

ON ASTHMA: ITS PATHOLOGY AND TREATMENT. By I. B. BERKART, M.D., Assistant-Physician to the City of London Hospital for Diseases of the Chest, etc. Pp. 264. London: J. and A. Churchill. 1878.

THIS work is a valuable addition to the literature of asthma, and will be widely read at the present time as an earnest and erudite protest against the validness of the long prevalent theory that asthma is a nervous affection, and in particular a bronchial spasm. Dr. BERKART adds the weight of his reasoning and experience to the view that the asthmatic seizure is due to other and deeper causes than bronchial spasm, e.g., to emphysema with bronchial accumulations, to inflammatory thickening of a portion of the lung, etc.

The history of the literature of asthma is, as may be seen in the interesting early pages of Dr. Berkart's work, an alternate affirmation and denial of the proposition that the malady is one of disordered innervation. Laennec, in the light of whose great discovery all chest-diseases were reconsidered, accepted purely spasmodic asthma as one of the several varieties of the disease, the other forms being those recognised pulmonary affections, in the course of which paroxysmal dyspnoea was of common occurrence. The absence of physical signs and of adequate *post mortem* evidence of pulmonary disease in cases—and most particularly in one case—of fatal dyspnoea, led Laennec and Andral to the admission that asthma arose in certain instances solely from deranged innervation of the lungs and bronchi. The subsequent demonstration by Dr. C. J. B. Williams of the muscular irritability of the bronchial walls to the electrical current, and the further observation of Longlet that irritation of the pneumogastric nerve would also cause the bronchial tubes to contract, gave strong support to the muscular spasm theory. And this theory, notwithstanding many counter-experiments and denials, has, on the whole, firmly prevailed to the present day. In his endeavour to disprove this view and to place the disease on a wider and more distinctly pathological basis, Dr. Berkart shows great ingenuity of argument and extended reading. According to Dr. Berkart's definition, "the antecedents and sequelæ of asthma manifest themselves as one continuous though protracted pathological process". Hence, "asthma is only one link in a chain of quasi-independent affections, which commences with inflammatory changes of the pulmonary tissue, and terminates with emphysema and bronchitis". The antecedent disease is, in the majority of instances (80 per cent.), a bronchitis or catarrhal pneumonia, commonly consequent upon measles or whooping-cough. The sequelæ of asthma are bronchitis and emphysema. Asthma itself is, the author maintains, but a symptom dependent upon pulmonary lesions the result of past inflammatory attacks, or upon more insidious changes of a prematurely senile or degenerative kind. The constitutional condition most favourable to the production of asthma is the rickety. Such we gather to be the author's view of the pathological position of asthma.

The immediate causes calling forth the attacks are numerous and of various kinds; but, whether by pulmonary hyperæmia, bronchitis, or direct blocking, they are all productive of the same result—obstruction of the bronchi.

Respecting the morbid anatomy of the disease, the author has necessarily very little to say that is strictly in point. Death from asthma is the rarest of occurrences, and no *post mortem* examination of a simple and genuine case seems to have been as yet recorded. The case of fatal dyspnoea which served to convince two such accurate observers as Andral and Laennec of the occurrence of purely spasmodic asthma is—we think somewhat rashly—set aside by the author as in all probability one of embolism of the pulmonary artery. A small portion of the base of one lung was, it is true, described by Andral as in a state of pneumonic consolidation, and the clinical history of the case might favour the diagnosis of embolism; but when such an observer as Andral emphatically states that the lungs were with this exception healthy and crepitant throughout, one must conclude that some other condition was present during life to account for the severe and sustained dyspnoea which yet left no trace behind. And, in denying altogether the operation of a nervous agency in asthma, lies, we think, the weak point in Dr. Berkart's argument. He forces us strictly to compare the symptoms during life with what we know or may conjecture of the morbid conditions actually present. In doing this, we are confronted with the fact—difficult to understand from the point of view which altogether excludes perverted nervous agency—that the paroxysms of dyspnoea are quite as severe at the early as in the later periods of asthma, whereas coincidentally and keeping pace with the development of those recognisable lesions of the lungs and heart to which the patient finally succumbs, we get persistent and ingravescent symptoms of a definite kind. And the prognosis of the disease—at least, in its typical varieties—is more favourable than one

could hope for in a degenerative disease of a vital organ. Dr. Berkart truly observes, p. 204, that "the prognosis as to life is in general favourable", especially in the atrophic or emphysematous form, in which the patient may live to an advanced age. Must not the lungs be in at least an average degree of textural integrity in the first instance in such cases to withstand the repeated strain of the asthmatic paroxysm for so long a period? In the "hypertrophic form of the disease", on the other hand, in which interstitial pneumonia of an insidiously progressive kind is the lesion, the symptoms of phthisis soon appear and destroy the patient.

The author strikes the first key-note of all treatment at the same time that he would seem to exclude the asthmatic seizure from being necessarily dependent upon molecular or inflammatory changes in the lungs, when he remarks that, "upon the whole, it may be said that every asthmatic seizure is more or less a preventable accident, so that an efficient and suitable prophylaxis is almost tantamount to a cure".

We must, in conclusion, express our strong approbation of this book as a good honest piece of work. In every page, we find evidence of extensive reading; and, although, as we have very imperfectly pointed out, we cannot admit that the author has yet quite demolished the nervous theory of asthma, he has nevertheless, with great ability and no small success, striven to place the pathology of the disease upon a more material and secure basis, and to render its treatment less hazardous and fanciful.

## SELECTIONS FROM JOURNALS.

### THERAPEUTICS.

TOLERANCE OF OPIUM BY AN INFANT.—Dr. J. L. Little reports (*American Jour. Obstet.*, April 1878) a case where paregoric in small doses was administered to a child three weeks old for the relief of suffering caused by an inflammation of the knee-joint. The child gradually bore larger and larger doses; the paregoric was changed to tincture of opium, and this again to Magendie's solution. Soon the child obtained such a tolerance of this drug that, in a couple of months, from half a drachm to a drachm a day was necessary to quiet it. This state of things continued until the amount consumed by the child, then less than eight months old, was two ounces of Magendie's solution in twenty-four hours. The dose was gradually diminished at the rate of about three drops per day, and, at the time of making the report, but ten drops were given at bedtime. The child's appearance improved very much; it was intelligent, and weighed eighteen pounds.

ABSORPTION OF IODIDE OF POTASSIUM BY THE VAGINAL MUCOUS MEMBRANE.—J. Smolski (*Petersburg. Medicin. Wochenschrift*) finds that iodide of potassium is very rapidly absorbed by the mucous membrane of the vagina, when introduced in large doses in the form of globules with cacao-butter. In twelve hours, of twenty grains, eighteen were absorbed; on the other hand, only two grains and a half out of ten were absorbed. The absorption of a solution in glycerine is slower. Of a solution of twenty grains in about two drachms of glycerine, only two grains and a half were absorbed in twelve hours; and of a ten-grain solution, only one grain and a half in the same time. The rapidity of absorption may be increased by the addition of free iodine.—*Centralblatt für Gynäkologie*, June 8th.

TREATMENT OF CROUPOUS PNEUMONIA BY COLD.—In a paper read before a medical society in Sweden, Dr. P. A. Lewin recommends the local application of cold in croupous pneumonia. He published a memoir on the subject in the *Hygiea* in 1862. Among the numerous advantages of the plan, he signalises the immediate cessation of the oppression and shortness of breath, which may become aggravated under the internal use of antipyretics. The most suitable way of applying cold is, according to the author, the following. A small—and preferably a torn—soft handkerchief is dipped in water at a temperature of 8 to 12 R. (50 to 59 Fahr.), and is then squeezed (not wrung) until the water no longer runs from it when held up; it is then folded up six-fold and laid on the front of the chest—a coarser handkerchief being placed below it to prevent the water from running over the body. The application is removed at intervals varying from eight to twelve or twenty minutes. Water of a lower temperature than that above mentioned must not be used; the handkerchief must be changed or entirely removed whenever a rigor is felt, and not reapplied until the rise in temperature demands it. This method of applying cold renders unnecessary the use of general baths in pneumonia.—*Allgemein. Medicin. Central-Zeitung*, April 6th.

# ASSOCIATION INTELLIGENCE.

## COMMITTEE OF COUNCIL: NOTICE OF MEETING.

A MEETING of the Committee of Council will be held at the Freemasons' Tavern, Great Queen Street, Lincoln's Inn Fields, London, on Wednesday, the 10th day of July next, at Two o'clock in the afternoon.

FRANCIS FOWKE,  
*General Secretary.*

36, Great Queen Street, London, W.C., June 12th, 1878.

## BRITISH MEDICAL ASSOCIATION: FORTY-SIXTH ANNUAL MEETING.

THE Forty-Sixth Annual Meeting of the British Medical Association will be held at Bath, on Tuesday, Wednesday, Thursday, and Friday, August 6th, 7th, 8th, and 9th, 1878.

*President:* M. A. EASON WILKINSON, M.D., F.R.C.P., Senior Physician to the Manchester Royal Infirmary.

*President-Elect:* R. W. FALCONER, M.D., F.R.C.P., D.C.L., Consulting Physician to the Royal United Hospital, Bath.

An Address in Medicine will be given by HENRY F. A. GOODRIDGE, M.D., F.R.C.P., Bath.

An Address in Surgery will be given by C. G. WHEELHOUSE, F.R.C.S., Leeds.

An Address in Forensic Medicine will be given by DOUGLAS MACLAGAN, M.D., F.R.C.P. Edin.

The business of the Association will be transacted in Five Sections, viz.:-

**SECTION A: MEDICINE.**—*President:* T. Grainger Stewart, M.D., F.R.C.P. Edin. *Vice-Presidents:* B. Foster, M.D., F.R.C.P.; Thos. Clifford Allbutt, M.D. *Secretaries:* Thomas Cole, M.D., 17, Paragon, Bath; Chas. Albert Hingston, M.D., 3, Sussex Terrace, Plymouth.

**SECTION B: SURGERY.**—*President:* G. W. Callender, F.R.C.S., F.R.S. *Vice-Presidents:* Furneaux Jordan, F.R.C.S.; W. Stokes, M.D. *Secretaries:* J. H. Morgan, F.R.C.S., 12, Chapel Street, Park Lane, London; J. F. Parsons, Esq., Frome.

**SECTION C: OBSTETRIC MEDICINE.**—*President:* A. H. McClintock, M.D., LL.D. *Vice-Presidents:* James Watt Black, M.D.; H. Macnaughton Jones, M.D. *Secretaries:* Heywood Smith, M.D., 2, Portugal Street, Grosvenor Square, London; Henry Lawrence, Esq., 5, Unity Street, Bristol.

**SECTION D: PUBLIC MEDICINE.**—*President:* J. T. Arlidge, M.D., F.R.C.P. *Vice-Presidents:* D. Davies, Esq.; Francis Thomas Bond, M.D. *Secretaries:* F. Vacher, Esq., 35, Hamilton Square, Birkenhead; W. Harling Sissons, Esq., 3, Priestgate, Barton-on-Humber.

**SECTION E: PHYSIOLOGY.**—*President:* John G. McKendrick, M.D., F.R.C.P. Edin. *Vice-Presidents:* Henry Power, F.R.C.S. *Secretaries:* R. Shingleton Smith, M.D., Clifton, Bristol; A. E. W. Fox, M.D., 16, Gay Street, Bath.

*Honorary Local Secretary:* R. S. FOWLER, Esq., 6, Belmont, Bath.

*Tuesday, August 6th.*

11 A.M.—Service at the Abbey. Sermon by the Bishop of Bath and Wells.

2 P.M.—Meeting of Committee of Council.

4 P.M.—Meeting of the Council, 1877-78.

8 P.M.—General Meeting.—*President's Address.*—Annual Report of Council, and other business.

*Wednesday, August 7th.*

9.30 A.M.—Meeting of Council, 1878-79.

11 A.M.—Second General Meeting.

12 A.M.—Address in Medicine.

2 to 5 P.M.—Sectional Meetings.

9 P.M.—Soirée at the Assembly Rooms by the Mayor and citizens of Bath.

*Thursday, August 8th.*

9 A.M.—Meeting of the Committee of Council.

10 A.M.—Third General Meeting.—Reports of Committees.

11 A.M.—Address in Surgery.

2 to 5 P.M.—Sectional Meetings.

6.30 P.M.—Public Dinner at the Assembly Rooms.

*Friday, August 9th.*

10 A.M.—Address in Forensic Medicine.

11 A.M.—Sectional Meetings.

2 P.M.—Concluding General Meeting.

## EXCURSIONS.

Friday Evening.—Soirée at the Colston Hall, Bristol, by the Bristol members of the Branch.

On Saturday there will be excursions to Longleat, Bowood, Wells and Cheddar, Malmesbury, Berkeley Castle, and (if a sufficient number of excursionists) to the Valley of the Wye.

The Honorary Secretary will endeavour to arrange for gentlemen well acquainted with the locality to accompany the parties on each excursion.

Any information will be given by the Secretary to the Excursion Committee, 6, Belmont, Bath.

Members of the Association will receive cards for the above proceedings, evening meetings, etc., at the Assembly Rooms, Bath.

## ANNUAL MUSEUM.

The Tenth Annual Museum of the British Medical Association will be held at the Assembly Rooms, Bath, and will be open daily from 10 A.M. till 6 P.M., on August 6th, 7th, 8th, 9th, for the exhibition of the following objects:—

1. Latest Inventions in Medical and Surgical Instruments and appliances of all kinds.

2. New Chemicals and Apparatus; New Drugs and their preparations; and New Articles of Diet for Invalids.

3. Drawings, Diagrams, or Models illustrating the Ventilation of Hospitals and Private Dwellings.

4. General Pathological Specimens; with Photographic Models, Drawings, etc., illustrating disease; and Microscopic Pathological Specimens.

The following is a list of the Museum Committee, to any member of which communications, etc., may be addressed. Sections 1, 2, and 3: Dr. Spender, 17, Circus, Bath; F. K. Green, Esq., 3, Gay Street, Bath. Section 4: Dr. Cole, 17, Paragon Street, Bath; G. E. Lawrence, Esq., Claverton Street, Bath.

## NOTICE TO EXHIBITORS.

Application to be made as soon as possible, at the same time giving a list of objects, and mentioning the space required. Each object to be accompanied by a printed or written description attached to the article exhibited.

All parcels to be delivered on or after July 27th, and not later than August 3rd, and to be removed within three days after August 12th. They must be addressed to Drs. Spender and Cole respectively, at the Assembly Rooms, Bath. All expenses of carriage and all risk to be borne by the Exhibitors. A card bearing the name and address of the exhibitor to be enclosed in each package, ready to be fixed on the outside.

N.B.—Specimens and Instruments which have been exhibited at former meetings cannot be received on this occasion.

All communications to be addressed to Drs. Spender and Cole, as above.

## GLASGOW AND WEST OF SCOTLAND BRANCH.

THE annual meeting of this Branch will be held on Tuesday, the 25th instant, in the Faculty Hall, 242, St. Vincent Street, Glasgow, at 2 P.M.: Dr. ANDREW FERGUS in the Chair.

The subject of the Duke of Richmond's Medical Act Amendment Bill will be introduced; and it is expected that some interesting discussion will take place.

The members will afterwards dine together at 5.30.

Glasgow, June 18th, 1878.

## SOUTHERN BRANCH.

THE fifth annual meeting of this Branch will be held at Salisbury, on Wednesday, June 26th.

1 P.M.—Luncheon at the residences of Mr. Blackmore, Mr. Darke, Mr. Gowing, and Mr. Bennett.

2 P.M.—The general meeting will be held at the Council Chamber, and an address will be delivered by the President-elect, B. G. GOWING, Esq.

During the afternoon, the members will have an opportunity of visiting the Cathedral, the Blackmore Museum, and other places of interest in the locality.

The dinner will take place at the White Hart Hotel at 5 P.M. Tickets 15s. each, including wine.

J. WARD COUSINS, M.D., *Honorary Secretary.*

Southsea, June 18th, 1878.

## BATH AND BRISTOL BRANCH.

THE annual meeting of the Branch will be held at the Mineral Water Hospital, Bath, on Wednesday, June 26th, at 4.30 P.M., when H. MARSHALL, M.D., will resign the Chair to H. HENSLEY, M.D. The members will afterwards dine together at the York House.

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

Bath, June 4th, 1878.

## MIDLAND BRANCH.

THE annual meeting of the above Branch will be held in the Guildhall, Lincoln, on Thursday, June 27th, 1878, at 2 P.M.: President—C. H. MARRIOTT, M.D., Leicester; President-elect—A. MERCER ADAM, M.D., Boston.

After the transaction of the usual business of the Branch, the following papers will be read and discussed.

Cases of Obscure Diseases of the Liver, by Wm. Webb, M.D., Wicksorth.

Clinical Notes, by J. O. Brookhouse, M.D., Nottingham.

On the importance of establishing a temporary adhesion between the Upper and Lower Eyelids (Artificial Anchyloblepharon) in certain cases of disease, and in order to facilitate the performance of some plastic operations, with illustrative cases, by C. B. Taylor, M.D., Nottingham.

Demonstration of Dr. Howard's Direct Method of inducing Artificial Respiration, by J. Wright Baker, Esq., Derby.

The New Wards of the Stamford Infirmary: a contribution to Plans of Hospital Construction, by W. Newman, M.D., Stamford.

On Hospital Insalubrity, by T. Sympson, Esq., Lincoln.

Operations will be performed at the County Hospital at 11 A.M. The new County Hospital buildings are now completed.

Dinner at the Great Northern Hotel at 5 P.M. Tickets, 6s. each.

In order to facilitate arrangements, the Honorary Secretary will be obliged by receiving information from gentlemen who intend to be present at the dinner.

C. HARRISON, M.D., *Honorary Secretary.*  
Lincoln, June 18th, 1878.

## LANCASHIRE AND CHESHIRE BRANCH.

THE forty-second annual meeting of this Branch will take place at the Assembly Rooms, Blackpool, on Friday, June 28th, 1878, at 1 P.M.; Dr. STEELE (Liverpool) President; Dr. LESLIE JONES (Blackpool) President-elect.

Dr. Leslie Jones will give an address, the Report of the Council will be read, and the ordinary business of the Branch will be transacted.

The following communications have been promised.

1. Mr. Reginald Harrison: On the Use of Filiform Bougies with Tunnelled Instruments (Gouley's) in the Treatment of Stricture of the Urethra.

2. Dr. Haddon: 1. Two Cases of Ulcerating Endocarditis, with Temperature Charts and Sphygmographic Tracings; 2. An Easy Way of Noting Cases in General Practice.

3. Dr. Howie: The Grape-Cure in Bilious Nausea and Early Pregnancy.

4. Dr. Bennett: Chronic Cervical Metritis treated by Interstitial Injection coupled with Dilatation.

5. Mr. Lund will show a case of Contracted Fingers, and a case of Ankylosis of the Digital Joints, successfully treated.

6. The Report of the Duration of Infection Committee will be read, and a summary of the results obtained will be given.

Luncheon will be provided at the Assembly Rooms from eleven to one o'clock.

The members will dine together at Bailey's Hotel, at five o'clock. Charge 7s. 6d., exclusive of wine. Gentlemen intending to be present at the dinner are requested to forward their names to Dr. Leslie Jones, Blackpool, not later than June 24th.

D. J. LEECH, M.D., *Honorary Secretary.*  
Manchester, June 13th, 1878.

## SOUTH EASTERN BRANCH.

THE annual meeting of this Branch will be held at the Greyhound Hotel, Croydon, on Wednesday, July 3rd, at one o'clock; Dr. LANCIESTER of Croydon, President-elect, in the Chair.

CHARLES PARSONS, M.D., *Honorary Secretary.*  
2, St. James's Street, Dover, June 18th, 1878.

## SOUTH-EASTERN BRANCH.

A MEETING of the Executive Council of this Branch will be held at the Greyhound Hotel, Croydon, on Wednesday, July 3rd, at half-past twelve o'clock precisely.

CHARLES PARSONS, M.D., *Honorary Secretary.*  
2, St. James's Street, Dover, June 18th, 1878.

## BIRMINGHAM AND MIDLAND COUNTIES BRANCH.

THE annual meeting of this Branch will be held at the Midland Hotel, New Street, Birmingham, on Tuesday, July 2nd. The Chair will be taken by the President, SAMPSON GANGE, Esq., at 3 P.M.

An address will be delivered by the President-elect, Dr. TIBBITS, of Warwick.

The annual dinner will also take place at the Midland Hotel, at 5 P.M. precisely, for the convenience of country members. Dinner tickets, exclusive of wine, 7s. 6d. each.

JAMES SAWYER, M.D., }  
EDWARD MALINS, M.D., } *Hon. Secretaries.*  
Birmingham, June 11th, 1878.

## SOUTH WALES AND MONMOUTHSHIRE BRANCH.

THE annual meeting of this Branch will be held at Neath, on Thursday, July 11th: J. TALFOURD JONES, M.B., President; JOHN RUSSELL, Esq. (Neath), President-elect.

Any members desirous of reading papers, etc., are requested to communicate the titles to either of the Honorary Secretaries.

ANDREW DAVIES, M.D., }  
ALFRED SHEEN, M.D., } *Honorary Secretaries.*  
June 12th, 1878.

## NORTH OF ENGLAND BRANCH.

THE annual meeting of this Branch will be held at Hartlepool, on Thursday, July 25th, at 3 P.M.

G. H. PHILIPSON, M.D., *Honorary Secretary.*  
Newcastle-upon-Tyne, June 8th, 1878.

## METROPOLITAN COUNTIES BRANCH: ORDINARY MEETING.

AN ordinary meeting of this Branch was held at 11, Chandos Street, Cavendish Square, on Wednesday, May 22nd, at 8 P.M.; S. W. SIBLEY, Esq., President, in the Chair.

## VACCINATION.

Dr. J. GREENE (Birmingham) read a paper on Animal Vaccination, which is published at page 889.

Dr. E. C. SEATON read a paper on the Working of the Vaccination Law, which is published at page 887.

Dr. R. CORY said that it was known that cow-pox had been artificially produced by inoculating animals with the virus of small-pox; and thus it had been proved that small-pox could be converted into cow-pox. Again, it had been noticed by many observers on retrovaccination that the lymph, at its first removal, appeared to have undergone degeneration. He had used the Belgian lymph, and had found that the scars were small, and ran through their course more rapidly than those of ordinary lymph. One observer on animal vaccination had found that he could not transmit the lymph from calf to calf for more than ten generations; but, if children were inoculated with the lymph, it appeared to preserve its power indefinitely. Hence animal vaccination was a means of weakening the lymph, not strengthening it. By perseverance, however, and by a proper selection of cases, a weak stock of lymph might be improved. The only argument in favour of the adoption of animal vaccination was the transmission of syphilis, the risk of which, however, was extremely small.

Dr. J. W. TRIPE said that it had been very completely shown that vaccination with the human lymph in present use, if properly performed, was quite effective; and, therefore, it was unnecessary to go back to animal vaccination. Last year, he obtained permission of the London School Board to examine the children of a school in his district, and he found that twenty-five per cent. were inefficiently vaccinated; some had not been vaccinated at all, and others had very slight marks. The district-vaccinator vaccinated the children, but got no pay, having reported them as cases of revaccination. There ought to be better supervision over the vaccination-officers; they should not be under the control of the boards of guardians, but under that of the sanitary depart-

ment, and should be supervised by the medical officers. He did not blame them, or charge them with laxity in performing their duties; but they required better supervision, and he agreed with Dr. Seaton, that the number of vaccination officers was not sufficient. It was said that outbreaks of small-pox could not altogether be accounted for. But he thought that vaccination was done too imperfectly, and for too low fees. Again, if there were but one mark on the arm, the vaccinator, when he again operated, could not get pay, the case being regarded as one of revaccination. He thought that the epidemic of small-pox was not yet at an end; but it had not spread in his district as it did in 1871, because the cases had been isolated and removed early to hospital.

Mr. BONNEY called attention to the importance of revaccination. Practically, in the present epidemic, the public looked to the medical men to stop the course of the disease; and, it being supposed that they failed in doing this, a distrust of vaccination was being spread, which would be difficult of removal. He had removed many cases of small-pox from his district. When the epidemic broke out, if he had been able to vaccinate or revaccinate every person in his district, the disease would have been stamped out; but he was powerless. He was informed by the Local Government Board that they did not supply lymph for the purpose of revaccination.

Dr. SEATON said that the supply of lymph to individual vaccinators by the Government establishment could not be carried out unless a system of payment, etc., were adopted, which he would not like to see introduced. The public vaccinators, however, could make arrangements with the private practitioners for the supply of lymph.

Mr. BONNEY explained that he did not mean that the lymph should be supplied by the vaccination establishment to the practitioner for private purposes, but in aid of the performance of his public duties.

Mr. ALDERSON said that, while the present method of vaccination was successful, if done properly, he would not have recourse to animal vaccination. As regarded the supply, most medical men in good practice could supply themselves, taking care to use the lymph from children whose history was known. He had been able to supply himself and his friends with vaccine matter. He did not believe in the alleged insusceptibility to vaccination; he had failed three times in vaccinating a child, but had succeeded the fourth time. He never failed in vaccinating from arm to arm. He did not consider public superior to private vaccination. Public vaccinators had not time to go into the history of the children, and might thus disseminate the germs of disease. Revaccination ought to be carried out. He did not approve of the reduction of the number of vaccination stations. Every general practitioner ought to be allowed to vaccinate anyone who applied to him, and be paid by the Government for it.

Dr. DUCAT thought that, if public vaccination had not been taken from the district medical officers, the percentage of failures would have been much lessened. The medical officers of the districts would have a better knowledge of individual cases than the public vaccinators, and would be better able to avoid the selection of unhealthy subjects as vaccinifers. He was often in a difficulty when small-pox broke out from want of a supply of lymph. Again, the district medical officer met with many of the children not accounted for in the vaccination returns, but at present it was no part of his business to vaccinate them.

Mr. R. CEELY had used the lymph of Mr. Greene, M. Warlomont, and Dr. Martin with satisfactory results; but the lymph soon wore out unless there were a large stock for selection. Revaccination was a matter of very great importance; it should be cultivated and encouraged. He was much interested in the diminution of the efficacy of lymph by successive transmission through animals. All the animal lymph that he had received from Mr. Greene was as good as any that he had seen; but, without selection, it was liable to degenerate.

Mr. BROWNFIELD thought that, if the number of vaccinating stations were increased to any extent, there would be a difficulty in keeping up a supply of lymph. As regarded revaccination, the difficulty was the low rate of payment; the operation required more lymph and took longer time than ordinary vaccination.

Mr. BLACKMAN had been vaccinating for twenty years, and found the lymph as successful as at first. He was always glad to supply practitioners with lymph on Wednesdays, after he had secured a supply for himself. He thought that all public vaccinators should act in this way. There was a difficulty in getting persons to be revaccinated even from their own healthy children.

Mr. HUDSON said that one way in which small-pox was spread was the manner in which the patients were conveyed to hospital. He thought the age specified by law for revaccination was too far advanced; seven or eight years would be a very good time to begin. He had done revaccination in many cases, but had not been able to charge for it. Revaccination ought to be taken in charge by the Local Govern-

ment Board. He approved of the present system of vaccination; he had not a large district, but could always keep up a good supply. A system of weekly revaccination would be a good thing; but it was only in cases of epidemics of small-pox that people would attend to it.

Dr. HIBBERD was glad to hear that so small a proportion as five per cent. of the children escaped vaccination. It must, however, be remembered that, in some cases, births were not registered; and, in some instances, persons removed from one district to another, and the children were vaccinated twice; hence the number of cases of vaccination was liable to be apparently greater than it really was. He had been surprised at the number of unvaccinated children in schools. The vaccination officer or the medical officer of health should examine the children in schools, and the public vaccinator should be allowed to vaccinate them. Persons removing from a district should be required to register the fact, in cases of removal before a child was vaccinated.

Dr. DUDFIELD did not think that the public vaccinator had power to go into the houses in an infected district and vaccinate the inmates; but that the district medical officers could do this, and perform vaccination and revaccination.

Dr. W. V. LYLE thought the arm-to-arm lymph very good. He referred to cases of outbreak of small-pox in schools, in which the spread of the disease had been arrested by vaccinating other children.

Mr. GREENE wished that there had been more discussion on animal vaccination. He thought that there should be an opportunity of going to the cow from time to time when a supply was required.

Dr. SEATON would have been glad to hear more discussion on Mr. Greene's paper. He did not, however, admit that the prevalence of small-pox was due to the present system of vaccination. He would point out the duties of public vaccinators and district officers in cases of outbreak of small-pox. The vaccination officers were instructed by the Local Government Board to look up the children in the infected houses, and to give notice to the public vaccinator, explaining that the children could not be taken to the vaccinating station. A district medical officer attending a case of small-pox in any house was at liberty to vaccinate the other children, and was entitled to the same pay for this as the public vaccinator; but it was not compulsory on him to do so. In other words, a district medical officer *might* vaccinate the inmates of an infected house; a public vaccinator *must* do so, when the case was reported to him by the vaccination officer.

#### STAFFORDSHIRE BRANCH: ORDINARY MEETING.

THE third ordinary meeting of this session was held at the Board Room of the Mines Drainage Commissioners, 22, Darlington Street, Wolverhampton, on Thursday, May 30th, 1878; present, Dr. ARLIDGE, President, in the chair, and twenty-six members.

*New Members.*—The following members of the Association were duly elected members of the Branch: Mr. John Clare (Hanley); Mr. Dakeyne (Leek); Dr. Daniel (Stone).

*Medical Acts Amendment Bill.*—A memorial in opposition to the above was considered, and afterwards signed by the President on behalf of the members present. It was resolved that the memorial be at once presented to the House of Lords.

*Habitual Drunkards' Bill.*—A letter was read from Mr. STEPHEN ALFORD (London) which stated that Dr. Cameron would, on July 3rd next, propose in the House of Commons that the above Bill be read a second time; also the desirability of local members of Parliament being requested to be present that evening, and, if possible, to give their support to the Bill.

*Specimens.*—1. Mr. LAWSON TAIT showed an Ovarian Tumour.

2. Dr. MILLINGTON exhibited Ivory Dust, Chips, and Jelly.

*Communication.*—Mr. JOHN HARTILL (Willenhall) read a paper on Convulsions during Labour.

#### BORDER COUNTIES BRANCH: SPRING MEETING.

THE spring meeting was held at the Keswick Hotel, Keswick, on June 1st, 1878; Dr. LOCKIE, President, in the chair. There were present eighteen members and one visitor.

A considerable number of those present availed themselves of the invitation of the local members to drive round Derwentwater before the meeting commenced.

*New Members.*—Welby I'Anson, M.B. and C.M.; Charles A. Parker, M.D. and C.M.; and Thomas Hatfield Walker, L.R.C.P. and L.R.C.S.E., were elected members of the Association and Branch. Mark J. Symons, M.B. and C.M., was elected a member of the Branch.

*Representatives of the Branch on the General Council.*—The following gentlemen were elected: J. K. Burt, M.B.; J. Gilchrist, M.D.; S. Lockie, M.D.; M. W. Taylor, M.D.; R. Tiffen, M.D.

*Papers.*—The following papers were read.

1. The General Practitioner in his relation to Public Health and to Sanitary Officers. By Dr. KNIGHT.

2. Surgical Notes; Imperforate Anus; Inflammation of the Antrum; and Sayre's Treatment of Spinal Caries. By Dr. MACLAREN.

3. On the Removal of Cauliflower Excrescence of Uterus by Excision of the Cervix and by the *Ecraseur*, with Specimen. By Dr. TAYLOR.

*Habitual Drunkards' Bill.*—The following resolution, proposed by Dr. TIFFEN, and seconded by Dr. MACLAREN, was unanimously adopted: "That, in the opinion of this meeting, some legislative measure is necessary for the control and cure of habitual drunkards; and that the Habitual Drunkards' Bill, 1877, introduced into the House of Commons by Dr. Cameron, being calculated to secure this object, the Secretaries of the Border Counties Branch be instructed to request the local members of Parliament to support the second reading of the same."

*Dinner.*—The members and their friends dined together at 4 P.M.; Dr. Lockie in the chair, and Dr. Taylor in the vice-chair.

#### THAMES VALLEY BRANCH: ORDINARY MEETING.

A MEETING of this Branch was held at the Greyhound Hotel, Richmond, on June 13th; Dr. PRICE JONES in the chair.

*Papers.*—The following were read.

1. Mr. BALMANNO SQUIRE read a paper on the use of Chrysophanic Acid in Psoriasis and other Skin-Eruptions; and exhibited photographs, which showed the results of treatment.

2. Dr. ATKINSON read a paper on Vaccination and Revaccination.

*Dinner.*—The members and friends afterwards dined together.

#### EDINBURGH BRANCH: ANNUAL MEETING.

THE annual general meeting of the Branch was held at 5, St. Andrew Square on Tuesday. In the unavoidable absence of Sir ROBERT CHRISTISON, Dr. JAMES YOUNG was voted to the chair.

*The Report of the Treasurer* showing a satisfactory state of the funds was received.

*Officers.*—Sir Robert Christison, Bart., was re-elected President; Dr. Argyll Robertson and Dr. W. Rutherford were elected Vice-Presidents; Dr. Angus Macdonald, Dr. Brodie (Liberton), Dr. Blair Cunyngame, and Dr. P. A. Young were elected members of the Council of the Branch.

*The Medical Act Amendment Bill.*—A letter was read from Dr. Waters (Chester), asking support to the Medical Reform Bills now before Parliament. It was agreed that the letter should lie upon the table.

*Habitual Drunkards.*—Letters were read from Mr. Alford, asking the Branch to petition in favour of the Habitual Drunkards' Bill. The Chairman was empowered to sign and forward a petition in the name of the meeting; and the members present undertook to use their influence to obtain other signatures to the petition.

After a vote of thanks to the Chairman, the meeting separated.

## CORRESPONDENCE.

### PROXY VOTING AT THE ROYAL COLLEGE OF SURGEONS OF ENGLAND.

SIR,—It has been suggested to me that it would be desirable, in connection with the above-named matter, that petitions, as numerous signed as possible, should be presented at the time of the election of members of Council. I enclose a copy of a petition which will, I should imagine, meet the case. If you will publish the copy I enclose, I would ask the Fellows in various towns to copy and sign. If, then, they are forwarded to Sydney Jones, Esq., 16, George Street, Hanover Square, London, W., or to myself, they will be presented at the time of election.—I remain, yours obediently,

GEO. JACKSON, F.R.C.S.Eng. (Exam.)

18, George's Terrace, Plymouth, June 18th, 1878.

\* \* To procure any important number of signatures to petitions, it is usually necessary to circulate copies separately to those whose signatures are desired.—ED. B. M. J.

#### To the President and Council of the Royal College of Surgeons.

We, the undersigned Fellows of the Royal College of Surgeons, desire to bring under your notice the hardship and inconvenience which the Fellows of the College who reside at a distance from the metropolis labour under in exercising the right they possess of voting at the election of members of the Council. As matters stand at present, they cannot exercise their right of voting except at the expense and loss of time involved in a journey to London. Your petitioners pray that such an alteration in the by-laws be made as to permit Fellows who are prevented from any cause from attending the meeting to vote by voting-papers, properly attested, or by proxy.

### THE BILL OF THE MEDICAL REFORM COMMITTEE OF THE BRITISH MEDICAL ASSOCIATION.

SIR,—The Medical Reform Committee of the British Medical Association has drafted a Bill for the amendment of the Medical Act of 1858, and it was introduced into the House of Commons by Messrs. Mills, Childers, and Goldney, and read a first time on 29th May last. This Bill provides for an uncontrolled free trade in medicine and surgery by any persons whomsoever, provided they do not take or use recognised medical titles. It permits persons holding disreputable foreign qualifications to take medical titles, and to practise under these titles just as freely as they please. It permits the Medical Council to register foreigners who hold no medical qualifications whatever. It permits registered medical men to fill up death-certificates in cases they have themselves never seen, but which have been attended by unqualified assistants who have never had one hour's medical education. It deprives persons of the power of prosecuting in cases of the grossest violation of its own provisions, without their at first going through the tedious and expensive process of obtaining the sanction to the prosecution of the Medical Council. In short, the best and most vital interests of the profession are surrendered as a concession for securing a representation of the profession upon the Medical Council—a representation which might turn out, even after all the fuss that has been made about it, to be a sham and a delusion, both mortifying and ludicrous.

The Government Bill, taken as a whole, is an exceedingly bad Bill; but this Bill of the Medical Reform Committee, so far as its supposed maintenance of the interests of the profession are concerned, is simply an infamous Bill.—I am, sir, your obedient servant,

June 17th, 1878.

R. H. S. CARPENTER.

P.S.—A little confusion appears to exist about the three Bills now in the House of Commons. Dr. Lush's Bill is Bill No. 1; Bill No. 2 is the Bill I am condemning; the other has come down from the Lords, and is not known by any number.

### IS ALCOHOL FOOD?

SIR,—How Dr. A. Carpenter could have tortured anything in my note into an accusation of falsehood against himself, is beyond me to conceive. Let me assure him that the last thing in my mind, when I wrote it, was any thought of want of honesty in his statement. To question the value of the data on which a writer bases his conclusions is surely not to accuse him of untruth. On the face of the matter, as it stands at present, it is patent that the truth or otherwise of the assertion, that human life can be sustained for many months on alcoholic drinks alone, rests wholly on the averments of the drinker and his friends. Dr. A. Carpenter accepts such evidence as conclusive. I venture to say that it is not sufficiently trustworthy, not rigid clinical proof such as science has a right to demand. If, as he says, cases of the kind are known to every medical man in extensive family practice, there should be no difficulty in finding proof abundant and overwhelming. But where is it? I took the liberty of asking Dr. A. Carpenter to give the data on which he framed his assertion, and he does so in your last number. Your readers can judge their value. He says that he has under his charge a patient who, "during three months, did not take two ounces of any other kind of food than stimulants. There was no deception in the case". But does Dr. A. Carpenter really say that the scientific world is to accept as a fact the food-power of alcohol on such a bare statement as this—on evidence supported wholly by the assertions of the drinker and her friends? He also refers to the cases of "two old ladies who lived on stimulants alone for several weeks before death, and I have no reason to suppose that I was deceived by the attendants". Further to strengthen his position, Dr. Carpenter adds: "Almost every large private lunatic asylum will probably contain cases which are of a similar character."

When I said that, until better informed, I should doubt whether a single case of the kind which would satisfy clinical demands could be

and important matter, and dealt with a subject on which the Government had expressed their intention of legislating. Until they had the Bill before them, so that they could compare it with the Government Bill, he did not think they should go on with it, and therefore he would move the adjournment of the debate.—Mr. A. MILLS said he had no objection, and the second reading of the Bill was therefore adjourned.

Thursday, June 20th.

*Army Medical Service.*—Mr. MITCHELL HENRY: I beg to ask the Secretary of State for War whether the new warrant respecting the medical service of the army will include the first batch of those gentlemen who entered the medical service under the ten years' system; and if not, whether he will take their case into consideration.—Colonel STANLEY: I have read the question of the honourable gentleman so far as concerns the existence of any new warrant; and what I have to say is this. There is a Committee now sitting to inquire into the position of medical officers of the army, and until that Committee has reported, I am not in a position to say what can be done in the case of those or other officers concerned. There is no warrant in contemplation at this moment.

## PUBLIC HEALTH AND POOR-LAW MEDICAL SERVICES.

### REPORTS OF MEDICAL OFFICERS OF HEALTH.

**KING'S NORTON.**—Mr. Hollingshead estimates the birth-rate at 36.3 and the death-rate 15.06 per 1,000 in 1877, against a birth-rate of 43.3 and a death-rate of 20.15 per 1,000 in 1876. The zymotic death-rate has been increased partly by seven deaths from typhoid fever, which were caused by the distribution of polluted milk in two villages; so that it was 3.07 per 1,000, against 2.23 in 1876. The death-rate of infants under one year was 10.4 per 100 births. There were five deaths from diphtheria, against one in 1876; but no special cause is pointed out, although the connection between deaths from zymotic diseases and imperfect drainage is especially mentioned. The water-supply of the district is chiefly derived from wells placed near to the houses and badly constructed, and the drainage of several of the villages is described as being very unsatisfactory.

**DERBY.**—This is the first annual report that has been presented to the Council by Mr. Iliffe, who estimates the population at 53,841, and states the registered births to have been 2,221 and the deaths 1,131, giving a birth-rate of 41.2 and a death-rate of 21.0 per 1,000 inhabitants. The deaths of children under one year were at the rate of 24 per cent. of the total deaths and 12.2 per cent. of the births. The deaths per 1,000 population from seven principal zymotic diseases were 2.4, from pulmonary diseases (other than phthisis) 3.6, from tubercular diseases 3.5, and from wasting and convulsive diseases of children 3.6, which latter is rather high. There were nineteen deaths from typhoid fever, which are less than usual, and were nearly all caused, in Mr. Iliffe's opinion, by imperfect sanitation, such as open cesspools, middens, etc., in close proximity to dwellings and drinking-wells; by bad connections with the sewers, allowing the entrance of sewer-gas; and other objectionable arrangements.

**GREENOCK.**—Dr. Wallace reports that the death-rate for April was 23.4 per 1,000 population, which is in excess of that for March. Diseases of the respiratory organs were unusually prevalent and fatal, owing to the cold and variable weather then prevalent. Croup and diphtheria caused five deaths, without any information being given as to the drainage of the houses; but there was no death from small-pox, typhoid, or measles. Dr. Wallace also states that 80 per cent. of the cases of infectious diseases were reported to him by the householders, which is very satisfactory.

**SCARBOROUGH.**—The meteorological table shows that the mean temperature at this seaside place was in defect half a degree for the whole year, and as much as 3.9 degrees in May and 2.3 in August, whilst it was 2.2 degrees above the mean in November. The rainfall amounted to 31.0 inches. There were 849 births and 469 deaths registered during the year, 54 of which occurred from zymotic diseases. The death-rate including visitors was 19.67, and excluding visitors 18.95, per 1,000 population.

## MEDICAL NEWS.

### MEDICAL VACANCIES.

The following vacancies are announced:—

- BIRMINGHAM GENERAL HOSPITAL**—Assistant-Physician. Salary, £100 per annum. Applications to be made on or before the 29th instant.
- BRIGHTON HOSPITAL FOR SICK CHILDREN**—House-Surgeon and Dispenser. Salary, £50 per annum, with board, lodging, and washing.
- CLOCHER UNION**—Medical Officer for Ballygawley Dispensary District. Salary, £100 a year, with £15 as Sanitary Officer, and the usual Registration and Vaccination Fees. Applications to the 1st proximo.
- COUNTY AND COUNTY OF THE BOROUGH OF CARMARTHEN INFIRMARY**—House-Surgeon. Salary, £125 per annum, with lodging.
- DROGHEDA UNION**—Medical Officer for St. Peter's East Ward Dispensary District. Salary, £110 per annum as Medical Officer, £20 as Sanitary Officer, with Registration and Vaccination Fees. Personal attendance of candidates necessary on the day of election; viz., the 29th instant.
- EAST RIDING LUNATIC ASYLUM**—Medical Superintendent. Salary £350 per annum, with furnished house, coals, and gas. Applications to be made on or before the 28th instant.
- GREAT NORTHERN HOSPITAL**—Surgeon to the Out-Patients' Department. Applications to be made on or before July 2nd.
- HOSPITAL FOR SICK CHILDREN, MANCHESTER**—Junior Resident Medical Officer. Salary, £80 per annum, with board and residence. Applications to be made on or before the 25th instant.
- HULL GENERAL INFIRMARY**—Assistant House-Surgeon. Salary, £50 per annum, with board and lodging. Applications on or before July 8th.
- KENMARE UNION**—Medical Officer to Kenmare Dispensary District. Salary, £100 a year, with £25 as Sanitary Officer, and the usual Registration and Vaccination Fees. Applications on or before the 26th instant.
- KENT AND CANTERBURY HOSPITAL**—Physician. Applications to be made on or before the 28th instant.
- LONDON FEVER HOSPITAL**—Resident Medical Officer. Salary, £200 per annum, with residence, coals, gas, and attendance.
- MAGHERAFELT UNION**—Medical Officer for Moneymore Dispensary District. Salary, £115 a year, with £15 as Sanitary Officer, and Registration and Vaccination Fees. Election will take place on the 26th instant.
- MALE LOCK HOSPITAL, Dean Street, Soho**—House-Surgeon. Salary, £5 per annum, with board and lodging. Applications on or before July 22nd.
- MANCHESTER ROYAL INFIRMARY, DISPENSARY, and LUNATIC HOSPITAL**—Ophthalmic Surgeon. Applications to be made on or before the 29th instant.
- MIDDLESEX HOSPITAL**—Assistant-Physician. Applications to be made on or before July 2nd.
- NEWCASTLE-UPON-TYNE BOROUGH LUNATIC ASYLUM**—Assistant Medical Officer. Salary, £100 per annum, with board and lodging. Applications on or before July 23rd.
- OWENS COLLEGE, Manchester**—Junior Demonstrator in Anatomy. Salary, £100 per annum. Applications on or before July 15th.
- RAMSGATE AND ST. LAWRENCE ROYAL DISPENSARY AND SEAMEN'S INFIRMARY**—Resident Medical Officer. Salary, £130 per annum, with furnished apartments, gas, firing, and attendance. Applications to be made on or before July 1st.
- SALFORD AND PENDLETON ROYAL HOSPITAL**—District Surgeon. Salary, £80 per annum, with board and lodging. Applications on or before July 2nd.
- ST. MARLEBONE GENERAL DISPENSARY**—Honorary Physician. Applications to be made on or before July 1st.
- SEAMEN'S HOSPITAL, GREENWICH**—House-Physician. Salary, £75 per annum; and House-Surgeon, salary, £50 per annum, with board and lodging in each case. Applications to be made on or before the 27th instant.
- SOMERSET COUNTY LUNATIC ASYLUM**—Assistant Medical Officer. Salary, £120 per annum, with board, residence, and washing.
- SOUTH DEVON AND EAST CORNWALL HOSPITAL**—House-Surgeon. Salary, £80 per annum, with board. Applications to be made on or before July 8th.
- WEST BROMWICH DISTRICT HOSPITAL**—House-Surgeon. Salary, £100 per annum, with board and residence. Applications on or before July 1st.
- WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL**—House-Physician. Salary, £100 per annum, with board, washing, and apartments.—House-Surgeon. Salary, £100 per annum, with board, washing, and apartments.—Honorary Physician. Applications to be made on or before the 24th instant.

### MEDICAL APPOINTMENTS.

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

- AMPHLETT, Edward, M.A., M.B.**, appointed Assistant-Surgeon to the Central London Ophthalmic Hospital.
- CANTON, G. Anderson, M.R.C.S.E.**, appointed Honorary Dental Surgeon to the Royal Isle of Wight Infirmary, Ryde.
- \*CHURTON, T., M.D.**, appointed Honorary Physician to the Leeds Fever Hospital, vice \*C. Chadwick, M.D., D.C.L., F.R.C.P., resigned.
- EDGE, James J., L.R.C.S.I.**, appointed Resident Medical Officer to St. Mary's Hospital, Manchester, vice F. H. Folkes, L.R.C.P.Ed., resigned.
- JOHNSTONE, J. Carlyle, M.B., C.M.**, appointed Assistant Medical Officer to the Fife and Kinross District Lunatic Asylum.
- LEAHY, Albert W. D., L.S.A.**, appointed Resident Surgical Officer to Charing Cross Hospital.
- LE QUESNE, Edwin, L.R.C.P.**, appointed Resident Medical Officer to the Jersey General Dispensary, vice Henry Dustan, M.R.C.S.Eng., resigned.



POPE, James A., M.B., appointed Surgeon to the Dublin Throat and Ear Hospital, *vice* Kendal Franks, M.D., resigned, on appointment as Surgeon to the Adelaide Hospital.  
 ROY, Charles S., M.D., appointed Assistant at the Physiological Institute of the University of Strassburg.  
 WICKERS, Henry Adolphus, M.R.C.S. Eng., reappointed Resident Medical Officer to Charing Cross Hospital.

### BIRTHS, MARRIAGES, AND DEATHS.

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

#### MARRIAGE.

POWELL—ADCOCK.—On the 17th instant, at All Souls, Langham Place, London, \*Lionel Lewis Powell, M.R.C.S., L.R.C.P., Melton Mowbray, to Jessie Kate, only daughter of W. Adcock, Esq., of North Lodge, Melton Mowbray.—No cards.

TESTIMONIAL TO DR. STANISTREET.—Last week, a most gratifying address, signed by Lord Talbot de Malahide and some of the most influential inhabitants of Malahide and its neighbourhood, together with a purse of sovereigns, was presented to Dr. Stanistreet, in recognition of his unwearied attention to his duties as Medical Officer of the district for a period of nearly twenty years.

ST. THOMAS'S HOSPITAL.—The annual distribution of prizes to the students of this Hospital took place on the 7th instant, before a large assemblage. The prizes were presented by Mr. Le Gros Clark, F.R.S., Consulting Surgeon to the Hospital; and Mr. Alderman Stone, the Treasurer, presided, supported by several of the Governors, the President of the Royal College of Surgeons, the Master of the Apothecaries' Company, etc. After the presentation, the Dean (Dr. Ord) referred to the progress of the School, not only in numbers, but also in the spirit of inquiry and original investigation amongst the students. The Chairman congratulated his colleagues on the progress of the School, which he could confirm from his experience, and considered that only one requirement remained unfulfilled to render the School complete—viz., residential accommodation for the students, which he hoped would some day be accomplished. A vote of thanks to the Treasurer and to Mr. Le Gros Clark was proposed by the Dean and carried unanimously, and the proceedings then terminated.

COTTAGE HOSPITAL AT KEITH.—A bazaar was held at Keith, Banffshire, on June 11th and 12th, for the purpose of supplementing the funds already subscribed to erect a cottage hospital there. Drs. Struthers and Stephenson of Aberdeen delivered admirable opening addresses, which were attentively listened to by large audiences. The sum of £950 was realised, which, with former subscriptions, brings the amount available for building and endowment to upwards of £2,000.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—The following are the names of the eligible Fellows who are candidates for seats in the Council of this College at the ensuing election on Thursday, the 4th of July next, at 2 o'clock P.M. 1. W. J. Erasmus Wilson, F.R.S., Henrietta Street; 2. Henry Lee, Savile Row; 3. Barnard Wight Holt, Savile Row (retiring from the Council in rotation). 4. John Gay, Finsbury Place South, nominated by John Wiblin, Southampton; Thomas Green, Bristol; James F. West, Birmingham; Jonathan Hutchinson, Cavendish Square; Henry Smith, Wimpole Street; William Adams, Henrietta Street. 5. Joseph Lister, F.R.S., Park Crescent, nominated by William Cadge, Norwich; Jonathan Hutchinson, Cavendish Square; William Mac Cormac, Harley Street; T. W. Nunn, Stratford Place; Thomas Smith, Stratford Place; M. Berkeley Hill, Wimpole Street. 6. Thomas Bryant, Upper Brook Street, nominated by Edward Cock, Dean Street; George Lawson, Harley Street; W. D. Husband, York; Thomas Longmore, Netley; Thomas Smith, Stratford Place; Joseph Fayer, Granville Place. 7. Henry Thompson (Kt.), Wimpole Street, nominated by Thomas Bryant, Upper Brook Street; Christopher Heath, Cavendish Square; William Cadge, Norwich; George W. Callender, Queen Anne Street; William Mac Cormac, Harley Street; T. Pridgin Teale, Leeds. 8. John Wood, F.R.S., Wimpole Street, nominated by William Cadge, Norwich; T. Pridgin Teale, Leeds; Jonathan Hutchinson, Cavendish Square; Arthur E. Durham, Brook Street; Christopher Heath, Cavendish Square; George W. Callender, Queen Anne Street. 9. Henry Power, Great Cumberland Place, nominated by Caesar H. Hawkins, Grosvenor Street; Thomas Smith, Stratford Place; Thomas Sympson, Lincoln; John Wood, Wimpole Street; Christopher Heath, Cavendish Square; Arthur E. Durham, Brook Street. 10. Edward Lund, Manchester, nominated by Edward Cock, Dean Street; Alfred Willett, Wimpole Street; John Wiblin, Southampton; T. H. Bartleet, Birmingham; Reginald Harrison, Liverpool; Arthur E. Durham, Brook Street. The Fellows will dine together at the Albion Tavern the same evening, when Mr. F. Le G. Clark, F.R.S., will take the chair.

### 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.—Royal Orthopaedic, 2 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.—King's College, 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.—Royal Westminster Ophthalmic, 1.30 P.M.—St. Thomas's, 1.30 P.M.—St. Peter's, 2 P.M.  
 THURSDAY.... St. George's, 1 P.M.—Central London Ophthalmic, 1 P.M.—Charing Cross, 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.—Hospital for Women, 2 P.M.—St. Thomas's (Ophthalmic Department), 4 P.M.—London, 2 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.—Guy's, 1.30 P.M.  
 SATURDAY.... St. Bartholomew's, 1.30 P.M.—King's College, 1 P.M.—Royal London Ophthalmic, 11 A.M.—East London Hospital for Children, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—St. Thomas's, 1.30 P.M.—Royal Free, 9 A.M. and 2 P.M.—London, 2 P.M.

### MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

FRIDAY.—Quekett Microscopical Club (University College, Gower Street), 8 P.M. Mr. Frank Crisp, "On the Influence of Diffraction in Microscopic Vision".

### LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

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

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

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

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

COMMUNICATIONS respecting editorial matters, should be addressed to the Editor, 37, Great Queen Street, W.C.; 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., London.

WE CANNOT UNDERTAKE TO RETURN MANUSCRIPTS NOT USED.

TUPELO-TENTS.—In the notice of tupelo-tents in the *JOURNAL* of June 8th (page 828) we accidentally omitted to state that they were introduced into this country by Messrs. Salt of Birmingham.

#### BRITISH PHYSICIANS ABROAD.

SIR,—Can you or some of your readers tell me under what restrictions and regulations an English medical man can practise in France, and in Switzerland?—I am, R. R. S.

\* \* In France, he must either obtain special permission of the Minister, which was formerly accorded readily to any suitably qualified physician, but is now rigidly withheld, or he must pass the examinations of the Faculty. In Switzerland, we are not sure how the matter stands, but we believe that a similar rule prevails.

S. J. (Devonport).—Taking them in seniority, the following are the members of the Council of the Royal College of Surgeons residing in the country, viz.: Mr. Hancock, Andover, Hants; Mr. Le Gros Clark, St. Leonard's-on-Sea; Dr. G. M. Humphry, Cambridge; Mr. Baker, Birmingham; and Mr. Wheelhouse, Leeds: to which list may, it is hoped, be added the respected name of Mr. Edward Lund, Manchester, the President of the Surgical Section of the British Medical Association at the last most successful meeting in that town. He is a Fellow of the College by examination.

#### MUSCÆ VOLITANTES.

SIR,—Your correspondent Mr. Strong, in his letter which appears in the *JOURNAL* of June 15th, seems to imply that all persons perceiving muscæ in their own eyes must necessarily be jaundiced. I should like to ask him how he would account for their presence in my case, when I tell him that I have been a teetotaler for the last ten years, during which time I think I may safely say that I have abstained from all the articles of food which he mentions, or at least most of them, yet I can discover no symptoms of jaundice in my system; and the muscæ, from which I have suffered all my life, have remained obstinately by me.

As regards a theory of my own, to which I drew attention in a former letter, and which, I think, is now pretty generally accepted by ophthalmists—viz., that the muscæ proper are simply blood-corpuscles, how would Mr. Strong account for their presence in the "aqueous humour"? Is it due to the bursting of a minute capillary through "over-distension"?—I am, sir, your obedient servant,

F. R. GREENWOOD, M.R.C.S.

St. Bartholomew's Hospital, June 17th, 1878.

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.

#### ROYAL MEDICAL BENEVOLENT COLLEGE.

SIR,—Epsom College election for 1878 over again. Yes, it is over, and after the old fashion; and with what results? It exhibits, firstly, more and more the indigence and penury of our hard-worked profession by the long list of candidates; and, secondly, more than ever the unjust, imperfect, and unreasonable carrying out of charity voting elections. If any one will take the trouble to analyse this list (even though they know no more than I do, which is nothing, personally, of the candidates), to what conclusion can he come but that the present system of voting is altogether wrong? Here is a list of thirty-nine candidates: eleven are elected—viz., one, first application; three, second; four, third; one, fourth; and two, fifth. The one at the head of the poll has polled between 2000 and 3000 more votes than two others who have stood five elections (though, truly, they are returned with him). But what has become of a third, who has now unsuccessfully stood five elections, being so short of advocates that in the five elections he managed to poll (each year's election being carried accumulatively) 3981 against the head or first applicant, and the only child of his father, or mother if you will—viz., 8319? Now, who can doubt the hardship upon these remaining applicants, especially those who have stood four, five, and even six elections? Each election, at the lowest average computation, must cost from £20 to £30. Hard, indeed, it must be upon the poor widow: 8000 stamps upon as many pitiful pleading letters will amount to £33.

But, alas! what more do we gather from this last election? Why, palpably that this top man is fortunate in having overwhelmingly the greatest number of friends; showing, in support of my oft-repeated communications in JOURNALS on the same subject, that it is not, it cannot be, the really truly indigent candidate that is returned, but those who, happily, have the longest list of friends; proving that the charity is at first eked out to these many friends, by which they are at once, without cost of a penny, released from the future care and education of their *protégé*; and probably a very large proportion of these supporters are well-to-do, seeing that they are, or should be, life or annual governors; and therefore it is I for ever will hold that these "well-to-do" folk should make way for the truly indigent candidate, who in his second canvass shall only poll 207. And in the obverse, if they really wish to be charitable, let these 8000 and odd voters give 2s. 6d. per vote to their *protégé* (call it the Archer fund if they will), by which they will provide in interest £40 or £50 *per annum*, sufficient to educate him at this first-class school, and at the end start him in life with the principal, or £1000 worth of half-crowns. This I should call charity in the right direction. As, however, I have intimated, I have written and said so much upon this matter, I can add no more: enough to say, I did not record one single vote at this last election, though having one hundred and fifty votes of my own; neither do I propose to do so till the present system of election be remodelled and put upon a sounder basis.

I still hold to my original suggestion, that a Committee in Council be appointed, and that they, and they only, be the parties to make out, by careful inquiry, the really most indigent and pitiable cases brought before them, and that no poor widow or friends shall be made to stand four, five, and even six elections before success. Neither should a candidate be kept in annual suspense, while he might be acquiring the benefit of education, instead of allowing new candidates to step in over him.

I beg you, sir, to pardon me this long communication. Let it be remembered that after this last election there are still left two "third applications," one "fourth," and one "fifth" for another contest, if the means be forthcoming; the remaining twenty-four as "first and second applications," the lowest on the poll being a second with 207 votes.—I have the honour to be, sir, your most obedient servant,  
East Rudham, June 10th, 1878. FRED. MANBY.

We are much obliged to Dr. Dickson (Constantinople) for kindly drawing our attention to the interesting pamphlet which he forwards, of which an early notice shall appear.

#### HIGH TEMPERATURE AFTER PARTURITION: WARBURG'S TINCTURE.

SIR,—If any person said this was not an age of progress in regard to medical science and the treatment of disease, we should be inclined to look upon such individual with a feeling of pity, and respond that rational therapeutics had not enlightened his mind, or set his mental faculties into good working order. The case recorded by Dr. Walker of Golcar, Huddersfield, on page 822 of the JOURNAL of to-day's date is one calling for some comment. When a patient in imminent danger recovers, we all feel gratified; but I am inclined to believe that upon many occasions we allow our feelings to be carried to an extraordinary length, and extol some agent which was employed in the cure of disease far above its merits or intrinsic value. I look upon Warburg's tincture in the above light, and think there is no reason for us to extol to the stars, and even beyond their immeasurable limits, any concoction of nearly a hundred ingredients, when a dose or two of quinine, the real "Warburg" ingredient, would have the same effect; and we should not enshroud medical men and patients' friends in some false mystery, and apply to Warburg's tincture a power which some other simple remedies are well known to possess. My object is to place before your readers something like a bird's-eye view of the composition of the Warburg tincture, and leave my fellow-members to form their own conclusions. Many—especially the junior members of the profession—have never heard of some of the articles which enter into the composition of Warburg's tincture. I can only say it is composed of diverse, divers, and adverse things, and is like the American quack doctor's black bottle, which contained a little of all medicines dispensed, and which was used as a *dernier ressort* in difficult, obscure, and complicated cases. Such, then, is the celebrated "Warburg"; and I hope, for the honour and glory of the medical profession, we are not going to dabble in the hundred and one nostrums of our great-grandfathers, and remake eluctaries of fifty or sixty ingredients, which experience and common sense tell us are useless.

Now, Dr. Walker is, I think, astray in saying Dr. Broadbent published the formula for Warburg's tincture first. I use the word *first*, because the sentence leads one to infer that it was Dr. Broadbent. It was Dr. (Professor) Maclean of Netley to whom Warburg gave the formula, and Dr. Maclean published it in the *Lancet and Medical Times* of November 13th, 1875, in conjunction with a long letter. I do not wish to disparage Warburg's tincture, but here is the formula.

℞ Aloes (Socotr.) libram; rad. rhei (East India), sem. angelicæ, confect. Damocratis, ana uncias quatuor; rad. helenis (s. enulæ), croci sativi, sem. fœniculi, cret. preparat., ana uncias duas; rad. gentiane, rad. zedoaria, pip. cubeb., myrrh. elect., camphore, boleti laricis, ana unciam.

The above ingredients to be digested with five hundred ounces of proof spirit in a water-bath for twelve hours; then expressed, and ten ounces of disulphate of

quinine added; the mixture to be replaced in the water-bath till all the quinine is dissolved. The liquor, when cool, is to be filtered, and is then fit for use. Two drachms of such tincture would represent about three grains of quinine.

But now, what is the composition of confect. Damocratis? According to one formula, forty-five ingredients enter into it, and the other gives forty-nine. A list of a few will show that it is composed of a little of everything, if I may use the expression: myrrh, saffron, agaric, ginger, cinnamon, spikenard, male frankincense, mithridate, mustard seed, opobalsam, coftus or zedoary, galbanum, castor, poley mountain, opium, red roses, asarum root, phu, bellies of skinks, honey, canary wine, dittany of Crete, Macedonian parsley seed, and a host of other things enter into it. Zedoary is the root of an Indian plant, which is somewhat aromatic and bitter, and angelica is a plant possessing aromatic properties, but a hundred years ago the seeds were thought to be inferior to the root. And such is the mysterious tincture—one which, I am certain, not a pharmacist in Europe would take the trouble to compound according to the old formula given for the preparation of some of its constituents. Many of the old articles of materia medica are not to be obtained.

In conclusion, I can only look upon the tincture as valuable simply on account of the quinine which it contains—about one grain in forty minims.—I am, etc.,  
Northallerton, June 8th, 1878. HENRY BROWN.

SIR,—Allow me to rectify an error I inadvertently fell into in my recent communication. I find that Dr. Broadbent is quoting Professor Maclean in the article written by him in the *Practitioner* for February 1877; therefore, Dr. Maclean was the first to publish the formula for Warburg's tincture, Warburg himself having communicated it to Dr. Maclean. As I have received numerous inquiries by letter as to what Warburg's tincture is, I may add that full information is to be found in the article on Malarial Fever in Dr. Russell Reynolds's *System of Medicine*, or in the *Practitioner* for February 1877.—I am, etc.,  
Golcar, Huddersfield, June 1878. J. BURNLEY WALKER, M.D.

DR. J. W. WATKINS (Newton-le-Willows).—Much as we regret it, we fear that the precedent desired would lead to inconvenient results.

We are indebted to correspondents for the following periodicals, containing news, reports, and other matters of medical interest:—The Western Morning News; The Yorkshire Post; The Coventry Herald; The Wisbech Advertiser; The West Briton and Cornwall Advertiser; The League Journal; The Liverpool Daily Post; The Newport and Drayton Advertiser; The Exeter and Plymouth Gazette; The Chicago Times; The Manchester Guardian; The Berkshire Chronicle; The Glasgow Herald; The Oswestry Advertiser; The Edinburgh Daily Courier; The Middlesex County Times; The Liverpool Evening Albion; The Daily Courier; The Kelso Chronicle; The Fifehire Herald; The Merthyr Express; The Carnarvon and Denbigh Herald; The Surrey Advertiser; The Stroud News; etc.

\* \* \* We shall be greatly obliged if correspondents forwarding newspapers will kindly mark the passages to which it is desired to direct attention.

#### COMMUNICATIONS, LETTERS, etc., have been received from:—

Dr. George Johnson, London; Dr. James Russell, Birmingham; Mr. T. Spencer Wells, London; Mr. F. A. Southam, Manchester; Dr. R. B. Low, Helmsley; Dr. J. G. McKendrick, Glasgow; Dr. Saundby, Birmingham; Dr. D. S. Bradley, Chesterfield; Dr. Coats, Glasgow; Dr. Adams, Ashburton; Mr. W. Whitehead, Manchester; Mr. H. Robinson, Preston; Dr. Laffan, Cashel; Dr. Bell, Bradford; E. H. R.; Dr. J. Lewis, Birmingham; Dr. Sheen, Cardiff; Mr. T. F. Bevan, Birkenhead; Mr. G. Anderson, Canton, Ryde; Mr. W. M. Knipe, Melbourne; Dr. Warner, London; Mr. Lawson Tait, Birmingham; Dr. Waters, Chester; Dr. J. Wybrants, Shepton Mallett; Dr. Wardell, Tunbridge Wells; Dr. J. W. Watkins, Newton-le-Willows; Dr. Marcet, Cannes; Mr. H. Brown, Northallerton; Dr. H. H. Vernon, Southport; Mr. James Startin, London; The Medical Officers and Lecturers of the Charing Cross Hospital; Dr. T. Churton, Leeds; Dr. McCook Weir, Leicester; Dr. G. B. Clark, London; Dr. Fletcher Beach, Clapton; Mr. Ward, Tooting; Mr. Mercier, Salford; Mr. A. Doran, London; Mr. S. Benton, London; Mr. Le Quesne, Reading; Dr. Edmunds, London; Mr. Burdett, Greenwich; Dr. Markham, London; F. T. B.; The Secretary of Apothecaries' Hall; Dr. Fairlie Clarke, Southborough; Mr. C. E. Steele, Liverpool; The Registrar-General of England; Dr. R. Douglas Powell, London; Mr. S. Lodge, Bradford; Mr. Greenwood, London; The Registrar-General of Ireland; Mr. G. Eastes, London; Mr. F. Trimmer, West Dulwich; Dr. C. Harrison, Lincoln; Dr. Edis, London; Mr. T. Turnerelli, Leamington; Mr. R. H. S. Carpenter, Stockwell; Our Dublin Correspondent; Mr. T. Jones, West Bromwich; Our Dublin Correspondent; Mr. A. Watkins, Worcester; Mr. W. E. Clendinnen, Stafford; Mr. J. Charlesworth, Hanley; Dr. Joyce, Staplehurst; Mr. G. Jackson, Plymouth; Mr. J. Hardie, Glasgow; Our Edinburgh Correspondent; Mr. T. Murphy, London; Mr. A. Woods, London; Dr. Malins, Birmingham; Dr. J. Robinson, London; Mr. W. Donovan, Whitwick; Surgeon-Major J. H. Porter, Netley; Dr. C. Dukes, Rugby; Mr. Trimmer, Merton; Mr. Startin, London; Mr. F. W. Bussy, London; Dr. C. McDowell, Carlow; Dr. C. Parsons, Dover; Mr. E. Amplett, London; Dr. E. H. Bennett, Dublin; Mr. G. Brown, London; Dr. G. H. Brandt, Porto; Mr. Talfourd Ely, London; Mr. T. Davidson, Cupar Angus; Dr. P. Best, Louth; Mr. R. Davy, London; The Secretary of the Royal College of Surgeons of Edinburgh; Mr. Ewens, Bristol; Mr. Mac Cormac, London; Mr. Ingpen, Putney; Dr. Leech, Manchester; Dr. Underhill, Edinburgh; Dr. Joseph Rogers, London; etc.

#### BOOKS, ETC., RECEIVED.

De Décollement Hyaloïdien, Description Anatomique, Analyse et Iconographie de Vingt-deux Bulbes Enulées; recueillis dans le service de la Clinique Ophthalmologique de M. le Professeur Gayet. Par le Dr. Eugène Auquier, ancien Interne des Hôpitaux de Lyon. Avec une Planche Chromo-lithographiée. Paris: J. B. Baillière et Fils. 1878.