

barracks referred to in this report ; and that the practice of watering milk, for example, with impure water is quite as common in India as it is or was in England. When Dr. Gordon confines his attention in a question of this kind merely to the sanitary condition of barracks and their immediate surroundings, sanitarians will tell him that he has only investigated half his case. With regard to the concluding paragraph of the passage above quoted, viz., "that the phenomena stated of late years to constitute specific pythogenic fever are none other than such as were known by old and experienced medical officers in India", we say, precisely so ; but, then, the "old and experienced medical officers" did not rightly interpret the true significance of the phenomena before them, any more than did hundreds of "old and experienced" physicians all over the world, until their real significance was demonstrated within comparatively recent living memory. It is quite true, as Dr. Gordon points out, that Annesley and dozens of other Indian physicians have accurately described the morbid anatomy of true enteric fever, which he and they alike thought to result from the adynamic form of true malarial remittent fever. The contention of those who differ from Dr. Gordon is not that they think enteric fever is a late importation into India, but that, so far back at least as European records of disease go, it has always existed there, although the malarial element, always present in India, often so modifies symptoms as not to square exactly with those described by authors whose field of observation has been confined to non-malarious countries. No one can carefully read this report without seeing that, consciously or unconsciously, the author wrote in support of a foregone conclusion. He started with the conviction that there is no such disease as enteric fever within the limits of the Madras Command ; and he set himself to the task of proving it to the satisfaction of the Commander-in-Chief, and His Grace the Duke of Buckingham, if not to that of his professional brethren in India and at home. In furtherance of this end, Dr. Gordon sets out with some introductory remarks intended to show the "actual conditions held by recognised authorities to constitute the specific disease so-called", viz., enteric fever. The author devotes many pages to quotations from the descriptions of Murchison, Budd, Jenner, Watson, Johnson, Harley, Troussseau, and others ; and here we must note that Dr. Gordon, when quoting an author, rarely uses inverted commas ; we seldom know, as we read, whether he is giving the *ipissima verba* of the author, or whether it is merely a paraphrase of the passage. After this, he proceeds to "ascertain how far the cases said to be enteric fever occurring among British troops in Madras and Burmah harmonise with the descriptions given", i.e., by the medical officers who saw and described the cases ; in many instances founding their diagnosis, at the last, on the morbid appearances found on dissection. It does not appear that Dr. Gordon himself saw even one of the cases during life, or was present at a single *post mortem* examination of the fatal cases. He appears to have read the case-books in his office ; and if he found that the symptoms did not "harmonise" with those given by the "recognised authorities", who describe the disease as they saw it in quite different conditions, and in a climate differing in every essential particular from that of India, he, without hesitation, pronounces the diagnosis wrong, even in cases where the *post mortem* appearances "harmonise" with those given by the "recognised authorities" as characteristic of enteric fever. We must not omit to reprobate the manner in which the Surgeon-General discharges his critical function. If his object had been to heap contempt on those serving under him, and to hold them up to the scorn of the two great men he addresses, he could not have been more successful ; many of them being officers whose professional attainments and reputation in the service will not unfavourably contrast with those of their critic. Dr. Gordon has yet to learn that medical literature is part of the republic of letters ; and that the language of the orderly room, the quarter-deck, or the parade, is not admissible within its domain. We have not space for a more detailed notice of this report ; and can only say, in conclusion, that if we wanted evidence of the existence of enteric fever in India, we could find it in Dr. Gordon's pages, and in the records he treats with so little courtesy.

**ORIGIN OF DIPHTHERIA.**—Diphtheria is believed to have originated in Egypt more than 2,000 years ago. It prevailed in Egypt and Asia Minor, to which it extended, during the first 500 years, and hence was early called an Egyptian or Syriac disease. Having invaded Europe, the disease appeared in Rome, A.D. 330, and being highly contagious, in its 1,500 years' transit on the continent of Europe, it affected mainly rural districts and garrisoned towns. It extended to Holland, in which it was epidemic in 1337 ; to Paris in 1576, and again appeared there in 1771. It prevailed more extensively in France in 1818 and 1835, and in England, the United States and Canada from 1856 to 1860, and more or less since.

## SELECTIONS FROM JOURNALS.

### MIDWIFERY AND DISEASES OF WOMEN.

**ERUPTIONS CONNECTED WITH MENSTRUATION.**—Dr. Schramm has published in No. 42 of the *Berliner Klinische Wochenschrift* for 1878 the following observations. An unmarried lady, aged 36, of anaemic appearance, had suffered for seven years from dysmenorrhœa, which she had contracted from a severe chill. Simultaneously, the dorsal surfaces of both hands were covered with disseminated brownish nodules, of the size of a lentil, which disappeared in the course of a week, but reappeared at the next menstruation on other places of the dorsal surface. Later on, similar nodules developed on the neck and the labia, accompanied by slight itching ; sometimes a few pinkish irregular infiltrations would break out behind the ears ; a few little spots, which soon developed into blisters, were disseminated on the tongue. These eruptions were complicated with a circumscribed painful swelling of the orifice of the urethra, which greatly impeded micturition. The eruptions and papules on the neck and labia always lasted for a few months, while the other nodules generally disappeared within a week. On vaginal examination, it was found that the patient suffered from anteflexion of the uterus, complicated with catarrh of the uterus and the vagina. These affections were treated methodically, and the patient ceased to suffer from dysmenorrhœa and from the eruption. After her recovery, and after exposure to much fatigue, she had the menstrual pain, and the eruption reappeared, but only once. Another patient, who was consumptive and suffered from retroflexion, had her back and shoulders at the time of the catamenial flow covered with a peculiar eruption in the shape of small red nodules, which formed long lines, and gave to the skin the appearance of being of an uniform red colour. They were accompanied by a sensation of some tingling and itching, and disappeared after three days. Dr. W. Wagner has also published some cases of "catamenial erysipelas" in the *Allgemeine Medicin. Central-Zeitung*, No. 94, 1878. The first case was that of a girl, aged sixteen, who had menstruated regularly since the age of fourteen, but had, since the date of the first flow, suffered from erysipelas of the face, which began four or five days before the menses, and lasted about eight days. It spread over the head, thereby causing the hair to fall off. Her head had grown almost bald, so that she always had to wear a handkerchief over it. Her health was good, and nothing abnormal could be detected in any internal organ. She was treated with Fowler's solution and iodide of potassium, but without any result. The second case was that of a country-girl, aged seventeen, who menstruated for the first time six months ago, and had had erysipelas of the face shortly before this. The inflammation increased during five days, but vanished speedily with the appearing of the flow. In this case, however, the erysipelas was not repeated with the same regularity as in the first case ; it was only observed whenever the menses were irregular. The patient was very anaemic, and was accordingly treated with dialysed iron. The third patient was a woman, who had reached the time of the menopause. She had always been strong and healthy, and had never had the least trouble during the time of the catamenial flow. The menses disappeared for the first time at the age of forty-seven, for about eight weeks, when they reappeared ; they were accompanied by a very slight erysipelas of the face. This same phenomenon was repeatedly observed during the next eighteen months, when the periods disappeared altogether. In the next year, a very slight erysipelas was observed three or four times, which, however, did not spread any further than the nose. The first case, undeniably, is the most peculiar one, as it could not be traced to any pathological affection of the genital organs, and the flow itself never had any influence on the duration of the erysipelas. The two other cases were evidently in some way influenced by the period, as they were only observed at the time of its cessation, or when it was irregular.

**A REMARKABLE CASE OF MENSTRUATION.**—Dr. H. Rodsewitch relates (*Vratschenna Vedomosti*) the following case. The widow of a peasant from the province of Nishni-Novgorod menstruated for the first time at the age of thirty-six. The first coitus took place in her fifteenth year, before any signs of menstruation had appeared, and from this time during the whole of her married life the patient was either pregnant or suckling her children. Her husband died when she was thirty-six years old, and ever since the catamenial flow has shown itself with the greatest regularity. It is remarkable that she had twins in her second, fourth, and eighth confinement, so that the entire number of children she had amounted to sixteen.

of the hospital were heartily in their favour, and would give them all the support they possibly could by working cordially with the founders of any in the neighbourhood of the hospital. With regard to excluding persons who were not proper objects of hospital treatment, the committee of the hospital had thoroughly looked into the whole matter, and had the assistance of unbiased persons, with the result of coming to the conclusion that the abuse of the charity had been exceedingly small.

After a few other remarks by Mr. HOLMES, Mr. WICKHAM BARNES remarked that, at the Royal Westminster Ophthalmic Hospital, the duty of contributing to the funds of the hospital had been impressed upon all patients who could afford to do so.

Sir E. H. CURRIE pointed out that there were distinctions between an East-End hospital, like the London Hospital, and a West-End one, like St. George's, in the different classes of patients and of cases, most of the cases at the East-End being cases of accident; and, while showing that the lay governors were anxious to improve the administration, he held that rules which were applicable to one institution were not applicable to this.

The deputation thanked the governors and retired.

## HOSPITAL AND DISPENSARY MANAGEMENT.

### KILBURN PROVIDENT MEDICAL INSTITUTE.

THE fourth annual report announces a net addition of 214 members, the total number on the 31st December last having been 2,209, viz., 369 men, 678 women, and 1,162 children, comprising 730 families. The rate of increase is not so large as previously, which the Committee attribute to "the general depression of trade, which has thrown many artisans out of employ, and compelled them to leave the neighbourhood in search of work". Mr. Michell, of the Kilburn Brewery, offers to pay the subscription for the first three months of any of his men and their families who are willing to join the Institute. The cases of illness treated during the year have reached the high figure of 2,457. Of these, 585 patients were treated at their own homes, while the remaining 1,872 received advice and medicine at the Institute. These figures are all considerably larger than those of last year, while the deaths have declined from 40 to 31. The members' payments amounted to £533, of which £363 was divided amongst the medical officers of the institution.

### THE BATTERSEA PROVIDENT DISPENSARY.

THE Committee rejoice in being able to report that a real and substantial advance has been made during 1878. The total number of members entered on the books, during the past year, was 4,748, an increase of about 740 upon the numbers who entered during 1877. The medical officers registered 3,057 cases of illness during the year, and to these 11,000 attendances were given—that is, 4,496 visits were made to the patients' own houses, and 6,566 attendances were made by patients at the Dispensary. The sum divisible among the medical officers was £320. Strange to say, the Hospital Saturday Fund recognised the claims of the Dispensary in 1877, and gave it a donation of nearly £11. But in 1878, the managers of this fund declined to make any donation on the somewhat unreasonable ground that no free letters are given for their distribution, such free letters being quite contrary to the principle of a provident dispensary. As the Hospital Saturday Fund is said to be itself a "provident fund", and as the managers profess their desire to promote provident dispensaries, their action in this particular case seems to require explanation.

### SOUTH LONDON MEDICAL AID INSTITUTE.

A NEW provident dispensary has been opened, under this title, for the district lying between the river, Kennington Lane, and Bermondsey. The rules have been framed in accordance with those recommended by the Charity Organisation Society. This dispensary endeavours to introduce a new feature into its management, with a view to enhancing the value of the medical advice and securing the confidence of the patients. The consulting medical officers will attend occasionally at the Dispensary, receiving such an *honorarium* at the close of the year as the funds can afford. As we believe the provident system to be the best means of meeting the medical wants of the working classes, we are glad of every development which tends to make it more efficient and more popular.

## ASSOCIATION INTELLIGENCE.

### SOUTH-EASTERN BRANCH: EAST SURREY DISTRICT.

THE next meeting will be held at the Queen's Hotel, Church Road, Upper Norwood, on Thursday, March 13th, at 4 P.M.; JOHN BROCKWELL, Esq., in the chair.

Dinner will be served at the Queen's Hotel, at 6 P.M. precisely. Charge, six shillings, exclusive of wine.

The following communications are promised.

Dr. Braxton Hicks: A Contribution to the Synthetical Grouping of Acute Visceral Disturbances.

Dr. R. J. Lee will exhibit and explain his Steam-draft Inhaler for Whooping-Cough.

Mr. J. Sidney Turner: Notes of cases of Hysteria.

Dr. Galton will show a Heart with abnormal distribution from the Arch of the Aorta.

JOHN H. GALTON, M.D.

Woodside, Anerley Road, S.E., February 25th, 1879.

### METROPOLITAN COUNTIES BRANCH: SOUTH LONDON DISTRICT.

THE next meeting of the above district will be held at Bethlem Royal Hospital, St. George's Road, on Wednesday, March 12th, at 8 P.M.: Dr. ANDREW CLARK in the chair.

The following papers will be read:

1. Reform of the Out-patient Department of Hospitals. By A. E. Sansom, M.D., F.R.C.P.

2. A case of Spontaneous Dislocation of the Hip-joint. (Patient will be shown.) H. NELSON HARDY, *Honorary Secretary*.

The Grove, Dulwich, S.E., March 5th, 1879.

### YORKSHIRE BRANCH.

THE spring meeting of this Branch will be held at the Queen's Hotel, Barnsley, at 2.45 P.M., on Wednesday, March 19th, 1879.

Members intending to bring forward communications, or join the dinner, are requested at once to communicate with the Secretary.

The members will dine together at the Queen's Hotel, at 5 P.M. Tickets (exclusive of wine), 6s. 6d. each.

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

York, February 27th, 1879.

### THAMES VALLEY BRANCH.

THE next meeting of this Branch will be held at the Griffin Hotel, Kingston, on Thursday, March 20th, at 6 P.M.

The following papers have been promised:

Dr. Alfred Wiltshire: On so-called Ulceration of the Os Uteri.

G. Farr White, Esq.: Case of Gall-stone (with specimen), and cases of Abscess of Liver.

Dr. Sealy: On Diphtheria.

Dinner will be provided after the meeting,

FREDERICK J. WADD, *Honorary Secretary*.

Richmond, March 5th, 1879.

### SOUTH-EASTERN BRANCH: WEST SURREY DISTRICT MEETING.

THE next meeting will take place at Dorking, on Thursday, March 27th, 1879.

Members wishing to read papers are requested to communicate at once with the Honorary Secretary.

A. ARTHUR NAPPER, *Honorary Secretary*.

Broad Oak, Cranleigh, February 24th, 1879.

### WEST SOMERSET BRANCH.

THE spring meeting of this Branch will be held at the Railway Hotel, Taunton, on Thursday, April 3rd, at 5.15 P.M. The following question has been settled by the Council as the one on which members should be invited to express their opinion at the said meeting after dinner: "Are true Croup and Diphtheria different forms of the same disease; and what treatment, general and local, would you recommend?"

Dinner, 5s. a head, exclusive of wine.

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

Taunton, March 1st, 1879.

### SOUTH WALES AND MONMOUTHSHIRE BRANCH.

THE next meeting of the above Branch will be held at Llanelly, on Tuesday, April 15th. Members desiring to read papers, etc., are re-

quested to signify the same to either of the Honorary Secretaries without delay.

ANDREW DAVIES, M.D. } Honorary Secretaries.  
ALFRED SHEEN, M.D. }

March 3rd, 1879.

#### LANCASHIRE AND CHESHIRE BRANCH: ORDINARY MEETING.

A MEETING of this Branch was held at the Athenæum, Bury, on Friday, February 21st; Dr. LESLIE JONES in the chair. There were present 114 members, and three visitors.

*Communications.*—1. Mr. JONATHAN HUTCHINSON gave an address on Syphilis as an Imitator.

2. Mr. J. FARRAR read a paper on a case of Idiopathic Tetanus treated by Chloral-hydrate.

3. Dr. HADDON mentioned a case of Milk-like Urine in a boy.

4. Dr. HADDON described some ill-effects of Diffusing Steam in the room in cases of Bronchitis.

5. Dr. LLOYD ROBERTS showed a patient on whom Abdominal Section had been performed for Extra-uterine Pregnancy.

6. Dr. LITTLE exhibited Mr. Carter's demonstrating Ophthalmoscope, and illustrated its use by cases.

*Exhibition of Instruments, etc.*—Messrs. Wood, Holderness, Arnold and Son, and Hawksley exhibited medical and surgical instruments. Messrs. Allen and Co. showed their hot-air and vapour apparatus, bronchitis kettles, and ventilating croup kettles. Messrs. Woolley, Corbyn and Stacey, and Squire, showed new drugs and medicinal preparations.

*Dinner.*—Fifty members and three visitors dined together after the meeting.

#### BIRMINGHAM AND MIDLAND COUNTIES BRANCH: ORDINARY MEETING.

THE fifth ordinary meeting of the session 1878-9 was held in the Queen's College, Birmingham, on February 13th, 1879. Present: Dr. TIBBITS of Warwick, President, in the chair, and twenty-nine members.

*New Members.*—The following members of the Association were elected members of the Branch: Dr. T. Lyle, Birmingham; and Dr. J. H. Simpson, Rugby.

*Communications.*—The following communications were made:

1. Mr. J. F. WEST exhibited a female patient, aged 26, whose right Knee-joint he had resected in November, 1877, for articular disease of long standing, and such extensive caries of the head of the tibia that the cavity in that bone, which was evacuated by the osteotrite, would have held a hen's egg. The patient is now able to walk six miles in a day, and there is only three-fourths of an inch of shortening. Mr. West suggested that the excellent results obtained were due to the employment of a single straight incision across the head of the tibia, retention of the patella after the carious portions of that bone had been gouged away, and the treatment of the case by Lister's antiseptic method.

2. Mr. PRIESTLEY SMITH showed an Eye (mounted specimen) in which the choroid was completely separated from the sclera, except in a small area at the posterior pole, and at the ora serrata. The choroid and retina, being displaced towards the axis of the eyeball, had assumed a symmetrical "hour-glass" form; the space between the choroid and retina was filled with blood. The mischief was caused by an injury from a cow's horn, which ruptured the ciliary region, with immediate extrusion of the lens and the greater part of the vitreous humour.

3. Dr. BASSETT showed a right Suprarenal Capsule, taken from the body of a man who died after an illness of four months' duration. The chief symptoms were progressive weakness; pain in the back; vomiting, especially in the morning; frequent attacks of diarrhoea, with sallowness of the skin, but without cutaneous pigmentation. Both capsules were considerably enlarged.

4. Dr. BASSETT also exhibited two glandular or mucous Polypi, which he had removed from the cervix uteri of a lady, aged 53. They had given rise to leucorrhœa and vaginal irritation for two years.

5. Dr. BASSETT read a paper on the Exanthemata in the Puerperal State.

6. Dr. MALINS read a paper on Puerperal Septicæmia.

7. Dr. SAVAGE read a paper on some Local Lesions connected with Child-birth.—A discussion followed, in which Dr. Sawyer, Mr. Oakes, Dr. Johnston, Dr. Tibbets, and Mr. Adkins shared. Drs. Bassett and Malins replied.

#### STAFFORDSHIRE BRANCH: ORDINARY MEETING.

THE second ordinary meeting of this session was held at the London and North-Western Railway Hotel, Stafford, on Thursday, February

27th, 1879; present, E. F. WESTON, Esq., President, in the chair, and twenty-seven members and one visitor.

*New Member.*—Dr. C. R. Smith of Wolverhampton was duly elected a member of the Association and of the Branch.

*Exhibition of Patients, etc.*—1. Mr. WOLFENDEN exhibited a middle-aged man, suffering from a large abdominal swelling, which protruded through an opening in the anterior walls, and consisted of intestine, omentum, and of a hard growth of doubtful character; to the latter, which had been pronounced to be cystic, repeated injections of tincture of iodine, followed by the use of a seton, had been unsuccessfully employed.

2. Mr. LAWSON TAIT exhibited a large Fibroid Tumour, which had been successfully removed from the interior of the Uterus by the *écraseur*.

*Invitation to the Shropshire and Mid-Wales Branch.*—Mr. VINCENT JACKSON proposed, Mr. SPANTON seconded, and it was unanimously resolved: "That an invitation be sent to the Shropshire and Mid-Wales Branch to meet the Staffordshire Branch at its ordinary meeting in Wolverhampton in May next."

*The Branches and the Committee of Council.*—A letter was read from the Subcommittee—appointed by the Committee of Council "to consider how the relations of the Committee of Council and the Branches of the Association may be improved"—requesting that the two following suggestions should be considered and information returned as to the conclusions arrived at: 1. That power be given to each Branch (if it see fit) to send to the Committee of Council, in the stead of the Honorary Secretary, a representative of the Branch, to be elected annually in general meeting: 2. That a meeting of the Council of the Association be held every year in May or June.

As regards the first suggestion, it was proposed by Mr. FOLKER, seconded by Dr. BODINGTON, and carried unanimously: "That this Branch recommends that such an alteration in the Laws of the Association be made, to give power to each Branch (if it see fit) to send to the Committee of Council, in the place of the Honorary Secretary, a representative of the Branch, to be elected at the annual meeting."

As regards the second suggestion, it was proposed by Mr. TAIT, seconded by Dr. JOSEPH HUNT, and carried unanimously: "That this Branch recommend that it be adopted."

Upon the general question of Branch representatives in the Committee of Council, it was proposed by Dr. BODINGTON, seconded by Mr. TAIT, and carried unanimously: "That this meeting is of opinion that it is expedient that representatives of Branches in the Committee of Council should afford due information to their Branches of the proceedings of the Committee of Council; and that it is injurious to the Association at large that the minutes of the Committee of Council furnished to each member should be directed to be held as private and confidential."

*Communications.*—Dr. Fernie read a paper "On the Spontaneous Origin of Typhoid Fever".

#### METROPOLITAN COUNTIES BRANCH: SOUTH LONDON DISTRICT.

A MEETING of this district was held at Bethlem Hospital on Wednesday, February 19th: GEORGE H. SAVAGE, M.D., in the Chair.

*Papers.*—Mr. EDWARD NETTLESHIP read a paper on Repeated Paroxysmal Failure of Sight in connection with Heart-disease, and described two cases which had come under his observation.—Dr. S. MACKENZIE and Mr. NELSON HARDY took part in the discussion which followed.

Dr. STEPHEN MACKENZIE read a paper on Annular Stricture of the Intestine.—Dr. J. W. OSWALD mentioned two cases of a similar nature, one of which he had seen in consultation with the late Sir William Fergusson, in which sulphate of magnesia and strychnia were given. It had been previously treated as a case of dysentery. The second case was that of a lady, who only lived three days after the accession of urgent symptoms. A cancerous tumour was found constricting the lower part of the colon.—Mr. W. G. BOTT mentioned a case of stricture of the rectum in which peritonitis had occurred. There was a tumour in the left colon, of the size of a closed fist.

*THE ELECTRIC LIGHT.*—A lecture will be given, at the Royal United Service Institution, Whitehall Yard, on Thursday, March 13th, at 4 p.m., on the adaptation of the Jablochko electric light to medical and surgical purposes, by Mr. Balmanno Squire. The lecture will be illustrated by practical experiments with the light. Gentlemen who wish to be present are requested to apply for cards of admission (by letter only) to Mr. Balmanno Squire, 24, Weymouth Street, Portland Place, W.

## MEDICAL NEWS.

## MEDICAL VACANCIES.

Particulars of those marked with an asterisk will be found in the advertisement columns.

THE following vacancies are announced:—

ABERGAVENNY UNION—Medical Officer. Salary, £40 per annum.

\*BOURNEMOUTH GENERAL DISPENSARY AND COTTAGE HOSPITAL—Resident Medical Officer. Salary, £120 per annum, with rooms, coal, gas, and attendance. Applications not later than March 29th.

CANCER HOSPITAL, London and Brompton—Resident House-Surgeon and Registrar. Honorarium 100 guineas per annum, with board and residence. Applications on or before March 22nd.

\*DORSET COUNTY HOSPITAL—House-Surgeon. Emoluments, £70 per annum, and £10 additional as Secretary, apartments and board. Applications on or before March 19th.

DUNFANAGHY UNION—Medical Officer for Dunfanaghy Dispensary District. Salary, £100 per annum, £10 per annum as Sanitary Officer, with registration and vaccination fees. Election on the 8th instant.

GLANFORD BRIGG UNION—Medical Officer and Public Vaccinator for the Winterton District. Salary, £50 per annum, and fees for Vaccination. Applications on or before March 20th.

HORNSEY LOCAL BOARD—Medical Officer of Health.

\*INFIRMARY FOR CONSUMPTION AND DISEASES OF THE CHEST AND THROAT, 26, Margaret Street, Cavendish Square—Visiting Physician. Applications to Francis Baily, Esq., Secretary.

\*LEEDS GENERAL INFIRMARY—House-Physician. Salary, £100 per annum, board, residence, and washing. Applications before March 19th.

LEEDS UNION—Assistant Medical Officer.

LIVERPOOL ROYAL INFIRMARY—Resident Medical Officer. Salary, £100 per annum, with board, lodging, and washing. Applications on or before March 12th.

LONDON FEVER HOSPITAL—Resident Medical Officer. Salary, £200 per annum, with residence, coals, gas, and attendance.

MACCLESFIELD GENERAL INFIRMARY—Senior House-Surgeon. Salary, £100 for first year, with an increase of £10 the second year, with board and residence. Also a Visiting House-Surgeon. Salary, £70 per annum, with board and residence. Applications on or before March 22nd.

MERCER'S HOSPITAL, Dublin—Senior Surgeon and Junior Surgeon.

MONAGHAN UNION—Medical Officer for Scotstown Dispensary District. Salary, £120 per annum and £15 per annum as Sanitary Officer, with the usual registration and vaccination fees. Election on March 13th.

\*OWENS COLLEGE, Manchester—Demonstrator and Assistant Lecturer in Physiology. Salary, £150 per annum. Applications up to March 22nd.

RIPON DISPENSARY—House-Surgeon and Dispenser. Salary, £100 per annum, with furnished apartments, attendance, coals, and candles. Applicant must be a single man.

SUNDERLAND UNION—Medical Officer for Sunderland District. Salary, £100 per annum. Applications on or before March 10th.

TENDRING UNION, Essex—Medical Officers required on 25th March next for District 2, salary £41; District 3, salary £42; District 5, salary £35; District 6, salary £40; District 7, salary £28; District 8, salary £37; District 10, salary £13; District 11, salary £12.

TICEHURST UNION—Medical Officer, Wadhurst District.

TIPPERARY UNION—Medical Officer for Cappagh Dispensary District. Salary, £110 per annum, with £20 as Sanitary Officer, registration and vaccination fees. Election on the 15th instant.

TIVERTON INFIRMARY AND DISPENSARY.—House-Surgeon and Dispenser. Salary, £100 per annum, with furnished apartments, coals, gas, and attendance.

\*UNIVERSITY OF LONDON—Assistant Registrar. Salary, £500 per annum. Applications on or before March 15th.

\*WESTERN GENERAL DISPENSARY, Marylebone Road, N.W.—House-Surgeon. Salary, £100 per annum, with furnished apartments, fuel, light, and attendance. Applications on or before the 24th instant.

\*WEST LONDON DISTRICT SCHOOL—Medical Officer. Salary, £150 per annum. Applications not later than noon, March 21st.

\*WESTMINSTER GENERAL DISPENSARY—Resident Medical Officer. Salary, £100 per annum, with furnished apartments, attendance, coal, and gas. Applications on or before the 22nd instant.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—The following gentlemen having undergone the necessary examinations, were admitted Licentiates in Dental Surgery at a meeting of the Board of Examiners on the 24th ultimo.

Messrs. Andrew Diman, Dublin; Edward Arthur Councill, Bristol; Eustace Henry Rook, Thaxted, Essex; Walter Reeve, Putney; Samuel John Hayman, Bristol; Hugh William Dewes, Ashby de la Zouch.

Four candidates, having failed to acquit themselves to the satisfaction of the Board of Examiners, were referred to their studies.

UNIVERSITY OF DUBLIN.—TRINITY COLLEGE.—At the Hilary Term Examination for the Degree of Bachelor of Medicine, held on Monday and Tuesday, February 10th and 11th, 1879, the following was the order of merit in which the successful candidates passed.

Thomas Mason, Joseph D. Pratt, Abraham Cohen, Benjamin T. McCreery.

At the Hilary Term Examination for the Degree of Bachelor in Surgery (B.Ch.), held on Monday and Tuesday, February 17th and 18th, 1879, the following candidate was successful.  
West Whedale Wilson.

APOTHECARIES' HALL.—The following gentlemen passed their examination in the science and practice of medicine, and received certificates to practise, on Thursday, February 27th, 1879.

Jones, John, 11, Redesdale Street, Chelsea  
Suckling, Cornelius William; Wheeley's Road, Birmingham  
Sweeting, Richard Deane Roker, Atkins Road, Clapham Park.  
Walker, Lawrence Newman, Tollington Road, Holloway

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

Cotman, John Sell Edmund, Charing Cross Hospital  
Loveridge, Arthur William, Middlesex Hospital  
Payten, Thomas, Queen's Hospital, Birmingham  
Slater, William, St. Bartholomew's Hospital

In the list published on February 22nd, page 295, the name "Rigden, Benjamin", should be "Rigden, Brian".

## MEDICAL APPOINTMENTS.

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

\*BATEMAN, F., M.D., appointed Honorary Physician to the Norwich Borough Lunatic Asylum.  
BULLOCK, J. E., M.R.C.S.Eng., appointed House-Surgeon to the Western General Dispensary.

## 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 announcements.

## BIRTHS.

MARTIN.—On the 21st January, at Darjeeling, Bengal, the wife of Surgeon John Martin, Army Medical Department, of a daughter.

SMITH.—On February 26th, at Stourbridge, the wife of H. Hammond Smith, late Madras Medical Service, of a daughter.

## MARRIAGES.

MILLER—DICKIN.—On February 25th, at Loppington Church, Shropshire, by the Rev. J. W. Davis, Hugh Miller, M.D., of 25, Hamilton Square, Birkenhead, to Sarah Emma, widow of Dr. W. A. P. Dickin.

THOMAS—LEIGH.—On February 27th, at the Parish Church, Llanfawon, by the Rev. D. Leigh, Rector of Llanfawon, and uncle of the bride, assisted by the Rev. D. Parker Morgan, M.A., Vicar of Aberdovey, the bride's brother-in-law, T. Rees Thomas, C.E., of Abernant, only son of the late Rowland Thomas, Esq., of Brynlefrith, to Harriett Susannah, youngest daughter of John Leigh, F.R.C.S., J.P. for Glamorganshire, of Llanfawon Cottage.

## DEATHS.

BATESON.—On the 27th February, at 116, St. George's Road, Southwark, very suddenly, Henry Bateson, M.D., in his sixty-fourth year. Friends will kindly accept this the only intimation.

NICHOLS.—On February 24th, aged fifty, G. W. Nichols, M.R.C.S., of Augusta House, Rotherhithe.

TIBBITS.—On March 2nd, at Burfield House, Highgate, the beloved wife of Herbert Tibbits, M.D., of 30, New Cavendish Street, W.

MANCHESTER MEDICO-ETHICAL ASSOCIATION.—The following is a corrected list of office-bearers elected for the year 1879:—President: John Thorburn, M.D. Vice-Presidents: W. H. Barlow, M.D.; C. H. Braddon, M.D.; R. W. Ledward, M.D.; Peter Royle, M.D. Treasurer: J. Stone, M.D. Honorary Secretaries: A. Wahltuck, M.D., and J. Broadbent, Esq. Committee: E. Bishop, Esq.; S. M. Bradley, Esq.; J. B. Brierley, M.D.; A. C. Clarke, M.D.; J. S. Fletcher, M.D.; R. D. Fox, Esq.; F. M. Pierce, M.D.; T. H. Pinder, Esq.; J. Ross, M.D.; W. J. Sinclair, M.D.; J. F. Tatham, M.D.; J. Watson, M.D. Parliamentary Subcommittee: J. B. Brierley, M.D.; F. M. Pierce, M.D.; Peter Royle, M.D.; J. F. Tatham, M.D.; J. Watson, M.D.; and ex-officio the President and the Honorary Secretaries.

SMALL-POX IN LONDON.—The deaths from small-pox, which had been 20 and 17 in the two preceding weeks, rose to 22 last week, of which 13 occurred in the Metropolitan Asylum Hospitals at Fulham and Deptford, and 9 in private dwelling-houses. No fewer than 21 of the 22 deceased small-pox patients had resided in South London, including 5 in Camberwell, 5 in Greenwich and Deptford, 3 in Wandsworth (district), 4 in Southwark, and 2 in Newington. Of the 9 fatal cases in private dwelling-houses, 3 occurred in Peckham and 2 in Deptford. Of the 22 deaths from small-pox, 3 were of children under 5 years of age, 7 of persons aged between 5 and 20 years, and 12 of adults aged between 20 and 60 years. The number of small-pox patients in the Metropolitan Asylum Hospitals, which had steadily increased from 91 in October last to 353 on the 22nd ultimo, had declined to 340 on Saturday last; the number of new cases of small-pox admitted to these hospitals, which had been 100 and 60 in the two preceding weeks, further declined to 55 last week.

## 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 P.M.—Hospital for Diseases of the Throat, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—Hospital for Women, 2 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.—St. Thomas's (Ophthalmic Department), 2 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.

## HOURS OF ATTENDANCE AT THE LONDON HOSPITALS.

CHARING CROSS.—	Medical and Surgical, daily, 1; Obstetric, Tu. F., 1.30; Skin, M. Th.; Dental, M. W. F., 9.30.
GUY'S.—	Medical and Surgical, daily, exc. Tu., 1.30; Obstetric, M. W. F., 1.30; Eye, M. Th., 1.30; Tu. F., 12.30; Ear, Tu. F., 12.30; Skin, Tu., 12.30; Dental, Tu. Th. F., 12.
KING'S COLLEGE.—	Medical, daily, 2; Surgical, daily, 1.30; Obstetric, Tu. Th. S., 2; o.p., M. W. F., 12.30; Eye, M. Th. S., 1; Ear, Th., 2; Skin, Th.; Throat, Th., 3; Dental, Tu. F., 10.
LONDON.—	Medical, daily exc. S., 2; Surgical, daily, 1.30 and 2; Obstetric, M. Th., 1.30; o.p., W. S., 1.30; Eye, W. S., 9; Ear, S., 9.30; Skin, W. 9; Dental, Tu., 9.
MIDDLESEX.—	Medical and Surgical, daily, 1; Obstetric, Tu. F., 1.30; o.p., W. S., 1.30; Eye, W. S., 8.30; Ear and Throat, Tu., 9; Dental, daily, 9.
ST. BARTHOLOMEW'S.—	Medical and Surgical, daily, 1.30; Obstetric, M. Th. S., 2, o.p., W. S., 9; Eye, Tu. W. Th. S., 2; Ear, M., 2.30; Skin, F., 1.30; Larynx, W., 11.30; Orthopaedic, F., 12.30; Dental, F., 9.
ST. GEORGE'S.—	Medical and Surgical, M. Tu. F. S., 1; Obstetric, Tu. S., 1; o.p., Th., 2; Eye, W. S., 2; Ear, Tu., 2; Skin, Th., 1; Throat, M., 2; Orthopaedic, W., 2; Dental, Tu. S., 9; Th., 1.
ST. MARY'S.—	Medical and Surgical, daily, 1.15; Obstetric, Tu. F., 9.30; o.p., Tu. F., 1.30; Eye, M. Th., 1.30; Ear, Tu. F., 2; Skin, Th., 1.30; Throat, W. S., 12.30; Dental, W. S., 9.30.
ST. THOMAS'S.—	Medical and Surgical, daily, except Sat., 2; Obstetric, M. Th., 2; o.p., W. F., 12.30; Eye, M. Th., 2; o.p., daily except Sat., 1.30; Ear, Tu., 12.30; Skin, Th., 12.30; Throat, Tu., 12.30; Children, S., 12.30; Dental, Tu. F., 10.
UNIVERSITY COLLEGE.—	Medical and Surgical, daily, 1 to 2; Obstetric, M. Tu. Th. F., 1.30; Eye, M. W. F., 2; Ear, S., 1.30; Skin, Tu., 1.30; S., 9; Throat, Th., 2.30; Dental, W., 10.3.
WESTMINSTER.—	Medical and Surgical, daily, 1.30; Obstetric, Tu. F., 3; Eye, M. Th., 2.30; Ear, Tu. F., 9; Skin, Th., 1; Dental, W. S., 9.15.

## MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

MONDAY.—	Medical Society of London, 7.30 P.M. Dr. Symes Thompson, "On Gout, in its relation to Life-Assurance".
TUESDAY.—	Royal Medical and Chirurgical Society, 8.30 P.M. Mr. C. Higgs, "Remarks on 150 operations for Extraction of Cataract"; Mr. Hulke, "Case of Secondary Trephining for Traumatic Abscess of the Brain; Recovery".
WEDNESDAY.—	Hunterian Society. At 7.30 P.M., Council Meeting; at 8 P.M., Dr. Herman will read a paper on "The Treatment of Fibroid Tumours of the Uterus by Ergot".
FRIDAY.—	Clinical Society of London, 8.30 P.M. Mr. Heath, "Foreign Body (end of a silver catheter) in the Bladder; Median Lithotomy; Recovery"; Dr. C. T. Williams, "Case of Tapping a Fecid Pyo-pneumothorax"; Dr. Cayley, "Gangrene of the Lung treated by Incision"; Mr. Keetley, "A case of Severe Traumatic Meningitis, treated in the stage of Coma by Cold Douche for two hours and a half; Recovery".

## 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 General Secretary and Manager, 161, Strand, 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*.

WE CANNOT UNDERTAKE TO RETURN MANUSCRIPTS NOT USED.

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, 161, Strand, London, and not to the Editor.

## THE MEDICAL ACTS AMENDMENT.

SIR,—I hope the Bill to amend the Medical Acts, introduced in the House of Lords on Tuesday last by the Duke of Richmond, will meet the views of all parties; but may I ask one question. Why should not registration be made compulsory? There are some curious anomalies in high quarters respecting this which require explanation. The Commissioners in Lunacy make it compulsory that anyone signing a medical certificate for the admittance of a lunatic to an asylum should be registered. They also commenced legal proceedings, a short time ago, against a surgeon, for taking private care of a patient without being registered; yet I am informed that two of the medical visitors on the Board of Lunacy (Dr. Nairne and Mr. Wilkes) are not registered under the Medical Act.—Yours, etc., FIAT JUSTITIA. February 27th, 1879.

MR. L. M. CORDNER (Aughnacloy).—Eunoymin, iridin, etc., may be obtained from Mr. Squire, Oxford Street, London, and from Messrs. Duncan, Flockhart and Co., Princes Street, Edinburgh.

## TRUSS SOCIETY.

SIR,—Would you kindly inform me, through the medium of the JOURNAL, of the address of some "Truss Society", as I understand that there are associations of the sort for supplying trusses to poor people at reduced rates, and oblige yours truly, J. CALL WEDDELL, M.D.

Lowfield Lodge, Dartford, March 4th, 1879.

\* \* \* City of London Truss Society, 35, Finsbury Square, London, E.C.; National Truss Society, 3, Crooked Lane, King William Street, E.C.; Provident Surgical Appliance Society, 37, Great Ormond Street, W.C.; Rupture Society, 27, Great James Street, Bedford Row, W.C.; Surgical Aid Society, 16, New Bridge Street, E.C.

## PROFESSIONAL DIFFERENCES.

We must decline to publish the correspondence between Dr. Bree and Mr. Ling. It is too violently worded to be creditable to either party, and is unsuitable for publication in our columns. If medical men disagree on matters of etiquette, they should certainly address each other, when corresponding on the subject, with mutual courtesy and with all due forms of social respect. Otherwise, such correspondence is little likely to mend the particular evil which is the subject of complaint, or to maintain the general standard of professional relations at its proper height. If necessary, the subject in dispute shall be referred to the Council of the Metropolitan Counties Branch.

## THE PUNISHMENT OF MR. MILLERCHIP.

SIR,—The case of the surgeon convicted of manslaughter, at the Warwick assizes, seems to involve results that should receive the attention of the profession. Lord Coleridge, by this judicial act, may compliment our art by assuming that we hold the keys of life and death absolutely, even to the point of penal exactitude, and thus fixes manslaughter on our inaction; but it is the reverse of complimentary to us as a community, when he consigns a member to the doom of the lowest felon for an inadvertency, the influence of which at most is really problematical, as doubt attaches to the saving of life in this case if action had been prompt. Penalty, to be met, should be in absolute ratio to the crime. Here the penalty is of the absolute type, whilst the measure of the crime is doubtful. The surgeon is accredited with manslaughter, whilst the connection of death with his absence is at most a question, and probably is such as would justly entitle him to severe censure. Suppose an instance where death is more clearly the sequence of dereliction of duty, as in the case of fire, dilatoriness on the part of the deputed agents may result in the destruction of life—so marked, it may be, as to call for sharp censure, or dismissal from office, leaving little doubt on the public mind as to cause and effect; yet the absence of all malice and intent exempt the seeming delinquents from the judicial penalty of manslaughter. In the surgeon's case, the sequences are much more doubtful, and, happily, the severity meted out is without precedent. But this case affects us as a profession; it establishes a precedent that may be seized on for even less grave offending; and thus all the public medical officers are placed in a position of peril. It is, then, the plain duty of every member of the profession to exert themselves to get this judgment rescinded, and, as a precedent, ignored.—Yours obediently, A MEMBER.

DR. FLETCHER BEACH.—Duly received.

## BRAN FOOD.

SIR,—In answer to your correspondent in the JOURNAL of February 22nd, he can obtain Dr. Campin's bran, or bran biscuits, at 1s. 6d. per lb., from E. Batchley, 362, Oxford Street, London.—Faithfully yours,

WILLIAM R. WHITE.

Royal South Hants Infirmary, February 24th, 1879.

## CAUSE OF SORE-THROAT.

SIR,—The report of the epidemic at Darmstadt being concluded, allow me to make a remark as to its possible cause, one which I have not observed taken notice of in the correspondence on this singular outbreak of the disease. It is well known that women and children are in the habit of kissing pet cats and dogs, especially when these favourites are ill, with discharge from the nose, cough, and sore-throat, and even use their own pocket-handkerchiefs to wipe away the secretion. I have seen this done frequently. As such mistaken sympathy is exceedingly dangerous, I think a notice in the JOURNAL to this effect would tend to its discouragement. It is a common saying, "There, the cat has got a cold; now it will go through the house"; and, as this remark has been repeatedly fulfilled, it shows how fatal the people should be in avoiding contact with such a mode of contagion. I do not affirm that this was the way in which the disease was contracted, either within or without the palace walls; but I feel sure the habit of kissing pets is a source of danger that should be widely known and prevented.—I am, sir, yours faithfully,

WILLIAM STORY.

February 24th, 1879.

ERRATUM.—In the JOURNAL of February 8th, page 266, column 2, lines 25 and 26 from bottom, for "Dr. Botkin thought that it stood in the same relation to the bubonic plague as did bilious typhoid fever to intermittent fever", read, "Dr. Botkin thought that the relation of bubonic plague to the Indian plague was the same as that of relapsing fever and bilious typhoid". In the JOURNAL for February 15th, page 227, column 1, last line of fifth paragraph, for "two days", read "ten days".