

to a sound condition. M. Labbé mentioned several other cases in which the most excellent results had rapidly followed the application of the actual cautery to the flaps of amputation-wounds, and other examples of hospital gangrene. There is not the same fear here of actual cautery as in London hospitals; and I incline to think that its full value is not sufficiently appreciated by the London surgeons.

Paris, December 24th, 1874.

EDINBURGH.

[FROM OUR OWN CORRESPONDENT.]

The Cold Weather and the Death-rate.—Death of Dr. W. Dumbreck.—Hospital Sunday.—University Examiners.—Election of Managers of the Infirmary.—The Lady Question.

THE death-rate for the past week has reached the very high figure of 38 per 1,000, and this fact might well give rise to serious alarm in the face of the recent epidemic of scarlet fever, which has been prevalent in the town, were it not that, on looking into the causes of death, we find only two put down to fever of any kind, while the great rise is due to heart and chest-diseases and "old age". There is no doubt that the very great fall of temperature which has been experienced here in the last week or two has carried off large numbers of the aged inhabitants, whilst among children its effects have been nearly as severe. Here, at all events, we are paying a high penalty for the pleasures of an "old-fashioned" winter, for in none of the severest epidemics of fever and small-pox has so high a mortality been registered in Edinburgh.

We are sorry to record the death of Dr. W. Dumbreck, one of the oldest members of the medical profession here. Till within a few weeks of his death, which occurred at the age of 74, he was engaged in practice, and was in the enjoyment of very fair health. He caught a severe cold about a month ago while engaged in professional work, from which he never rallied. Dr. Dumbreck was a native of Edinburgh, and was for thirty years an examiner in the Royal College of Surgeons, which office he resigned on being appointed, a few years ago, one of the Examiners in Medicine in connection with the University. He long enjoyed a very considerable practice.

The amount received in aid of the Infirmary from the various churches, the result of the collections on Hospital Sunday, is stated to be about £1,550. It is to be noted that, while two of the episcopal churches head the list with £157 and £126 respectively, the highest figure of any of the Presbyterian churches is £77, none of the others—either Established, Free, or United Presbyterian—showing a larger amount than £50. This is a somewhat singular result in a Presbyterian country, and shows either that the wealthier classes mostly belong to the alien church, or that the methods of collection make a vast difference in the amount collected.

The first election of examiners to the University is to take place at the end of this month, and already we hear of several local candidates mentioned for the various subjects, any of whom would do the work satisfactorily; and of course it is to be expected that a good many strangers will put themselves in nomination also. One marked feature in the method of application is, that no testimonials to proficiency are to be sent in by any of the local candidates, and not more than four by anyone from a distance. This is really a good step in a right direction.

There was a general meeting of the Infirmary contributors on Monday afternoon, for the purpose of electing the six managers, whom they have the right of appointing. An unusual amount of interest is connected with this meeting, as for the past few weeks an agitation has been on foot for the purpose of promoting the election of two ladies to fill two of the vacant seats at the Board. The ostensible reason given was, "that the services of ladies on the Board of Management would be of the utmost value, both with regard to the care and comfort of the sick poor, and to the domestic arrangements of the institution". It is curious that the institution has managed to exist and carry on its work with a very high degree of efficiency hitherto, and that, so far as can be made out, no charge of want of care of the patients, or of anything faulty in the domestic arrangements, has been made to justify the desired change in the constitution of the Board. Of course, an opposition list was proposed, in which the lady element was omitted. On the vote being taken on the proposal "to take two ladies on the Management", there was found to be a large majority against the motion, and six gentlemen were accordingly elected. The friends of the ladies protested; on what grounds, or with what effect, is not quite clear.

We had hoped that, after several serious battles, the lady question was set at rest by the migration of the lady students in a body to London; but it really looks rather as if the endeavour to put ladies on to the management of the Infirmary were a strategic flank movement in case the question of the female medical student should again crop up.

ASSOCIATION INTELLIGENCE.

COMMITTEE OF COUNCIL.

NOTICE OF MEETING.

A MEETING of the Committee of Council will be held at the Office of the Association, 36, Great Queen Street, London, on Thursday, the 14th day of January next, at *Two o'clock in the afternoon.

FRANCIS FOWKE,
General Secretary.

36, Great Queen Street, London, December 23rd, 1874.

BATH AND BRISTOL BRANCH.

THE third ordinary meeting of this Branch will be held at the Royal Hotel, College Green, Bristol, on Thursday, January 14th, at 7.30 P.M.; FREDERICK MASON, Esq., President, in the Chair.

E. C. BOARD, *Honorary Secretary.*

Clifton, December 29th, 1874.

BIRMINGHAM AND MIDLAND COUNTIES BRANCH: MICROSCOPICAL SECTION.

A MEETING of the above Section was held in Queen's College, Birmingham, on December 11th; Mr. F. E. MANBY, President, in the Chair.

Phthisical Sputa.—Dr. SAWYER read a paper on this subject, and on the method and value of a microscopical examination; exhibiting samples under the microscope. A paper on the examination of phthisical sputum appeared in the *Lancet* in 1868, and the method of procedure therein advised Dr. Sawyer had often found in practice to be most satisfactory. If we compress a portion of phthisical sputum on a slide, we can readily see, with a quarter-inch power, young and old cells, mucus- and pus-corpuscles, blood-discs, "exudation-corpuscles", etc.; but such a plan will not readily show minute portions of pulmonary tissue, and these are the characteristic marks of the destruction of lung-tissue. Following Dr. Fenwick, he had found it best to slowly boil about two drachms of the sputum to be examined in a test-tube, with an equal quantity of solution of caustic soda, which destroys the ropiness. Mucus- and pus-corpuscles are disintegrated; while fragments of less easily destroyed tissue, as minute portions of lung-tissue, fall to the bottom of the tube, and may be removed by a pipette, and placed on a slide for microscopical examination. We may find beautifully slender and curling fibrils of the yellow elastic tissue, or scraps of the smallest bronchial tubes, or shreds of the outlines of groups of air-cells. These are very attractive microscopic objects. In the field, at once may be seen the outlines of half a dozen groups of air-cells clearly marked, with traces of red blood-cells, and scattered portions of coal, or other hard and black insoluble matter. In cases of any doubt, the discovery of fragments of pulmonary tissue in the expectoration will furnish interesting confirmatory evidence of the condition of the patient.

Sections through Small-pox Pustules.—Dr. RICKARDS showed various sections, vertical and horizontal, of these pustules; and described the appearances presented.

Epithelial Cancer of Eyelid.—Mr. LLOYD OWEN contributed sections illustrative of a case of this disease under his care, the tumour having been removed by operation.

Sections of Spinal Cord.—Mr. PHILIP BINDLEY exhibited some sections of a healthy spinal cord. After the sections had been tinted with carmine, they were washed in spirit until all water was removed, and were then placed in turpentine for five or six days, and afterwards mounted in balsam. The axis-cylinders, nerve-cells and their processes, and the blood-vessels with the nuclei, were all well displayed.

Cystine.—Mr. F. E. MANBY showed a slide of cystine from a specimen of urine passed that morning by a lad of twelve years. The patient had passed a small waxy-looking cystine calculus, when only twelve months old, *per urethram*. This was about the size and shape of a grain of wheat. At ten years old, he showed symptoms of vesical calculus, and a cystine stone of a most perfect and typical character was removed by lateral operation by Mr. Newnham. This stone weighed ninety grains. Since the operation, symptoms of stone in the right kidney had developed themselves. The bladder having been proved to be free from a second calculus, it was probable that a stone existed in

* This was announced as 3 o'clock, in error, in the notice of the 26th ultimo and 2nd instant.

the pelvis of the right kidney. Pus and cystine were constantly passed in the urine; and attacks of pain, though not frequent, were severe. There was no hereditary history of stone. The family are of a distinctly neurotic type.

Staining Animal Tissues.—Mr. LAWSON TAIT, at a previous meeting, detailed and illustrated his improved process of staining by means of hæmatoxylin. He also showed a mounted preparation of the scolex of *tænia luapicollis* removed from the broad ligament of a heifer.

BIRMINGHAM AND MIDLAND COUNTIES BRANCH: ORDINARY MEETING.

THE third ordinary meeting of the session was held at the Midland Institute on December 10th, 1874; present, W. C. GARMAN, Esq., President, in the Chair, and thirty-seven members and visitors.

New Members.—The following members of the Association were elected members of the Branch: Mr. Richard Smith, Digbeth; and Messrs. F. G. Hamilton and E. Potts, Queen's Hospital, Birmingham.

Branch Council.—Mr. J. Vose Solomon and Mr. T. H. Bartlett were elected members of the Council of the Branch.

Subscriptions to Branch and Sections.—After some discussion, a motion to raise the Branch subscription to 5s. *per annum*, and to make this sum confer on all members of the Branch the privileges of membership of the Sections, was rejected, and it was resolved, "That the subscription to the Parent Association and Branch remain as at present (£1 : 3 : 6), and that a subscription of £1 : 6 admit to the Association, the Branch, and all its Sections."

Alteration of Rules of Branch.—It was resolved, on the motion of Mr. HUGH KER (Cradley), seconded by Mr. H. L. BROWNE (West Bromwich), "That in Rule 9, line 7, the words "at least a week previously" be altered to "at least two weeks previously"; and that the Council be requested to prepare a copy of the Rules of the Branch for circulation among the members."

The next Ordinary Meeting of the Branch was arranged to be held on January 21st, instead of January 14th, the regular day, in consequence of the closure of the Midland Institute.

Papers.—The following papers were read.

1. Dr. RICKARDS showed the remains of a Hæmorrhagic Clot of the size of a horse-bean, fawn-coloured, eleven months old, situated in the outer margin of the right corpus striatum. The patient from whom it was taken, a woman aged 25, had had rheumatic fever with severe cardiac complications thirteen months before her death a few days ago. During convalescence, complete left hemiplegia suddenly came on; the facial paralysis disappeared in two days; the limbs remained paralysed. She died of pulmonary engorgement, caused by stenosis of the mitral valve, which was such as not to permit a crow-quill to pass through that valve. Dr. Rickards considered the cerebral hæmorrhage due to embolism. Under the microscope, the clot was seen to consist of blood-crystals, blood-pigment, cholesteroline, and fibrous tissue.

2. Mr. SAMPSON GAMGEE read a paper entitled Historical and Clinical Notes on the Past, Present, and Future of Surgical Practice.

SOUTH-EASTERN BRANCH: EAST AND WEST SUSSEX DISTRICTS.

A CONJOINT meeting of the above districts was held at the Royal Pavilion, Brighton, on Friday, November 20th; Sir J. CORDY BURROWS in the chair. Twenty-six members and two visitors were present. In the course of his opening remarks, the Chairman said he felt he ought to bring one subject before the meeting in such a way that the public should know of it, and even that the Committee of Council of the Association should be led to take some steps to remedy the present state of things; viz., the inadequate remuneration which the members of the profession receive for their services to the public. Sir Cordy showed that, although the necessities of life have largely increased in cost, there has been hitherto no commensurate increase in the scale of medical fees, though there has been an increase in salaries, wages, and remuneration in almost all other professions and trades.

Communications.—1. *Treatment of Neuroses by Phosphorus.*—Mr. T. F. SANGER of Alfriston made some practical remarks on the treatment of neuroses by phosphorus, which he had been induced to try through an article in the JOURNAL in October 1872 by Mr. Messenger Bradley of Manchester. The preparations which Mr. Sanger used were the ethereal solution (4 grains in 100), and the alcoholic solution (1 in 100); the dose of the former being two to four drops; of the latter, five to ten drops. He had given it with invariable relief in forty

or fifty cases of neuralgia, excepting those proceeding from hepatic congestion, which he found speedily cured by half a drop of croton oil with five grains of compound rhubarb pill. His success with the remedy in neuralgia induced him to try it in other diseases which owed their origin to want of nerve-power, proceeding from innutrition of the nerve; and he detailed the particulars of four cases, by way of illustration, in which cure or signal benefit had resulted; viz.: 1. A case of paralysis agitans, in a woman aged 45, where the disease had existed four years, and was cured in two months; 2. A case of paraplegia after diabetes and sunstroke, in a man aged 46, where recovery was nearly perfect in four months; 3. A case of a widow aged 83, suffering from neuralgia of the sciatic nerve, with severe nocturnal exacerbations, which had been entirely unrelieved by morphia, and only temporarily alleviated by chloral, but was cured by the phosphorus in ten days; 4. A case of a female aged 40, with paraplegia of four years' standing, in whom considerable restoration of motor power followed treatment for two months by phosphorus, in combination with small doses of tincture of perchloride of iron.

2. *Tumour of the Thyroid Gland.*—Mr. H. R. TICEHURST of St. Leonard's read particulars of a case of tumour of the thyroid gland, which he had removed by means of the galvanic cautery. The specimen, which weighed 25½ ounces, was exhibited. The patient was a female aged 46, a servant. The tumour was first noticed twenty-two years ago, being then of the size of a pea, one inch and a half to the left of the thyroid; it increased rapidly towards the middle line, and soon covered the entire region of the thyroid; but had not grown much for the last three years. Two years ago, it was tapped, and injected with iodine; only blood escaped. Its form and size were those of a small melon; it was perfectly movable and pendulous; not pulsatile. On November 4th, Mr. Ticehurst proceeded to remove it, the patient being well under the influence of chloroform. A vertical incision was made over the tumour in the mesial line, and the growth was separated as far round as possible by the handle of the knife; both sterno-thyroid muscles were found flattened out over the tumour. The growth was then removed by the galvanic cautery. No hæmorrhage occurred. The pedicle was found to be osseous, the greater part being left behind. The patient bore the operation well. Severe constitutional disturbance ensued on the following day; this, however, soon subsided, and, with the only drawback of an abscess forming on the right side of the neck, healing progressed satisfactorily, and by December 1st the patient was sitting up, the bony pedicle becoming congested, only a small portion having suppurred away. The tumour was smooth and globular, yellowish in colour, and covered with a thick capsule of connective tissue. It was semi-solid, and weighed 25½ ounces avoirdupois; some large veins ramified over the surface, and on the anterior aspect was a small opening, through which it had been punctured and injected. On making a section of the growth, a kidney-shaped cavity was found about its centre, lined with a distinct membrane of its own; it contained some bluish green fluid and *débris*, probably the remains of iodine, etc. Near the surface, some blood-cysts were found. The rest of the tumour was semi-solid, and contained several small cysts scattered through the spongy portion. Under the microscope, the growth appeared to consist of fibrillated trabeculae of varying size and shape, filled with a colloidal substance, such as is found in hypertrophied thyroid gland, interspersed with cells resembling granulation corpuscles. A somewhat similar growth was removed by the late Mr. Alfred Poland in 1871, the tumour weighing 15 ounces (*Guy's Hospital Reports*, 1870-71). There is also a case of the same kind recorded in Sir James Paget's *Lectures on Surgical Pathology*. The points of interest about this case were—1. The large size of the growth; 2. The duration (twenty-two years); 3. The perfect freedom from hæmorrhage insured by the use of the electric cautery, the dread of which would otherwise have deterred the operator from attempting the removal of so large a growth, occupying important relations with surrounding parts, and abundantly supplied with blood from the enlarged thyroid vessels.

3. Mr. MILLIKIN, instrument-maker to St. Thomas's Hospital, exhibited a new and choice collection of instruments, such as had been recently shown at the Association meeting at Norwich, with several additions.

Two new members were nominated; viz., Mr. E. S. Medcalf of Hove and Mr. Charles Braid of Hurstpierpoint.

The Dinner took place in the Banqueting Room of the Pavilion, upwards of thirty members and visitors being present, including Sir Edward Creasy, the Colonel of the Scots Greys, etc.

By the kindness of the Directors, the Aquarium was thrown open to members of the Association on presenting their cards. A vote of thanks was duly recorded at the meeting to the Town Council for granting the use of the rooms at the Pavilion on this occasion, and also to the Directors of the Aquarium for the above act of courtesy. Sir J. C. and Lady Burrows subsequently entertained the members of the

Association and their ladies at a *conversazione* held at the Museum and Public Library.

The next meeting is to be held at Tunbridge Wells in March 1875; Blackall Marsack, Esq., in the chair.

MIDLAND BRANCH: SPECIAL MEETING.

A SPECIAL general meeting of this Branch was held in the boardroom of the County Hospital at Lincoln on December 18th.

The following members were elected on the Council of the Branch, according to No. 8 of the rules lately adopted:—Dr. A. Mercer Adam (Boston); Dr. Mitchinson (Lincoln); Dr. C. H. Marriott, Dr. John Barclay (Leicester); Dr. W. Tindall Robertson, Dr. C. Bell Taylor (Nottingham); Dr. Ogle, Dr. Webb (Derby).—Dr. C. Harrison (Lincoln) was elected Honorary Secretary and Treasurer of the Branch. Dr. L. W. Marshall was elected Honorary Secretary for Nottingham, and Dr. W. Edgar Buck for Leicester.

Members of the Association wishing to join the Branch are requested to communicate at once with the Honorary Secretary and Treasurer.

SOUTH-EASTERN BRANCH: EAST SURREY DISTRICT.

A MEETING was held on December 10th, at the Greyhound Hotel, Croydon, at 4 P.M.; H. T. LANCHESTER, M.D., in the Chair. Fifteen members and two visitors were present.

Papers, etc.—1. Dr. WALTERS read the particulars of a case of Poisoning by Arsenic (ten grains); also a case of Poisoning by Hydrocyanic Acid, in which there were no convulsions. In neither case was *post mortem* examination ordered by the coroner. He also described the removal of a large Naso-pharyngeal Polypus (exhibited) by passing two fingers into the mouth behind the soft palate, and tearing the attachment of the growth by forceps passed along the floor of the nares.—A discussion ensued, in which Messrs. E. H. Galton, Dr. Lanchester, Dr. Grabham, Messrs. Stilwell and Purvis, Dr. Moxon, Dr. Ilott, and Dr. Miller, took part.—In the course of the discussion, Dr. Grabham described the symptoms of arsenical poisoning in one hundred and fifty cases at Bradford, from accidental admixture in peppermint lozenges. They were various; deep sleep, skin-eruptions, and paraplegia, occurring in different cases. Dr. Purvis also read a case of poisoning by cyanide of potassium.

2. Dr. MOXON read a paper on Paralytic Tremor as a Symptom. He described tremor or trembling as the opposite of spasm. In detailing the different forms, he mentioned one which appeared to be due to involuntary muscular discharges without nervous stimulus, as in the fibrillar trembling of wasting muscles. Allied to this are the tremors of fevers and violent emotion. He alluded to the difficulty of distinguishing between alcoholic paralysis and progressive muscular atrophy. In tremors, both alcoholic and febrile, we recognise a peculiar nervous constitution in those subject to them, and this leads up to spontaneous paralytic tremor. He then described a group of symptoms associated with a peculiar change in the white matter of the brain, called "insular sclerosis", or "*scleroses en plaques*". In this disease, there is tremor without affection of the mind or true paralysis. The tremor ceases when the part is supported, in this differing from paralysis agitans. The nodding of the head is very distinct. There is stiffness of the legs and absence of pains in the legs; in this it differs from locomotor ataxy. The disease would appear to be not uncommon, as there have been five cases in Guy's Hospital this last year. It seems to be invariably fatal. One case, in a girl aged 23, came on after a shock of horror three years before. The arms and legs oscillated on attempting to sit up; speech was syllabic; nystagmus and mental feebleness supervened. A drawing of the brain in section of this case was shown, representing insular grey patches scattered through the white matter. On microscopical examination, these patches showed no trace of nervous matter. Another case also appeared to originate in shock, the woman finding her husband in bed with another woman. In another case, the first noticed symptom was inability to wipe the shoes.—A discussion followed, in which Messrs. E. H. Galton, Stilwell, Dr. Lanchester, Dr. Miller, Dr. Ilott, and Dr. Galton, took part.

3. Mr. STILLWELL (Epsom) read a case of a woman aged 43, in labour with her first child, who died, after delivery and injection of perchloride of iron, of sudden collapse.—Drs. Strong, Hearnden, and Lanchester, made remarks on the case.

4. Dr. MILLER exhibited a left Kidney of normal shape, which was found single in the body; also a Fibroid Growth behind the uterus, freely movable independently of the uterus.

5. Dr. ILOTT read Clinical Cases, and exhibited numerous specimens from the Croydon Hospital. Among the cases was one of fracture of

the cervical spine, with a temperature of 111 deg.; one of strangulated hernia, cured in the night by the patient standing on his head; and one of temporary aphasia following injury to the left side of the head. He also read some cases illustrating the use of the Aspirator.

Dinner.—Fourteen members and one visitor sat down to dinner.

REPORTS OF SOCIETIES.

PATHOLOGICAL SOCIETY OF LONDON.

TUESDAY, DECEMBER 15TH, 1874.

C. J. HARE, M.D., in the Chair.

The Report of the Morbid Growths Committee on Dr. CRISP's case of cancer of the omentum was read. Microscopical examination showed a fibrous stroma, in which were round and oval alveoli full of cells, each containing one nucleus, while others contained a colloid material. In order to determine whether or not the growth was a true cancer of the omentum, the growing edges were examined very carefully, and yellow fibres were found passing into the alveoli. The growth was due to cells accumulating in the alveoli. The yellow fibres contained round cells. The growth sprang from the epithelium of the omentum. From the length of time the preparation had been kept in spirit, it was impossible to be very confident about its histology.

Rare Form of Skin-Disease.—Dr. DUFFIN exhibited a patient with a rare form of skin-eruption, intermediate betwixt erythema multiforme and herpes-iris. The patient was twenty-two years of age, and had suffered for two years from irregular outbreaks, which remained in the same localities. Itching and slight rigors, together with febrile symptoms, preceded the eruption. It commenced with circular flat spots, and spread outwardly, while the centres settled down. The raised patches possessed vessels, and fluid was effused. A secondary eruption formed in time within the first, so that the appearance presented is that of a ring within a ring. Each eruption lasted three or four weeks, but they followed each other so closely as to be almost continuous. Ultimately, brown scabs formed, but there was never any suppuration. It resembled erythema multiforme in the circinnate character of the rash and in the bruised appearance, while rheumatic pains were absent. It approached herpes-iris in its rings within rings.—Dr. HILTON FAGGE said that the absence of rheumatism went against its being erythema multiforme. Such eruptions were covered by the term hydroa.—The CHAIRMAN remarked that dermatological terms were much confused.—Dr. DUFFIN replied that Dr. Fagge's remarks were well worthy of consideration.

Obscure Abdominal Tumour.—Dr. DICKINSON brought forward a case of an obscure abdominal tumour, in which the obscurity was the especial matter of interest. It occurred in a gentleman well known in the political world, who died recently at the age of 76, after having been seen by many prominent members of the profession. He first felt ill in January 1872, and had swelling and redness in the left testicle, with pain. Then followed pain in the region of the left ureter. At first, the pain was dull and heavy, but in time it became agonising. Change of attitude gave no relief. Pain was felt in the lower bowel. This went on for several months, and then set in constipation and vomiting. The pain was worst when the bowels moved. When Dr. Dickinson first saw the patient, he was apparently *in extremis*, and had several bed-sores. At that time, the abdomen was soft everywhere, and not tender on gentle pressure. Deep pressure, however, to the left of the umbilicus produced severe pain. The diagnosis formed, then, was, that there was a tumour in the descending colon, involving the left kidney and ureter, probably malignant in its character, from the cachectic appearance of the patient. There were no symptoms pointing to renal calculus. Shortly after this, the pain abated, and the patient improved in every way. It was thought that this might be due to the tumour becoming somewhat released, or that the diagnosis might be erroneous, and that the tumour was really aneurismal. Fifteen months after this, the patient's general health failed. A pulsation could now be felt, and became definite at the point where the pain was originally felt. There was no pain or inconvenience. The general improvement came on with the administration of strychnia, as a tonic merely. One day at dinner, the patient changed countenance, and the old look of pain returned. He became unconscious and fainted, but, after some brandy, he was taken upstairs. Two days afterwards, he passed a quantity of black blood from the bowels. He partially recovered by means of quiet, and a week after, at dinner again, he gave a cry and fell dead. At the necropsy, an aneurismal tumour, springing from the left side of the aorta, and protruding betwixt the descending colon and the left ureter, was found. This explained the symptoms. It was of the size of the

NAVAL MEDICAL APPOINTMENTS.

BURKE, Surgeon John, to the *Swiftsure*.
 DREW, Surgeon J. B., to the *Flora*, additional, for service in Ascension.
 DUKE, Surgeon Valentine, to the Portsmouth Division of the Royal Marines.
 GRANT, Surgeon Robert, to the *Hector*.
 ISAAC, Surgeon J. B., to the *Duke of Wellington*.
 SWEETMAN, Staff-Surgeon Stephen, second-class, to the *Fox*, additional, in lieu of a Surgeon.

We incline to think that Dr. Mackenzie's best course will be to apply to Dr. Mouat, who advises on these matters in places not in the metropolis. We do not think that any authoritative statement from the Local Government Board has been made on these points.

OBITUARY.

EDWARD WILLSON DUFFIN, M.D., F.R.C.S.

EDWARD WILLSON DUFFIN was born at Halifax, Yorkshire, in April, 1800. In 1817, he matriculated at the University of Edinburgh, where he subsequently graduated in 1821. He became a Fellow of the Edinburgh College of Surgeons in the year following. He first started in practice in Edinburgh. It was mainly through his exertions that the Dispensary for Diseases of the Skin in that city was founded. At that time, he wrote several pamphlets on cutaneous subjects, and especially an essay on Squamous Disorders. In conjunction with the late Professor Lizars, he prepared and collected a number of life-size drawings of Skin-Diseases. After two years, his health failed, and he was recommended to winter in Italy. He passed two years at Florence, and ultimately settled in London in 1828.

He was among the earliest introducers of the operation for strabismus. He pointed out the advantages of a small conjunctival wound, of regulating the amount of muscle divided, and of operating on both eyes in cases of alternate squint. In 1847, he published a work on *Deformities of the Spine*, pointing out especially the utility of graduated muscular exercise in the correction of lateral deformities. In 1850, he operated successfully, and by a new method, on a case of ovarian tumour. In a paper published in the 34th vol. of the *Medico-Chirurgical Transactions*, he insisted upon the great value of the following modifications in the operative procedure then in vogue:—1, making a relatively small incision in the median line of the abdomen; 2, tying the pedicle of the tumour into the mouth of the wound, so as to keep all the cut surfaces extraperitoneal, avoid enclosing ligatures and acquiring greater control over subsequent hæmorrhage; 3, narcotising the patient with opium, and keeping her well under its influence for many days after the operation; 4, keeping a relatively hot moist atmosphere about the patient.

In 1855, Dr. Duffin was elected a Fellow of the London College of Surgeons. He continued in active practice till about 1868, when the infirmities of advancing age compelled him to retire. He was a Fellow of several learned societies.

He died at the residence of his son, after a short illness, of pneumonia, consequent upon renal disease, in the 75th year of his age.

THOMAS ANDERSON, M.D., F.R.S.E.,

LATE PROFESSOR OF CHEMISTRY IN THE UNIVERSITY OF GLASGOW.

DR. ANDERSON died on November 2nd, at the age of 55, at Chiswick. He was born in 1819, and was educated at the University of Edinburgh, where he displayed great interest in the study of chemistry. On leaving college, the desire of prosecuting his favourite pursuit led him to Stockholm, where for some time he studied under Berzelius. Removing afterwards to Germany, he enjoyed at Giessen the prelections of Liebig, besides visiting Berlin and other towns for the purpose of attending lectures or obtaining interviews with all the more celebrated Professors of Chemistry. Returning to Edinburgh, he commenced the teaching of chemistry in the Extramural Medical School. His class attracted attention all over the country, and several of the students who there had the benefit of his instruction have risen to high positions as chemists. Latterly, his fame extended beyond this country, and in his classes were to be found a considerable number of foreign students. The departments of chemistry to which Dr. Anderson had devoted special attention were those relating to agriculture and the products of coal-tar and opium. He had few, if any, equals. In 1848, he was appointed Consulting Chemist to the Highland and Agricultural Society. In 1852, he received from the Crown the appointment of Professor of Chemistry in the University of Glasgow, in succession to Dr. Thomas Thomson. In the university, Dr. Anderson found ample scope for the exercise of his talents as a teacher. The duties of his chair Dr. Anderson continued to discharge with great acceptance till 1869, when he had

a paralytic seizure, which incapacitated him for work. In May last, Dr. Anderson had another stroke of paralysis, and resigned his professorship in July, when Mr. Ferguson was appointed to the chair with his former teacher's cordial approval. Dr. Anderson is survived by Mrs. Anderson and two sons.

JOHN TEMPLETON KIRKWOOD, L.F.P.S.G., M.R.C.S.

MR. KIRKWOOD was born in the town of Ayr in 1812. After a liberal education at the academy of the town, he studied medicine and surgery at the University of Glasgow. He then took the licence of the Faculty of Physicians and Surgeons, and almost immediately joined the Medical Staff of the British Auxiliary Legion, then being raised in this country to support the rights of the Infant Queen Isabella II against Don Carlos. Under Sir De Lacy Evans, Mr. Kirkwood acted for two years with great distinction, gaining two decorations for medical services in the field. In Captain Ball's *Narrative of Seven Years in Spain*, Mr. Kirkwood is spoken of with great praise. On the return of the Legion, Mr. Kirkwood bought a practice in the then thickly inhabited and busy suburb of Somers Town. Here he practised for many years with great success. He was appointed as Medical Officer to the Sick Fund of the Great Northern Railway Company in London, and, after a long and useful service in that capacity, became the Company's Medical Officer in town. When the Midland Company (for which he also acted) demolished Somers Town for their Grand Terminus, Mr. Kirkwood's surgery was removed to Euston Road. Here he continued to practise until his retirement from active life two years and a half ago. He married in 1855, and leaves a widow, but no family. His contributions to medical literature are "A Treatise on Croup", "Papers on the Malignant Fever in Vittoria, 1835-6", and on the "State of the Hospitals in the British Legion". He was by nature generous, kind-hearted, ready to help, and a firm friend. After retirement, he fell into delicate health, and died at Ayr Villa, Maida Vale, on October 7th. He was buried in Paddington Cemetery, Willesden, his remains being followed by a few of his most intimate friends.

MEDICAL NEWS.

APOTHECARIES' HALL.—The following gentlemen passed their examination in the science and practice of medicine, and received certificates to practise, on Thursday, December 31st, 1874.

Clarke, Henry, Penge Park, Anerley
 Crouch, Ernest John, Lewisham, Kent
 Grosholz, Frederick Hermann Varley, Walkden, Bolton

MEDICAL VACANCIES.

THE following vacancies are announced:—

ARMY MEDICAL DEPARTMENT—Surgeons. Applications to be made to the Director-General of the Army Medical Department.

ATHY UNION, co. Kildare—Medical Officer and Public Vaccinator. Salary, £120 and fees.

BAKEWELL UNION—Medical Officer for the Bakewell District and Workhouse. Salary, £25 and £36 per annum respectively.

BALLACHULISH SLATE QUARRIES—Medical Officer. Salary, £200 per annum. Testimonials to be sent in to J. Gardner, Ballachulish, N.B., on or before the 14th inst.

BECKETT HOSPITAL AND DISPENSARY, Barnsley—House-Surgeon. Salary, £140 per annum, with furnished rooms, gas, and coals.

BIRMINGHAM GENERAL DISPENSARY—Resident Surgeon. Salary, £130 per annum, with furnished apartments, coals, light, and attendance. Applications on or before the 20th inst.

BLACKBURN UNION—Medical Officer for the Harwood District. Salary, £25 per annum.

BRADFORD UNION—Medical Officer for the Workhouse. Salary, £225 per annum.

BRIDGWATER UNION—Medical Officer for No. 2 District. Salary, £70 per annum.

CASTLE WARD UNION—Medical Officer for the Ponteland District. Salary, £20 per annum. Also, the Workhouse. Salary, £30 per annum.

DERBYSHIRE GENERAL INFIRMARY—Assistant House-Surgeon. Board, lodging, and washing, but no salary. Applications to Secretary.

ESSEX LUNATIC ASYLUM—Second Assistant Medical Officer and Dispenser. Salary, £100 per annum, with board, lodging, and washing.

FIFE AND KINROSS DISTRICT ASYLUM—Assistant Physicianship. Salary, £80, with board, etc. Apply to Dr. Fraser, Medical Superintendent, Cupar-Fife.

GREAT NORTHERN HOSPITAL, Caledonian Road—One Physician and one Surgeon. Applications to be sent in on or before January 12th, 1875.

HARRIS, Parochial Board of—Surgeon. Salary, £66 per annum, including vaccination and medicine for the poor. The gentleman elected will get £90 per annum for attending the ratepayers and cottars within South Harris. Applications to be made to the Chairman of the Parochial Board of Harris.

HEADINGTON UNION—Medical Officer for the Wheatley District. Salary, £70 per annum.

HITCHIN UNION—Medical Officer for the Workhouse. Salary, £55 per annum.

INDIAN MEDICAL SERVICE—Twenty appointments as Surgeon. Examination in February 1875.

LEEK UNION—Medical Officer for the Endon District. Salary, £20 per annum.

LICHFIELD UNION—Medical Officer for the Alrewas District. Salary, £35 per annum.

LOCHMABEN, Parish of, Dumfriesshire—Medical Officer. Salary, £50 per annum, and fees. Testimonials to be lodged with the Inspector of Poor on or before the 16th instant.

METROPOLITAN ASYLUM DISTRICT—Medical Superintendent of a temporary Asylum for Imbecile Children. Salary, £400 per annum, with furnished house, coals, and gas. Applications on or before the 13th instant.

MIDDLESEX LUNATIC ASYLUM, Hanwell—Assistant Medical Officer.

MITFORD and LAUNDITCH UNION—Medical Officer for the Workhouse. Salary, £45 per annum.

NORTH BRIERLEY UNION—Medical Officer for the Seventh District.

NORTH-EASTERN HOSPITAL FOR SICK CHILDREN, Hackney Road, E.—House-Surgeon. Salary, £100 per annum, with attendance, rooms, coals and light.

NORTH WALES COUNTY LUNATIC ASYLUM—Assistant Medical Officer. Salary, £100 per annum, with board, lodging, and washing. Applications to be sent in on or before the 13th instant.

OKEHAMPTON UNION—Medical Officer for No. 1 District. Salary, £35 per annum. Applications to be made on or before the 22nd instant.

PLYMOUTH UNION—Medical Officer for No. 3 District.

POPLAR and STEPNEY SICK ASYLUM DISTRICT—Assistant Medical Officer to the Asylum.

REDDITCH and DISTRICT MEDICAL ASSOCIATION—Medical Officer. Salary, £150 per annum, with fees and unfurnished house.

ROYAL FREE HOSPITAL—Junior House-Surgeon.

RYDE DISPENSARY—Physician.

SCARBOROUGH UNION—Medical Officer and Public Vaccinator to the Sherburn District. Salary, £38 per annum, and fees. Applications to be made on or before the 13th inst.

ST. BARTHOLOMEW'S HOSPITAL—Assistant Physician.

ST. LUKE'S HOSPITAL FOR LUNATICS—Second Clinical Assistant. Board and furnished apartments.

SHEFFIELD PUBLIC HOSPITAL and DISPENSARY—House-Surgeon. Salary, £100 per annum, with board, lodging, gas, and washing.

SMALLBURGH UNION—Medical Officer for the Ludham District. Salary, £52 14 per annum.

STRATFORD-ON-AVON UNION—Medical Officer for the Welford District and Workhouse. Salary, £50 per annum.

STRATHKINNESS, Village and District of—Medical Officer. Salary, £100 per annum, with board, and £110 from a workmen's club, exclusive of midwifery fees. Apply to Mr. A. Cowper, Kincaid, Cupar Fife.

SWANSEA URBAN and PORT SANITARY DISTRICT—Medical Officer of Health. Salary, £200 per annum, and fees.

TENDRING UNION—Medical Officer for the First and Second Districts. Salary, £97 per annum.

TORPHINS in the Parish of Kincardine O'Neil, Aberdeenshire—Parochial Medical Officer: £45 per annum. Applications to Chairman of Parochial Board.

TOWN'S HOSPITAL and ASYLUM, Glasgow—Medical Assistant. Salary, £80 per annum, with board and lodging. Applications on or before the 2nd instant.

TRINITY COLLEGE, Dublin—Professor of Chemistry: £500 per annum, and fees. Applications to the Rev. Dr. Haughton, Trinity College.

TYNEMOUTH UNION—Vaccination Officer.

UNIVERSITY OF EDINBURGH—Additional Examiner in Medicine.

WHITBY DISTRICT LOCAL BOARD—Medical Officer of Health. Applications to be sent in on or before the 14th instant.

WOOLWICH UNION, Kent—Assistant Medical Officer to the new Infirmary at Plumstead. Salary, £60 per annum, with board, lodging, and washing. An additional salary of £20 per annum will be given for dispensing for the poor of the Plumstead District.

WORCESTER UNION—Medical Officer for No. 2 District. Salary, £45 per ann.

MEDICAL APPOINTMENTS.

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

DAY, Edmund O., M.R.C.S. Eng., appointed Resident Medical Officer to the Royal Infirmary for Children and Women, Waterloo Bridge Road.

DUKE, Douglas W., M.R.C.S. Eng., appointed Surgeon to the East Sussex, Hastings, and St. Leonard's Infirmary.

HARRIES, Thomas D., M.R.C.S. Eng., appointed Surgeon to the Aberystwith and Cardiganshire General Infirmary.

SHAPLEY, H. T., M.R.C.S., appointed Resident Accoucheur to the London Hospital, *vice* R. N. Llewellyn, Esq.

TIDBURY, Robert, M.D., appointed House-Surgeon to the Male Lock Hospital, Dean Street.

WADD, Thomas H., M.R.C.S. Eng., appointed Surgeon to the East Sussex, Hastings, and St. Leonard's Infirmary.

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.

MARRIAGE.

SCHÖN—VENABLES.—On January 6th, at Christ Church, Brondesbury, N. W., by the Rev. Canon Venables of Lincoln, uncle of the bride, James Edward Schön, M.R.C.S. Eng., to Ellen Emma, eldest daughter of the late George Henry Venables, Esq., of Warley Lodge, Brondesbury.

VACCINATION.—An award of £100 2s., from the Local Government Board, for efficient vaccination, was received on the 1st instant by Mr. W. E. G. Pearse, public vaccinator for the Westminster district.—A grant of £8 has been awarded to Mr. R. Jocelyn Swan, for vaccination efficiently performed in the second district of the union of Northfleet.

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, 8.30 P.M. Mr. Henry Smith, "On a Case of Cancerous Tumour involving the Tibia requiring Amputation"; Mr. Thomas Bryant, "On the least Sacrifice of Parts as a Leading Principle of Surgical Practice".

TUESDAY.—Royal Medical and Chirurgical Society, 8.30 P.M. Dr. George Thin, "On the Pathology of Lupus Erythematosus"; Dr. Haynes, "On an Epidemic of Malarious Yellow Fever on board H.M.S. *Doris*, off Port Royal, 1873.

WEDNESDAY.—Hunterian Society, 7.30 P.M.: Council Meeting, 8 P.M.: Dr. Hughlings Jackson, "On Mental Disorders after Epileptic Seizures". Mr. F. M. Corner will show a patient the subject of a Primary Resection of the Ankle-joint, and a case of Wound of the Spine with Symptoms of Lesion on one side.—Epidemiological Society, 8 P.M. Dr. Arthur Ransome, "On the Relations between Diphtheria and Scarlet Fever" (will be read by the Secretary).

FRIDAY.—Medical Microscopical Society, 8 P.M. Annual General Meeting for election of officers and other business.

NOTICES TO CORRESPONDENTS.

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

PUBLIC HEALTH DEPARTMENT.—We shall be much obliged to Medical Officers of Health if they will, in forwarding their Annual and other Reports, favour us with *Duplicate Copies*.

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

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

WE CANNOT UNDERTAKE TO RETURN MANUSCRIPTS NOT USED.

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, 36, Great Queen Street, W.C.

M. D. will feel obliged if any of our readers will inform him whether he is entitled to claim a fee in the following case. A lady told him, when in attendance on a member of her family, that she would soon require his services, as she was near her confinement; but no particulars as to fee or time were mentioned. The next time M.D. called, she declined to see him; and also on two future occasions. He then wrote and asked whether he had given her any offence. She replied, that she was perfectly pleased with him as a medical man, and would send for him when she required him. She has since been confined, but not by M.D.

. Certainly not.

FOREIGN DEGREES.

SIR.—Having but lately spent some time in Germany, and taken the degree of M.D. at the University of Giessen, I feel able and justified in contradicting the statement of your correspondent "Physician" in the JOURNAL of December 19th, that this degree *can* be and is *alone* obtained by examination in English; for, by my intimacy with all the medical faculty, I know as a fact that but one of the professors can speak the English language in even the most broken and imperfect manner. This difference between Giessen and other German Universities, pointed out by your correspondent, therefore, in conferring degrees, does not at present exist.

Stockport, Dec. 22nd, 1874.

I am, etc.,

M. D. GIESSEN.

H. M.—Dr. (?) Lockyer was a great quack of the time of Charles II. His reclining effigies, in thick curled wig and furred gown, were to be seen in the Lady Chapel, Southwark, with his epitaph:

"His virtues and his pills are so well known,
That envy can't confine them under stone," etc.

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, 36, Great Queen Street, W.C., and not to the Editor.

MANAGEMENT OF NERVES OF THE TEETH.

SIR,—As the heading of the report of the paper which I read before the Medical Society of London on November 16th, published in last week's JOURNAL, conveys to the minds of your readers not an indistinct or incorrect impression of the subject, but its direct antithesis, I shall esteem it a favour if you will, in your next issue, give prominence to this letter, calling attention to the fact, and reasserting my convictions of the importance of the statement which I did make—viz., that the retention of the nerves of the teeth should be the first and paramount object of the operator under all circumstances; that it is one that may be successfully attained under some I gave, I hope, satisfactory evidence—I am, sir, faithfully yours,
WILLIAM DONALD NAPIER.

22, George Street, Hanover Square, December 30th, 1874.

LEICESTER SQUARE.—John Hunter lived on the east side of Leicester Square, next door to what is now the Sablonière Hotel. On the west side lived William Cruikshank, whose daughter married Honoratus Leigh Thomas, President of the Royal College of Surgeons, who resided in Leicester Place.

PHYSICIANS AND INFIRMARIES.

SIR,—I cannot let what you say with regard to general practitioners holding M.D. degrees being appointed physicians to public institutions pass without a strong protest. The title of physician is so associated in the public mind with that of the consultant, that to give a general practitioner such a position would be to give him a most unfair advantage over his brethren. At the institution and in the public mind he would rank above the surgeons, whilst in private practice he would be their competitor; and naturally, if the public could have the physician to an infirmary for the same fee as their ordinary medical attendant, what chance would the latter stand in comparison with the former? I am sure no physician should ever be appointed to any charity, unless he give up all surgical and obstetric practice as well as dispensing. If such a person cannot be obtained, let the officer doing the medical work be called medical officer. The governors of all the local charities here have always acted in accordance with these views, and I believe they are concurred in by the Branch I have the honour to represent.—I am, sir, your obedient servant,
JOHN WOODMAN, F.R.C.S. (by Exam.),
Hon. Secretary South Western Branch.

Exeter, Jan. 2nd, 1875.

* * We only stated a matter of fact, and we have to add now that every Licentiate of a College of Physicians is a "physician".

DERMATOLOGIST.—We were once informed by the late Dr. Scott that a dessert-spoonful of the chlorate of soda, put into each basin of water with which the person washes, will remove the icteric hue of the skin.

ON THE RIGHT MANAGEMENT OF THE PUERPERAL STATE.

SIR,—Cases of parturition continually occur in which there is neither protracted suffering, nor, to any appreciable extent, loss of blood. In such cases, I venture to predict that the profession will not be long in arriving at the conviction that the graduated cold douche, applied at the conclusion of labour, is a measure strictly scientific, and capable, under favourable circumstances, of effecting the very best results; nor will the practice probably be restricted to such cases. So far as the local application of cold shall continue to be esteemed a remedy proper and expedient for the arrest of the hæmorrhage incidental to childbirth, so far may the douche, or some modification of it, applied to the spine, still be found the most effectual method for the application of cold. Indeed, I have long since arrived at the conviction that in such cases the routine practice of applying wet cloths to the abdomen is both physiologically wrong and capable of producing disastrous results. For the right suggestion in this, as in many other instances, the profession is indebted to the intelligent observers of former times, who, when they wanted to arrest a hæmorrhage, put a cold key down the patient's back. In doing this, it is very probable they were actuated by no theory, though in reality the practice was in accordance with the true theory—the influence of the spinal cord in regulating the temperature of the body, and thereby arresting hæmorrhage and other abnormal conditions. I am, etc.,
M.D.

Harlesden, January 1875.

FUNGUS OF THE EXTERNAL EAR.

SIR,—In the JOURNAL of December 26th, I observe a memorandum on the above subject. If personal experience should be of any interest, the following is my own. Nearly seven years ago, I suffered for some months from irritation of both ears, brought on by sea-bathing. It commenced in the right ear, the first intimation being a frequent "popping" at night, when lying on it, coming on during sleep and rousing me, and relieved by turning to the other side. In November, after I had given up the bathing, the left ear also began the "popping", with considerable irritation throughout the day. Thinking a little warm oil might relieve it, I dropped some in during the evening, and put in some cotton-wool; then my sufferings began—acute inflammation, profuse discharge, perforation of the tympanum, deafness. I went to London and consulted an aurist. He syringed the ear, blew a gale through it, and put in some cotton-wool. To this last I rather objected, expressing my idea that it had caused the previous inflammation. He thought it unlikely, and wished me to keep it in while on a railway journey of two hours. I agreed, but in less than an hour the pain returned in real earnest. I threw the wool out of the carriage-window, and the pain subsided. The aurist wished me to have the ear syringed every day, and for a time I did so. On one occasion I was surprised to see a dark object, having the size and appearance of a ripe apple-pip, floating on the water. Under the microscope, I found it to consist of a perfect network of fungus, resembling the aspergillus. A few days later, another portion came away, but I never found any afterwards. As the syringing was always followed by pain and discharge, I gave it up. The hearing improved to a certain extent, and I never suffer any pain in the ear now.

I mounted two specimens of the fungus in glycerine, intending to show them to the aurist; but on my acquainting him, by letter, of the circumstance, he did not appear to attach such importance to it as I was disposed to, so I never showed them. Not having examined them since till now, I find they have not improved by keeping, though they may still be recognised. I may remark, that bleached lambs-wool produces no irritation, and that I have never advised cotton-wool since. I am, etc.,
D. McD.

December 29th, 1874.

NOTICE TO ADVERTISERS.—Advertisements for insertion in the BRITISH MEDICAL JOURNAL, should be forwarded direct to the Publishing Office, 36, Great Queen Street, W.C., addressed to Mr. FOWKE, not later than *Thursday*, twelve o'clock.

THE CLINICAL SOCIETY'S REPORT.

SIR,—In the report of a meeting of the Clinical Society at page 819 of your JOURNAL, a short speech is attributed to me. I certainly did not make it, for I was not at the meeting. The error is probably one for which the printer alone is responsible; but, as it may lead to misunderstanding, I must ask you to allow me to correct it.—Yours, etc.,
JONATHAN HUTCHINSON.

15, Cavendish Square, W., January 2nd, 1875.

SIR,—A writer in the *Lancet* has gone out of his way to comment upon the report of a meeting of the Clinical Society which appeared in your JOURNAL of the 26th ultimo. I was unavoidably absent from the meeting in question, but subsequently received, in due course, the authors' MSS. of the abstracts of papers read at the meeting. And I then availed myself of the printed discussion thereon which appeared at once in the *Lancet* to complete the report, intending when I next met my fellow-reporter at the Society to express to him my thanks for the same. I have furnished slips to a reporter of the *Lancet* when he has been absent, and, on the above occasion, certainly did not anticipate any objection to my using in the same way a report which had already been published. Such courtesies as these, I presume, are not uncommon in the case of journalism generally.

The innuendo conveyed by the writer of the paragraph in question, that the reports which appear in your JOURNAL are not usually original, nor the work of your own special staff, you and your readers fortunately know to be false.

January 1874.

Yours faithfully, YOUR REPORTER.

* * The BRITISH MEDICAL JOURNAL employs a staff of three special reporters for the metropolitan medical societies. It has also its own reporters in Edinburgh, Dublin, Liverpool, and other great cities. No other medical journal has an equal or similar staff for the purpose.

ARE THE LONDON HOSPITALS ON CLAY?

SIR,—In a note appended to a letter from one of your correspondents (BRITISH MEDICAL JOURNAL, January 2nd, 1875) on the vexed question of the proposed Hampstead Hospital, it is stated that "nearly every London hospital" is on a clay soil. Surely, the writer of that note is entirely unacquainted with the soil on which the greater part of London—celebrated from the time of the Romans to the present day for the excellence of its soil and situation in reference to health—is built. The fact is, that, from Barking and Woolwich on the east, to Wandsworth and Twickenham on the west, on both sides of the Thames, in a width of from one to three miles, there is a deep fine gravelly soil, beneath which only is the well known London clay. So far from nearly all the London hospitals being built, as it is technically called, "on a clay soil", the reverse is the case. On the north side of the Thames, beginning at the east, we find the London Hospital, St. Bartholomew's, King's College, Westminster, St. George's—all built on a fine bed of gravel; whilst on the south side, Greenwich Hospital, Guy's, the modern St. Thomas's—are all on gravel. If this be true of our large hospitals, it must be true of the majority of the smaller ones, beginning with the Poplar and Victoria Park Hospitals on the east, and ending with the West London at Hammersmith.

I am less certain as to the North London, the Middlesex, and St. Mary's, which may or may not be situated on the border of the clay district, which includes part of Bayswater, Westbourne Park, Regent's Park, St. John's Wood, Holloway, and Hampstead.

If any faults of construction or of situation of our London hospitals, consequent upon their age and the exceeding growth of the metropolis, exist, do not allow the unjust stigma of their being built upon a clay soil to pass uncontradicted. Note also the wisdom of our ancestors in the choice of soil and situation. Nearly all the large hospitals which I have enumerated were erected upwards of one hundred and twenty-five years ago, and were then situated amidst green fields, or in the near neighbourhood of them. A glance at any map of London of over one hundred years ago will confirm this statement.

I am, Sir, your obedient servant,

January 1874. M.D.

* * Our correspondent evidently mistakes sand for gravel. It is quite true that there is a superstratum of "drift, gravel, and sand" over the clay under most of the hospitals he has mentioned; but true gravel is limited to a small part of Hampstead and Highgate, as reference to any geological map will show.

A VET. AND M.R.C.S.—"A skilful leech is better far

Than half a hundred men of war."

So sang Homer, on Machaon's being wounded, as translated by Pope.

"A wise physician, skill'd our wounds to heal,

Is more than armies to the public weal."

Chaucer and Spenser, however, use the word "leech" for the spiritual physician. Farriers were called "horse-leeches"; and persons skilled in the distempers of cows and other horned cattle are, in several countries, to this day called "cow-leeches".

MEDICAL DEGREES AND TITLES.

SIR,—I have read with mixed feelings of amusement and indignation the correspondence that has been going on in the JOURNAL on the subject of the assumption of the title of Dr. by L.R.C.P.s: amusement at the sophistry of the writers, and indignation that members of an honourable profession should be not only willing but anxious to live their lives in a false position. I happen to know a L.R.C.P. who puts Dr. on his cards and doors. I often fancy I should like to look into his letter-box and see how many of his correspondents call him M.D. Your correspondents make great capital of the fact, that the public call all medical men "doctor", and argue from that, that they, the public, do not know the difference between a degree and a license. My experience leads to the opposite conclusion. The public calls us "doctor" because it is a convenient mode of address, and because they think we like it; but I confidently assert that nine out of ten men of average education know right well the difference, and could without hesitation define the two positions accurately.

The facts of the case appear to me to lie in a very narrow compass. The title of Dr. belongs only of right to the holder of a degree, and that degree is a guarantee to the public that the holder has studied and passed an examination in all subjects, a knowledge of which is considered necessary by the University of which he is a graduate. A license, on the contrary, informs the public and all whom it may concern that the holder of it possesses the minimum knowledge with which the law permits a man to practise medicine. If he possess more than the minimum, it is for him to convince the public that he does so.

There are doubtless cases, such as those mentioned by Mr. Manby, when the possession of a degree would be of the utmost advantage to a man in high class practice who wishes to pass on into pure physic; but I would ask your correspondents to simply state the value of a degree to the ordinary general practitioner; I would also ask them to instance any case in which the acquisition of a degree has been of any signal service to a general practitioner (of course excepting the information acquired by the necessary study). Again, should the Universities agree to grant degrees to all men now in practice who are willing to go up for examination (there is no fear, by the way, of the Universities doing so), what would be the result? A general disturbance of the whole state and condition of our profession for a few years, and then the adoption of some higher title to distinguish men of superior attainments. There must be grades in our profession, and those grades must be maintained; and I for one should be sorry to see any attempt at communism amongst us.

In conclusion, I must enter my protest against the almost universal statement that it is the L.R.C.P.s of Edinburgh that most usually assume this title, for I find that Licentiates of all the Colleges, with the sole exception of London, do it, and probably to a greater extent than the Edinburgh ones.

Apologising for occupying so much space, I am, etc.,

ONE WHO STUDIED AT AN UNIVERSITY, BUT TOOK THE
L.R.C.P. EDIN.
December 1874.

SIR.—Pardon my adding another to the already too many letters written upon the subject; but as one who holds neither degree nor license, I may, as an outsider, make one or two remarks in reply to three of your correspondents. "L.R.C.P. Ed." says his qualification "cannot be obtained by a few hours' examination"; but he, perhaps, does not know that a M.R.C.S., L.S.A. Lond., has to undergo only one hour's written and twenty minutes' *viva voce* examination for that honour. To the observation of "Honestas", that "examination-tests for Licenses of Colleges of Physicians are no more strict than those for L.S.A.", I would reply that he cannot have any knowledge of the London College, as the standard for its license is much higher than the standard of half the Universities in the United Kingdom. The examination-papers will prove it, combined with the class of candidates, and the average number of rejections. To an "University Man" I would say, that M.D. is certainly lower than F.R.C.P. Lond., and even in many cases than M.R.C.P. Lond.

There are different classes of M.D.s, and also of L.R.C.P.; and, to my mind, the Scotch M.D.s (excepting Edinburgh) are, certainly, as far as proofs by examination go, below either M.R.C.P. or L.R.C.P. of London. Oxford and Cambridge degrees in medicine—conveying, generally, the fact that the holders are gentlemen, and, to a certain extent, classical scholars—deservedly stand first; and even London, though requiring much more knowledge of, and hard work in, medical subjects than either of the latter Universities, cannot quite hold her head as high. Edinburgh, and Trinity College, Dublin, come next, and even head the list in their respective sections of the kingdom; but for the graduates of the remaining British Universities to aspire to take the same standing is, I think, as presumptuous as for a L.R.C.P. Ed. to put himself on a par with a L.R.C.P. Lond.

December 28th, 1874. Yours, etc., IGUALDAD ANTE LA LEI.

SIR.—Permit me a short space to reply to the communication signed "L.R.C.P. Ed." in your issue of December 19th, especially as it impugns some of my statements in a former letter (facts I still maintain, and am prepared to prove), as well as meaning to annihilate me utterly.

First, I do not write in "ignorance", nor with any intention "to convey a false impression as to the requirements of the Royal College of Physicians of Edinburgh as to their license". I write after a four years' residence and curriculum in Edinburgh, and not as some gentlemen, whose only information is derived from a short and solitary visit to Edinburgh to obtain the L.R.C.P. Nor do I wish to undervalue the Edinburgh College of Physicians, for which I entertain a great respect, and with some of whose examiners, and many of whose licentiates and members, I am on intimate terms; also, let me say I place proper value and honour on the "double qualification" obtained there. My objections are entirely and solely levelled at the L.R.C.P. granted after examination to the men already possessing a diploma, when, in the words of the regulations, "candidates are at once admitted to the second part of the examination", and consequently are entirely excused the first; and so I insist, as an already doubly qualified man. When I went up for the M.D. Edin., I had to pass a far more severe examination, or rather sets of examinations, for my "degree", than I should have had to take the L.R.C.P., notwithstanding what "L.R.C.P. Edin." so stoutly maintains; so I am anything but "quite mistaken". And that the examinations are nothing like "identical", either as far as the number of subjects required, or length of time, etc., can easily be proved by any one who looks into the *Medical Directory*, and it is well known to every resident medical student in Edinburgh. Again, the examiners of the University require, as I was officially informed and proved, the same quality and number of marks for their written and oral questions from all candidates (with no abatement of subjects), whether they already possess one, two, three, or no qualification at all, not to name a subsequent examination after the M.D. in Greek, logic, etc.; so how can it be "as difficult to get the L.R.C.P. as the M.D. Edin."? And if men are equally entitled to be called Doctors, why work for the latter when the former is much more easily obtained; and does it not show the considered honour of the M.D., when the Senatus of the University never address their M.D.s by the title of "Dr."? Now, I think I have shown it is "less difficult" to write L.R.C.P. Edin. than M.D. Edin. after your name; besides, what of that "year of grace", or, as it was wittily called, "year of disgrace", when any qualified man was admitted to the L.R.C.P. Edin. without any examination at all? I can quite believe some solitary M.D. Edin. may have been plucked for the L.R.C.P. & S. Edin.; but that double qualification is not the question. I am talking of the L.R.C.P. Edin. as given to men already with a diploma, and who mostly obtain it "to call themselves Doctors". A man may just get through at one place, and just fail at another; besides, occasionally it happens that a good man may be plucked, and a bad man pass.

I know that the examination mortality for the M.D. Edin. is very high—sometimes near 50 per cent.; and I should like to know what proportion of already qualified men fail at the L.R.C.P. Edin. In my own experience, I do not know of one, but I have known many very moderately-up men go in and win, and amongst my own acquaintance (aye, and on my recommendation), some even who dreaded "the Hall", and took L.R.C.P. instead, merely for the double qualification; but, when obtained (much to their surprise and gratification), they astonished their friends by saying they had taken "a degree in Edinburgh", and then altered their door-plates and cards to "Dr."

Now, again, I ask "L.R.C.P. Edin."—Is that license "as thorough a test of medical and classical knowledge, etc., as the M.D. Edin."? and is it "on a par

with any other Scotch qualification"? I am sure the *cognoscenti* would all say, certainly not. If the title of Doctor be of no importance, then why all this hubbub and unjust assumption of it, and why do doubly qualified men leave England, take a few days' trip to Scotland, and return calling themselves Doctors?

Of course, the public may, and do, call all medical men frequently Doctors, not depending, as "L.R.C.P." seems to say, on "having a medical title", but simply as being a doctor by profession, just as a lawyer, etc.; and so, in a sense, they are Doctors—"the doctor called in". Still, that does not give a man the right to assume the title, and call himself Doctor, unless he could reply to the question, Doctor of what?

The comparison as to the "two marquises" is absurd, because both are unquestionably acknowledged and understood as such, and do not clash: one sits in the Lords as a Peer, the other does not; one has the title and the deeds, the other only the title. In short, their positions are properly defined; while if any qualified man is to call himself Dr., how can the public discriminate, and what is the use of the extra study and time in obtaining the M.D.? Surely, it is more than "the difference between tweedledum and tweedledee".—I am, yours,

January 1874.

M.D. EDIN.

WE are indebted to correspondents for the following periodicals, containing news, reports, and other matters of medical interest:—The Birmingham Daily Gazette; The Western Daily Press; The Manchester Guardian; The Ulster Advertiser; The Sussex Coast Mercury; The Broad Arrow; The Surrey Advertiser; The Bedale and Northallerton Times; The Hackney Express; The Liverpool Porcupine; The Scotsman; The Liverpool Mercury; The Glasgow Herald; The Stroud News and Gloucestershire Advertiser; The Bradford Observer; The Morpeth Herald; The Portsmouth Times; The Western Daily Press; The York Herald; The Sheffield Evening Star; The Brighton Guardian; The Sussex Daily News; The Wrexham Advertiser; The Glasgow Herald; The Sussex Coast News; The Finsbury Conservative; The Berkshire Chronicle; The Hull News; The Southern Times; etc.

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BOOKS, ETC., RECEIVED.

English Men of Science: their Nature and Nurture. By Francis Galton, F.R.S. London: Macmillan and Co. 1874.
A Manual of Hygiene, Public and Private; and Compendium of Sanitary Laws. By Charles A. Cameron, Ph.D., M.D., etc. Dublin: Hodges, Foster, and Co. London: Baillière, Tindall, and Cox. 1874.
Heredity: a Psychological Study of its Phenomena, Laws, Causes, and Consequences. From the French of Th. Ribot. London: H. S. King and Co. 1875.
The Retrospect of Medicine. By W. Braithwaite, M.D., and J. Braithwaite, M.D. London: Simpkin and Marshall. 1874.
Annual Report of the Sanitary Commissioner for the Central Provinces, 1873. Nagpur: 1874.