st instant, to Wm. Rix Seago, Lowestoft.

METROPOLITAN HOSPITAL, Devonshire Square—Assistant Physician. Applications, 21st instant, to George Croxton, Secretary.

MIDHURST RURAL SANITARY DISTRICT—Medical Officer of Health for the Tillington Subdistrict.

MIDHURST UNION—Medical Officer for the Tillington District: £60 per ann.

NARBERTH UNION—Medical Officer for District No. 1, and the Workhouse: £55 and £20 per annum, and fees. Applications, 21st March, to John Thomas, Clerk.

NAVAL MEDICAL SERVICE—Surgeons. Applications, 12th February, to A. Armstrong, Director-General.

NEWTOWNLIMAVADY UNION—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Newtownlimavady Dispensary District and Bridewell: £105 per annum, and fees. Applications, 9th instant, to W. S. Fleming, Hon. Sec.

NORTH RIDING INFIRMARY, Middlesboro-on-Tees—House-Surgeon: £100 per annum, lodging, board, etc. Applications, 9th instant.

NORTHUMBERLAND PAUPER LUNATIC ASYLUM, Cotingham, Morpeth—Resident Medical Superintendent: £400 per annum, furnished house, etc. Applications, 9th inst., to Wm. Dickson, Clerk to Committee, Alnwick.

NOTTINGHAM GENERAL HOSPITAL—Physician. Applications, 10th March, to E. M. Kidd, Sec.

RHAYADER UNION—Medical Officer for the whole Union: £80 per annum.

ST. MARY'S HOSPITAL, Paddington—Lecturer on Materia Medica. Applications, 9th instant.—Aural Surgeon. Applications, 14th instant, to J. G. Wilkinson, Secretary.

ST. MARY ABBOTTS, Kensington—Public Analyst: £50 per annum, and 5s. per analysis. Applications, 16th instant, to G. C. Harding, Vestry Clerk.

SALOP and MONTGOMERY COUNTIES LUNATIC ASYLUM—Assistant Medical Officer: £80 per annum, board and lodging. Applications, 13th inst., to C. de Courcy Peele, Shrewsbury.

SHEFFIELD GENERAL INFIRMARY—Assistant House-Surgeon: £65 per annum, board, lodging, etc. Applications, 10th inst., to Joseph Kirk, Sec.

STOCKBRIDGE Rural Sanitary District—Medical Officer of Health. Applications, 17th instant, to G. M. Footner, Clerk to the Authority, Romsey.

TEIGNMOUTH, DAWLISH, AND NEWTON INFIRMARY—House-Surgeon: £50 per annum, board, lodging, and washing.

TORBAY INFIRMARY AND DISPENSARY, Torquay—House-Surgeon and Secretary: £100 per annum, with board.

THE FRIENDS' RETREAT, near York—Medical Superintendent. Applications, 10th instant, to Jonathan Burt, Treasurer, Belle Vue, Heslington Row, York.

WESTMINSTER HOSPITAL—Assistant-Surgeon. Applications, 10th instant, to F. J. Wilson, Sec.

MEDICAL APPOINTMENT.

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

*BUCK, J. RANDLE, L.R.C.P., appointed Medical Officer of the Worcester Dispensary and Provident Medical Institution.

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.

DEATHS.

JONES, Ebenezer, Esq., M.R.C.S.Eng., at Rhayader, suddenly, aged 59, on January 11th.

KELLETT, Edward, M.D., at Kells, aged 56, on January 24th.

PORTER, John Taylor, F.R.C.S., aged 55, at his residence, Ash Mount, Sheffield, on February 2nd.

OPERATION DAYS AT THE HOSPITALS.

MONDAY Metropolitan Free, 2 P.M.—St. Mark's, 9 A.M. and 2 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.

TUESDAY Guy's, 1.30 P.M.—Westminster, 2 P.M.—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. Mr. J. Morgan, F.R.C.S., of Dublin, "On a fertile source of Venereal Contagion, demonstrated by experimental research and direct proofs, illustrated by models and drawings"; previous to which, Mr. Maunders will exhibit a patient the subject of Excision of the Ankle-joint; also, the patient's child, whose corresponding lower extremity is short. Mr. Jabez Hogg will bring forward a case of Hemiplegia; and Mr. A. E. Durham a Case of Dislocation of the Femur on to the Margin of the Sciatric Notch, of Five Months' standing, reduced by Manipulation under Chloroform.

TUESDAY.—Royal Medical and Chirurgical Society. 8 P.M.: Ballot. 8.30 P.M.: Drs. Hennessey and MacLaren, "Note on Cholera in the North-West Provinces of India"; Mr. Howard Marsh, "On the Treatment of Rickety Deformities of the Legs by Operation."

WEDNESDAY.—Epidemiological Society, 8 P.M. Dr. Gavin Milroy, "Proposition on Quarantine in relation to Epidemic Cholera."

FRIDAY.—Clinical Society of London, 8.30 P.M. Adjourned debate on Mr. Prescott Hewett's paper on "Pyæmia"; Dr. Cayley, "Case of Hæmoptysis"; Mr. T. Warrington Haward, "Case of Blood-cyst of Hand."

NOTICES TO CORRESPONDENTS.

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

AUTHORS desiring reprints of their articles published in the JOURNAL, are requested to communicate beforehand with the printer and publisher, Mr. T. Richards, 37, Great Queen Street, W.C.

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.

J. W. P.—We do not think that the Licentiates of the Royal Colleges of Physicians of London and Edinburgh have, as such, a right to use the title of Doctor implying the possession of a degree in medicine. The London College, at least, expressly disapproves of such use.

M. R. BRIDGER (Cottenham) sends us a long letter explaining his reasons for issuing the advertisement referred to at page 160 of last week's JOURNAL. He states that he had inserted three times in the local papers, by the advice of his friends, simply to disprove certain insinuations which had been made, and to let the public know his position with reference to the practice of the late Dr. Pinchard. While advertisements of the kind are as a general rule deserving of strong disapprobation, such circumstances as are described by Mr. Bridger may be held to excuse the insertion of one to the limited extent and for the special object stated in his letter.

CORRESPONDENTS are particularly requested by the Editor to observe that communications relating to Advertisements, changes of address, and other business matters, should be addressed to Mr. Francis Fowke, General Secretary and Manager, at the Journal Office, 37, Great Queen Street, W.C., and not to the Editor.

INSURANCE OFFICES AND MEDICAL FEES.

SIR,—I thought that the time had gone by when insurance offices refused to pay medical men their fees. The London Life Association has just succeeded in getting information from me about a patient of mine, and, in reply to my request for the usual fee, sends me a lithographed circular to say that it can do no such thing. By their reports they seem to be prosperous.

I am, etc.,

AUGUSTIN PRICHARD.

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.

WE have already expressed the opinion that the *Popular Treatise upon the Influence of Gout at the Heart*, etc., which is being sent about free by post, is a catch-penny pamphlet which is professionally disgraceful. It illustrates one of the worst abuses of special hospitals, that this professionally creditable pamphlet should be circulated in part as an advertisement of a "National Hospital for Diseases of the Heart", of which the author is medical superintendent. It is surprising that the gentlemen connected with the hospital should permit so gross an abuse. Dr. Eldridge Spratt is, we fear, content, from whatever motives, to bear the discredit which attaches to a mode of proceeding which our correspondent justly censures.

DR. A. B. (Dublin).—Immediately.

OBSCURE FORMULÆ.—The *Pharmaceutical Journal* has the following:—In answer to Notes and Queries No. 377, I think I can solve two out of the four difficulties mentioned.

1. "Tinct. Teste."—A West End Physician used to order the shell of a species of Tortoise, the *Emys guttata*, macerated for three months in rectified spirit. The formula was, I am almost positive, 3ij of the shell to Oj of S.V.R., and 3iv of this tincture (?) with 3iijss of aq. dest. was prescribed. The dose of this potent mixture was one teaspoonful, given in cases of consumption; and, it is almost needless to add, with no very marked effect. About three years ago I frequently made up the above prescription.

2. "Pil. Aloes Glacial."—These pills are prepared by Corbyn and Co. I have had occasion to procure them once or twice for a prescription.—**JOHN N. PLACE.**

Who is the West End Physician?

WHAT NEXT?

The *Kilburn Indicator* has a pathetic leader on the woes of ill-paid and hard-working medical men; and concludes its article by an original and neat suggestion. "In the meanwhile, we shall be happy to publish any authenticated statements sent us, showing the number of rich and poor cases attended by the different medical gentlemen of the locality during the past year, with the number of accouchements in both classes, and the deaths they may have certified to in the time, together with any other facts that may bear upon the question, or be interesting to our readers." Why not ask for a return of the number of cases in the hands of the neighbouring solicitor, or of the number of accounts kept at the local bank? As a mild draw for advertisements, the suggestion is ingeniously impudent.

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

WE are indebted to correspondents for the following periodicals, containing news, reports, and other matters of medical interest:—The Liverpool Weekly Albion; Allen's Indian Mail; The Retford, Workop, Isle of Axholme, and Gainsborough News; The Scotsman; The Torquay Directory; The Carlisle Daily Journal; The Blackburn Times; The Newcastle Daily Journal; The Leeds Mercury; The Northampton Herald; The Bradford Observer; The Liverpool Weekly Albion; The Edinburgh Courier; The Salford Chronicle; The Melbourne Age; The Newcastle Daily Journal; The Blackburn Journal; The Carlisle Express and Examiner; The Eastern Morning News; The Australian and New Zealand Gazette; The Somerset and Wilts Journal; The Halifax Guardian; The Daily Review; The Merthyr Express; The North Wales Chronicle; The North British Daily Mail; The Blackburn Times; The Glasgow News; The Glasgow Herald; The Manchester Courier and Lancashire General Advertiser; The Bath Express and County Herald; The Birmingham Morning News; The Tottenham Advertiser; etc.

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

Mr. Erichsen, London; Dr. Smart, Haslar; Dr. Broadbent, London; Dr. George Johnson, London; Mr. Holmes, London; Mr. Dalby, London; Mr. Jonathan Hutchison, London; Mr. Teevan, London; Mr. Griffith, Wrexham; Our Dublin Correspondent; Dr. G. Hett, London; Mr. Reeves, London; Our Manchester Correspondent; Dr. A. S. Taylor, London; Dr. Wiltshire, London; Dr. Clay Shaw, Leavesden; Mr. Eastes, London; Dr. J. W. Moore, Dublin; Our Glasgow Correspondent; Dr. Edis, London; Mr. Waters, Worcester; Dr. Balthazar W. Foster, Birmingham; Dr. Morell Mackenzie, London; Dr. J. Braxton Hicks, London; Dr. Barnes, London; Mr. W. Druce, Oxford; Dr. W. Squire, London; Dr. C. Dukes, Rugby; Dr. Sutton, London; Dr. J. Rogers, London; M.D.; The Secretary of Apothecaries' Hall; The Registrar-General of England; The Registrar-General of Ireland; Mr. Wanklyn, London; The Registrar of the Medical Society of London; Mr. J. W. Langmore, London; Dr. Farquharson, London; Mr. Anningson, Cambridge; Rev. Dr. Haughton, Dublin; Dr. A. B. Duffin, London; Mr. J. T. Clover, London; Dr. Leith Adams, London; The Secretary of the Clinical Society; Mr. Teevan, London; Dr. De Soyre, Paris; A Member; Dr. White, Lavenham; Dr. Desmond, Liverpool; Dr. Aveling, London; Mr. Kent Jones, Beaumaris; Mr. J. W. Groves, London; The Secretary of the Pathological Society; Inquirers, London; Our Own Correspondent, Cape Coast Castle; Dr. Sawyer, Birmingham; Mr. Gravely, Newick; Dr. Morehead, Edinburgh; Dr. McDermott, Kells; Mr. S. Wood, Shrewsbury; Mr. Bridger, Cottenham; Dr. Squire, London; Mr. T. O. Wood, Maidstone; Mr. W. Whitehead, Manchester; Dr. Marcet, Nice; Mr. Poole, London; etc.

BOOKS, ETC., RECEIVED.

The Place of the Physician: with other Essays. By James Hinton. London: H. S. King and Co. 1874.