

quarter inches still remained in the loin, and discharged about a drachm of pus daily. This case showed that a calculus could be extracted from an *undilated kidney* by surgical operation, without more risk than was amply warranted by the sufferings and general disability which the operation was designed to remove. But before the success of one case was allowed to influence treatment in others, four questions required consideration. 1. Could the diagnosis as to the disease, and the organ affected, be made with certainty? 2. What were the prospects of being able to complete the operation when a stone was found? 3. What were the dangers of the operation? 4. What was the best result which could be hoped for from the operation if successful? Mr. Morris, in answering each of these questions, gave arguments in favour of nephro-lithotomy; and finally expressed his agreement with Mr. Charles Bernard, the author of an account of Marchetti's operation, described in the *Philosophical Transactions* of 1696, that many of the writers upon the subject of wounds of the kidney "ought not to have so magisterially exploded the operation"; and hoped the operation would once again receive the consideration of the profession.—Mr. LUCAS said he had been looking for such a case, but had not found one. The experience gained, however, when the whole kidney was removed, was likewise available in such instances. Cutting down upon the kidney was, comparatively speaking, a trifling operation, though the risk of leaving a permanent sinus was considerable.—Mr. GOLDING-BIRD had operated on one case, but had failed to find a stone. The boy suffered from intense pain in the bladder and about the kidney. The organ was cut down upon, and nothing found, but the pain was relieved. The pain returned, and the bladder was opened, but nothing found. The end of the case was unfortunately unknown.—Mr. BARKER said that a case had been reported, where a cannula had been thrust down through a small opening and struck the stone; this cannula had been allowed to remain in, and the wound afterwards dilated by tents until a lithotrite could be introduced, and the stone crushed and removed. He had recently had a case where a large branched calculus filled the cavity of the kidney. He was able to remove a part, but not the whole. He then endeavoured to remove the whole kidney. The patient died of shock.—Mr. PRYANT said he would support Mr. Morris's view as to the operation in his case, though it was a dangerous one. Granting the presence of a stone, and a persistence of symptoms refusing all amelioration, the surgeon was justified in operating. Still, there were many cases where the stone would settle down in the kidney, and the patient survive many years, dying finally of something else. As regarded diagnosis, it was quite true that the stone might be struck by a needle thrust down upon it, but it was a question how far this plan should be tried. He suspected that the evil would exceed the good done.—Dr. GLOVER asked whether the rough appearance of the cuticle in Mr. Morris's case was due to the use of turpentine.—Mr. HEATH said that the conditions in Mr. Morris's case were unusually favourable, the stone being not too large for removal, and unbranched, though projecting. There would be no great danger in putting in needles.—Mr. MORRIS fully admitted that the case had been a most fortunate one. The conditions were most favourable; there was never a rise of temperature, and everything proceeded well from beginning to end.

SELECTIONS FROM JOURNALS.

PATHOLOGY.

MALFORMATION.—Dr. Pippingskiöld describes, in the *Finska Läkareförl. Handligar*, Band 21 (*Nordiskt Medicin. Arkiv*, Band xii), a rare malformation which was sent to him by Dr. Hellström of Gamla Karleby. From the chest of a strong and fully developed infant, there proceeded two arms with hands and fingers, and, at some distance from them, with an intermediate rudimentary body, perfectly developed nates with corresponding lower limbs. These four duplicate extremities exhibited some movements during life, but more slowly than the proper limbs of the child. The child died at the end of fourteen days. The malformation was of the kind known as thoracopagus parasiticus acephalus.

DOUBLE CYSTIC KIDNEY WITH RENAL CALCULI.—Drs. L. A. Aman and Axel Key relate the following case (*Hygiea*, 1879; and *Nordiskt Medicin. Arkiv*, Band xii). The patient, a man aged 37, had first voided a renal calculus in 1871, and another in the autumn of 1872. Since that time his health had been good; but sometimes he had a feeling of weight in the loins and discharged a little gravel. On July 1st, 1879, he took cold, and soon noticed that the daily quantity of urine diminished until the 8th, when there was suppression. He was ad-

mitted on July 9th into the hospital at Linköping: his bladder was then empty. In the course of the next night, he voided about seven ounces of urine with his stools. He complained only of soreness in the region of the right kidney. The urine could not be examined until the 15th, when it was found to contain much albumen. On that day, symptoms of uremia set in, and he died on the 16th. At the necropsy, the mucous membranes were found to be oedematous, and the brain hyperæmic. The kidneys were sent to Dr. Axel Key for examination. They were both greatly enlarged, the left, however, more than the right; and both presented almost complete cystic change. The renal parenchyma remaining in the interspaces between the cysts had a yellow grey turbid appearance. The pelvis of the right kidney was much dilated, and contained a large nodulated calculus, the lower part of which was rounded, and covered in the orifice of the ureter, which was dilated. The left ureter, at a distance of about two inches from the kidney, was completely blocked up by a calculus of moderate size; below this, the canal was completely strictured by indurated connective tissue, scarcely allowing the passage of a fine sound. Above the stone, the ureter was dilated, and the pelvis and calyces especially were greatly expanded. Dr. Key thinks it remarkable to find such extensive changes in the kidneys of a person who had enjoyed relatively good health up to a fortnight before his death. He regards the cystic change as having been principally congenital, and as having no connection with the formation of the renal calculi and the consequent obstruction to the flow of urine. The renal parenchyma which was found between the cysts had been sufficient for the function of the kidneys. When the renal concretions began to be formed, hydronephrosis was gradually developed, and in connection with it a chronic nephritis with interstitial and parenchymatous changes, which went on for a time without producing any marked disturbance, until at last an acute exacerbation set in and rapidly caused death.

REPORTS AND ANALYSES AND DESCRIPTIONS OF NEW INVENTIONS IN MEDICINE, SURGERY, DIETETICS, AND THE ALLIED SCIENCES.

GRANULAR EFFERVESCENT PREPARATIONS.

DR. HILLIARD reports to us that granular effervescent preparations of—A. Bromide of potassium; B. Bromide of potassium with iron; C. Bromide of potassium with iron and the alkaline hypophosphites; D. Effervescent alkaline hypophosphites; E. Effervescent alkaline hypophosphites with iron—have been made at his suggestion by Mr. J. H. Read, chemist, of Market Terrace, Upper Holloway Road. The drugs are in each case combined with the citro-tartare of soda of the *British Pharmacopædia*, and the granules are very soluble, briskly effervescent, and are not unpalatable. The first three preparations contain ten grains of the bromide in each drachm or teaspoonful. B has, in the same quantity, two grains and a half of ammonio-citrate of iron, and C the ammonio-citrate of iron and alkaline hypophosphites in addition. D is a simple combination of the alkaline hypophosphites with sugar and the citro-tartare of soda; and E is the same, with ammonio-citrate of iron added. A teaspoonful of the last-mentioned "granular effervescent alkaline hypophosphites with iron" in half-a-tumblerful of water produces a sparkling draught, almost identical in its composition with a popular and very much advertised beverage, which it is unnecessary here to further specify.

Dr. Hilliard thinks these new preparations will be found useful and very convenient. In epileptic cases, where it is necessary to continue the use of bromide of potassium for a long time, one or other of the above compounds will be found a very pleasant and ready way of administering the drug. In all cases where it is desirable to prescribe the alkaline hypophosphites, either in combination with iron or without, this effervescent form is likely to recommend itself to the profession.

STEARINE PAPERS.

MESSRS. MILLORD BROTHERS, Penn Street, New North Road, London, N., have forwarded to us a box of "stearine" or "wax" papers, which, by their damp-repelling powers, appear particularly well suited for wrapping instruments, preparations (anatomical or chemical), and drugs, etc., which it is desired to preserve free from hygroscopic influences. Generally, this paper appears to us to be a cheap, neat, and efficient substitute for tin-foil.

SCARLATINA, of a severe type, is reported to be very prevalent at Heywood, Lancashire.

Miss OCTAVIA HILL stated that the great success which had attended operations for the suppression of the smoke nuisance at Nottingham was attributed, by the local authorities, to a clause which imposed penalties on the stokers who neglected duly to employ the appliances, or failed in their duty to prevent smoke from issuing from the furnaces which they stoked.

A full report of the proceedings, with copies of documents, will appear in the next number of the *Sanitary Record*.

The meeting was adjourned till Wednesday next, at 2.30 P.M., at 44, Berners Street.

ASSOCIATION INTELLIGENCE.

SOUTH-EASTERN BRANCH: EAST KENT DISTRICT.

THE next meeting of this District will take place at the Kent and Canterbury Hospital, on Thursday, November 18th.

Members intending to read papers are requested to give immediate notice.

T. WHITEHEAD REID, M.R.C.P., Hon. Sec.

34, St. George's Place, Canterbury, October 20th, 1880.

METROPOLITAN COUNTIES BRANCH: SOUTH LONDON DISTRICT.

THE first meeting of the present session will be held at St. Thomas's Hospital (Westminster Bridge entrance), on Wednesday, Nov. 10th, at 8 P.M., Dr. HABERSHON, President of the Branch, in the chair, when a discussion on the Treatment of Enteric Fever will be opened by Dr. Bristowe. The chief points for discussion will be (1) Food, (2) Alcohol, (3) Drugs, and (4) Baths; and, as it is desired to elicit the opinions both of consultants and of general practitioners on this important subject, it is hoped that all members of the District who do not intend to take part in the discussion will communicate their views on the above points to the Honorary Secretary a few days previous to the day named. The discussion will be open to all members of the Metropolitan Counties Branch and their friends.

H. NELSON HARDY, Hon. Sec.

The Grove, Dulwich, October 12th, 1880.

EAST ANGLIAN BRANCH: ANNUAL MEETING.

THE annual meeting was held at Lowestoft on Friday October 8th; the President, F. S. WORTHINGTON, Esq., in the Chair. The Council of the Branch were entertained at breakfast by the President.

President's Address.—At the first general meeting, at 12 P.M., the President delivered an address. A vote of thanks, proposed by Mr. KILNER and seconded by Mr. GORHAM, was carried by acclamation.

Future Meetings.—It was decided to hold the next annual meeting at Great Yarmouth; and that Charles Palmer, Esq., senior surgeon of the hospital, be requested to preside.

Secretaries.—Dr. Elliston was re-elected Honorary Secretary and representative in the Committee of Council. Dr. Beverley was elected Honorary Secretary for Norfolk.

Representatives of the Branch in the General Council.—The following were elected, T. E. Amyot, Esq.; F. Bateman, M.D.; B. Chevallier, M.D.; W. Cadge, Esq.; G. C. Edwards, Esq.; R. V. Gorham, Esq.; J. Kilner, Esq.; J. B. Pitt, M.D.; W. A. Elliston, M.D., Honorary Secretary.

Council of the Branch.—The above gentlemen, with the addition of W. M. Crowfoot, M.D.; C. M. Durrant, M.D.; P. Eade, M.D.; J. S. Holden, M.D.; J. Lowe, M.D.; H. Robinson, Esq.; F. L. Worthington, Esq., were elected the Council of the Branch.

New Members.—The following new members were elected: W. Groome, M.B.; W. Lock, M.D.; J. Percival Smith, Esq.; F. H. Virtue, Esq.; E. Crickmay, Esq. (unattached member).

Report of Council.—The following report was read.

The Council congratulate the Branch upon the increase of the members of the Branch from 137 to 146. They regret the resignation of Dr. Pitt, who has so long and so efficiently fulfilled the duties of Honorary Secretary for Norfolk. They will tend to Dr. Pitt your sincere thanks for his valued services. The Council have pleasure in stating that Dr. Beverley (Norwich) has kindly consented to take office in the vacancy occasioned by Dr. Pitt's retirement.

Since our last annual meeting, several members have died. In Dr. Copeman, an ex-President of the Association, we have lost a valued and active member of our Body; and, in Mr. Edward Burman Adams, we have lost a member whose genial wit and humour will be much missed at our meetings.

The Council feel that the warmest thanks of the Branch are due to our ex-President, Mr. John Kilner, for his most hospitable reception at Bury St. Edmunds, which was certainly one of the most successful, as it was one of the largest, gatherings of our Branch.

The Council would suggest to the Branch that their thanks are due to the medical staff of Guy's Hospital for their unanimous, firm, and dignified determination to resist interference with the treatment of the sick, by the attempt of the governors of that institution to thrust upon them a system of nursing of which they did not approve. The question at issue affects the management of all hospitals; and, in the opinion of the Council, a reform in the constitution of the governing bodies of hospitals is much needed, particularly that every physician and surgeon should be *ex officio* a member of the Board of Management.

Upon the motion of Mr. KILNER, seconded by Mr. GORHAM, the report was received and adopted.

Papers.—An elegant luncheon was provided at the Royal Hotel at 2 P.M.; and, at 3.30, the members again met, when the following papers were read and discussed.

1. Mr. T. E. AMYOT: Extensive Lumbo-thoracic Abscess in a Child: with Necropsy.

2. Dr. W. M. CROWFOOT: Notes on Three Cases of Operation for Ovarian Disease.

3. Dr. W. A. ELLISTON: A Case of Vesico-vaginal Fistula, with Laceration of Os and Cervix Uteri.

4. The PRESIDENT: On Perforation of the Vermiform Appendix.

The "British Medical Journal" and Chloroform.—Dr. BENHAM (Ipswich) said he wished to call the attention of the Branch to the manner in which the editor was writing down chloroform in the JOURNAL. By his comments on the cases of death during its administration, he was trying to lead the public to think that it was incomparably more dangerous than ether; the natural result of which would be that, should any of the members be unfortunate enough to meet with a mishap, the coroner's jury might very likely bring in a verdict of manslaughter against them for using so dangerous an agent. What he (Dr. Benham) wished to ascertain was, whether the opinion of the profession coincided with that of the editor. He thought not; and considered the superior safety of ether "not proven". There had been deaths during the administration of ether; and he believed that no anaesthetic yet discovered was perfectly free from danger. There was a certain definite risk of death in travelling by an express train, and so there was in inhaling chloroform; it should never be given without a great sense of responsibility; and all care and attention should be paid during its administration; but—given that care and attention—he was not yet convinced that it was his duty to forego the convenience of chloroform, and uniformly give ether instead. He thought that, at this time, an expression of opinion would be very valuable to those in general practice; for, if the views expressed in the JOURNAL were those of the profession at large, all ought to throw away their chloroform-bottles, and only give ether or nitrous oxide.

The members were subsequently most hospitably entertained by the President and Mrs. Worthington at an "home"; and those remaining the night at Lowestoft, including Professor Humphry, F.R.S., the President of the Association, were entertained at dinner by Mr. James Worthington.

BIRMINGHAM AND MIDLAND COUNTIES BRANCH: ORDINARY MEETING.

THE first meeting of the present session was held on October 14th; R. PROSSER, Esq., President, in the Chair.

New Member.—Dr. T. W. Smith (Leamington) was elected a member of the Branch.

Communications.—The following communications were made.

Mr. HUGH THOMAS showed a specimen of Diseased Kidney taken from a child nine months old, which had symptoms of narcotic poisoning before death.

Mr. LAWSON TAIT showed some Instruments of Purkinje or Celluloid, made by Otto and Co. of New York, including a morphia-syringe, female catheters, syringes, etc.

Mr. TAIT also showed two Ovarian Tumours, one of which was removed from a child on account of intestinal obstruction; and the other an instance of the rare form of tumour described by Rokitansky. The cysts were thin-walled, and were all pediculated on a common stalk, like a bunch of grapes.

Mr. TAIT also showed preparations from three cases of Cystic Dilatation of the Fallopian Tubes removed successfully by Abdominal Section; also some Hydatids of the Liver, which he had successfully removed by Abdominal Section.

Dr. MALINS showed a Myo-fibromatous Tumour, taken from the

abdominal wall of a patient aged 36, which had in several respects simulated an ovarian growth.

Mr. J. S. GAMGEE read a paper on the Relative Merits of Different Methods of Treatment of Wounds (the paper is published at page 695).

Dr. SAWYER read a paper entitled Therapeutic Notes. Discussions followed, in which several members took part.

SPECIAL CORRESPONDENCE.

BIRMINGHAM.

(FROM OUR OWN CORRESPONDENT.)

Opening of the Medical School.—Opening of Mason's College.—Resignation of Mr. Goodall.—The Professorship of Anatomy at the Queen's College.—The Queen's Hospital Casualty Surgeon.—The Children's Hospital.—The Medical Institute.—The Orthopaedic Hospital.

THE medical school of Queen's College opened for the winter session on the 4th instant, with an address from Mr. T. H. Bartleet. The entry of students is not so large as last year, but that was perhaps an exceptional year. The prospects of medical education in this town are much improved by the opening of Sir Josiah Mason's College, as that institution possesses facilities for teaching science which are not surpassed by any college in the kingdom; while the school here, like most medical schools in the metropolis and the provinces, has been hitherto very deficient in that respect.

Professor Huxley's address on Scientific Culture is probably already well known to your readers. I do not think we are quite such Philistines as to join with Mr. Huxley in congratulating ourselves that "mere literary instruction"—if by that is meant instruction in Greek and Latin—is prohibited from even forming part of the college curriculum. Whatever we may think as to the relative importance of science and literature, few, I hope, desire to see one or the other excluded. There are some who believe that a fair share of the great increase of national wealth during the last century has not yet been devoted to the cause of higher education, and who look forward to seeing universities on the Scottish pattern established in all the great centres of population, industry, and wealth. Manchester may claim to have succeeded in doing so. Liverpool is making a splendid effort to keep up with her; and Birmingham will certainly not be behindhand in the race. Our School Board, and the governors of the wealthy corporation of King Edward's School, are providing admirable primary and secondary instruction. Mason's College already affords ample opportunities for instruction in mathematics, physics, chemistry, and biology; and before another decade is passed, we hope to see this list of chairs considerably increased.

I regret to say that Mr. W. P. Goodall, who has been for some years surgeon to the General Hospital, is about to leave the town on account of ill-health. His departure is the occasion of profound regret to his colleagues, and to a large circle of friends and patients who know his worth. A testimonial fund is being raised to afford a means of giving him a substantial expression of these feelings; and he will carry with him our best wishes for his speedy restoration to health in some more genial climate. This resignation will not create a vacancy on the staff, as, by the alteration made in the laws of the hospital three years ago, the number of surgeons was reduced for the future to four instead of five. Mr. Goodall was one of the first surgeons in Birmingham who recognised the importance of the antiseptic system, which he carried out with the energy and thoroughness that characterised all he did.

Mr. Jolly has resigned the Professorship of Anatomy in the Queen's College, which he has filled with much satisfaction to the students for some years. His loss will be felt, but we are glad to know that the reason for this step is to be found in the increasing demands made upon his time by private practice. His successor will probably be Mr. Bennett May, casualty surgeon to the Queen's Hospital, and senior demonstrator of anatomy in the College. The appointment of casualty surgeon at the Queen's Hospital is quite new, and Mr. May is to be congratulated on his appointment.

The Election Committee of the Children's Hospital has recently appointed Mr. Joseph Hunt to the surgeoncy vacant through the resignation of Mr. G. H. Evans, which, we regret to say, was owing to ill-health. Miss Alice Kerr, M.D. Paris, has been recently appointed junior house-surgeon to the same institution, Miss Clark being the senior house-surgeon, so that Birmingham now boasts no fewer than three qualified medical ladies.

The Medical Institute will be formally opened about the middle of November, though it is not yet certain what form the opening will take. It is expected that an effort will be made to effect a pleasant professional *réunion* on the occasion, which should be subject for

general congratulation; and those who have successfully carried out the work of establishing the institute trust that the hearty appreciation of the profession will secure for them their cordial co-operation and support.

The annual meeting of the subscribers to the Orthopaedic Hospital took place on the 12th instant; the Earl of Dartmouth in the Chair. The report mentioned that Mr. E. L. Freer had been appointed honorary assistant-surgeon, and that Dr. Heslop had consented to accept the position of consulting physician.

PARIS.

Infectious Diseases and Bad Smells.—Personalities in the Academy of Medicine.—Necropsy of Menesclou.—Are Stiicides Lunatics?—Charge of Abortion against a Medical Practitioner.

FOR the last two months, the public press has been occupied with the bad smells of Paris; and to these have been attributed the unusual prevalence of such maladies as small-pox, typhoid fever, measles, diphtheria, infantile diarrhoea. It so happens, that these maladies had been raging, more or less, long before the smells were noticed; and it is in the very quarters that are comparatively free from smell where the diseases are most prevalent. The causes must, therefore, be sought elsewhere. The quarters just referred to are situated in the east, the most populous, and consequently the poorest, parts of the city; and the smells complained of are noticeable in the central parts, where the earth is being turned up for the establishment of an increased number of sewers. But the emanations thus produced, far from being injurious, are considered more salutary than otherwise, owing to the composition of the subsoil from which they proceed. The soil was analysed, and found to contain large proportions of sulphur, coal-tar, and oxidised iron—all three substances largely used as therapeutic agents. The obnoxious odours were then traced to the "dépôtoirs", or repositories for filth; and to the manufactories of ammonia, phosphatic salt, and aniline, situated just outside and around Paris; but even these would not sufficiently explain the prevalence of the maladies in question. Attention was then directed to the cesspools, and to other receptacles for filth, which, coupled with the defective system of drainage, are, to my mind, the real sources of danger; and it is to remedy these defects that steps are being taken for the abolition of cesspools, and for the introduction of an improved system of sewerage.

The equanimity of the Academy of Medicine was lately disturbed by a rather warm discussion that took place between M. Pasteur and M. Jules Guérin, *à propos* of M. Pasteur's discovery of being able to attenuate, or modify by the inoculation of a special virus, the malady called the cholera of fowls. The process is kept a secret by the learned biologist; but M. Jules Guérin questioned the propriety of such a procedure, and condemned it as being contrary to academical usages. The discussion, from being warm, became violent; and ultimately degenerated into personalities, which nearly ended in a duel. This circumstance caused some hilarity among the members, owing to the would-be combatants being nearly *hors de combat*, as one is almost an octogenarian, and the other hemiplegic. Fortunately, the duel has been averted by an apologetic letter from M. Pasteur, which was read at the last meeting of the Academy, amidst the applause and congratulations of the members.

The JOURNAL for October 16th contains a short description by you of the necropsy of Ménesclou, who was executed last month for the most atrocious murder of a little girl whom he had previously violated. To your annotation, allow me to add the following particulars. About five hours after decapitation, the body was removed to the School of Medicine for examination. The head was severed from the body by a clean cut, the knife having passed through the neck just below the vocal cords. The face was calm, and presented nothing particular. M. Dassy, preparator of anatomy, injected into the carotid artery some blood taken from a live dog. The face of the deceased became immediately flushed, and the lips reddened; and it was expected that some emotional movements of the muscles of the face would take place; but, owing to some misunderstanding, the body had not been given up till five hours after death, which, of course, interfered considerably with the experiments, and rendered the results incomplete. However, through the temporary apparent restoration of excitability in the decapitated head by the injection of warm and vivifying blood, M. Sappey, the professor of anatomy, was enabled to perform certain interesting experiments on the different muscles of the face by means of electric currents produced by Bunsen's battery, the results of which will soon be published. The muscular system in general was well developed. The bones of the skull were very thick; and the brain, as stated in your annotation, weighed 1,382 grammes. The deceased criminal was the

TURNER, James E., L.R.C.P.Ed., appointed Medical Officer to the Fever Hospital and Workhouse, and Consulting Surgeon of the Tuam Union, *vice* Thomas Blake Turner, L.K.Q.C.P.I., deceased.

PUBLIC HEALTH MEDICAL APPOINTMENTS.

PEARCE, Arthur, M.R.C.S.Eng., appointed Medical Officer of Health for the Salcombe Urban Sanitary District, Devonshire, at £4 4s. per annum for five years.

POGSON, William, F.R.C.S.Ed., reappointed Medical Officer of Health for the Leeds Rural Sanitary District.

MEDICAL NEWS.

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 27th instant.

Messrs. George D. Curnock, Cable Street, E., Cornelius Robbins, Epson, Thomas W. C. Wonfor, London Street, W., and Henry N. Hindley, Alfred Place, W., students of the Middlesex Hospital; and Thomas I. B. Palmer, Peterborough, of Guy's Hospital.

One candidate failed to acquit himself to the satisfaction of the Board of Examiners.

APOTHECARIES' HALL.—The following gentlemen passed their Examination in the Science and Practice of Medicine, and received certificates to practise, on Thursday, October 21st, 1880.

Day, Donald Douglas, Blackheath, S.E.
Garrard, Charles Rowland Ordish, Tickenham, Derby.
Pryn, William Wenmouth, Tredour, Saltash.
Whitcombe, Charles Henry, New Zealand.

The following gentlemen also on the same day passed thier Primary Professional Examination.

Donald, James, Charing Cross Hospital.
Piesse, Charles Henry, King's College Hospital.

QUEEN'S UNIVERSITY IN IRELAND.—At the Annual Meeting of the University, held in St. Patrick's Hall, Dublin Castle, on Wednesday, October 13th, 1880, the following Degrees in Medicine and Surgery, and Diplomas in Midwifery were conferred by His Grace the Duke of Leinster, Chancellor of the University.

Doctor in Medicine, October, 1880.—First Honour Class: Jeremiah Cotter, Cork; David M'Keown, B.A., Belfast. Second Honour Class: John C. Bodkin, Belfast; Hugh Brosman, Cork; R. J. Dalbey Hackett, B.A., Galway; Robert Thomas M'Geagh, Belfast; Robert Shore, M.A., Galway; George Jas. Haslam, Galway. Upper Pass Division: Joseph Anderson, Belfast; John Shiel Collins, Belfast; John A. Cunningham, Belfast; Robert J. Hamill, B.A., Belfast; James Paul M'Geagh, Belfast; Matthew M'Vickar, Belfast; Adam A. C. Mathers, Belfast; William Roulston, Belfast; Albert M'Carthy Scully, Cork; Hugh Thomas Shaw, Belfast; Samuel Hamilton Shaw, Belfast; John Wallace Watson, Belfast. Lower Pass Division: Robert Alexander, Belfast; Wm. Hamilton Caldwell, Belfast; Richard Campbell, Belfast; Henry Castles, Belfast; William R. Cole, Cork; Wm. Naunton Davies, Belfast; David Simpson Dunn, B.A., Belfast; Samuel Eakin, Belfast; Wm. Gordon Hanna, Belfast; Robert Lynn Heard, Belfast; William Kelly, B.A., Galway; Thomas M'Iroy, Belfast; John M'Loughlin, Galway; Samson Matthews, Belfast; Lowry D. Morell, Belfast; William David Moore, Belfast; Patrick Joseph Nealon, Cork; Thomas Nunan, Cork; James A. Oakshot, Cork; Samuel Jas. Parkhill, Belfast; Thomas Pritchard, Galway; Robert Reid Rentoul, Galway; James John Riordan, B.A., Cork; Robert John Roulston, Galway; Simson Stuart, Galway; Edmond Wall, Cork; Charles Wells, Galway; Charles Wenyon, Galway; James Blair White, Belfast; James F. White, Galway; James Whiston, Cork. *June 1880.*—John Howard Battye, Belfast; George J. Coates, Cork; John J. Dennis, Cork; Arthur Hickman, Galway; Edward Horan, Cork; Daniel Lehane, Cork; William J. Matthews, Belfast; William T. Mullally, Galway; Patrick Mullane, Cork; James Mullin, Galway; John F. L. Mullin, Galway; Menus W. O'Keefe, Cork; Samuel Townsend, Cork.

Master in Surgery, October, 1880.—Myles H. C. Atkinson, M.D., Galway; Jas. Davison, M.D., Belfast; William T. Mullally, M.D., Galway; Myles Wm. O'Reilly, M.D., Galway; T. Kennedy Wheeler, M.D., Belfast; John C. Bodkin, Belfast; Hugh Brosman, Cork; Wm. Hamilton Caldwell, Belfast; William R. Cole, Cork; J. T. Collier, M.D., Belfast; Jeremiah Cotter, Cork; John A. Cunningham, Belfast; Samuel Eakin, Belfast; R. J. Dalbey Hackett, B.A., Galway; James Paul M'Geagh, Belfast; Robert Thomas M'Geagh, Belfast; David M'Keown, B.A., Belfast; Matthew M'Vickar, Belfast; Adam A. C. Mathers, Belfast; William David Moore, Belfast; Patrick Joseph Nealon, Cork; Thomas Nunan, Cork; Samuel J. Parkhill, Belfast; James John Riordan, B.A., Cork; Robert John Roulston, Galway; William Roulston, Belfast; Albert M'Carthy Scully, Cork; Hugh Thomas Shaw, Belfast; Samuel Hamilton Shaw, Belfast; Edmond Wall, Cork; Charles Wenyon, Galway. *June 1880.*—George J. Coates, Cork; John J. Dennis, Cork; Chas. Hall, M.D., Belfast; John Hosford, M.D., Cork; Charles Frederick Knight, M.D., Cork; John Martin, M.D., Galway; P. Mullane, Cork; Menus W. O'Keefe, Cork; Wm. Smyth, M.D., Belfast; William Stokes, M.D., Galway; Samuel Townsend, Cork; John Wilson, M.D., Belfast, and Cork; Ralph Worrall, M.D., Belfast.

Diploma in Midwifery, October, 1880.—Robert Alexander, Belfast; Joseph Anderson, Belfast; John C. Bodkin, Belfast; Hugh Brosman, Cork; William Hamilton Caldwell, Belfast; John Shiel Collins, Belfast; Jeremiah Cotter, Cork; Jas. Davison, M.D., Belfast; David Simpson Dunn, Belfast; Samuel Eakin, Belfast; James Paul M'Geagh, Belfast.

Belfast; Matthew M'Vickar, Belfast; Adam A. C. Mathers, Belfast; Robert John Roulston, Galway; William Roulston, Belfast; Albert M'Carthy Scully, Cork; Hugh Thomas Shaw, Belfast; Samuel Hamilton Shaw, Belfast; Jas. Whiston, Cork. *June 1880.*—George J. Coates, Cork; Patrick Mullane, Cork; Menus W. O'Keefe, Cork; William Stokes, M.D., Galway.

The following Prizes, founded by public subscription, and won by medical students, were presented by His Excellency Earl Cowper, K.G., Lord Lieutenant of Ireland. Peel Prize for English composition, open to the competition of undergraduates in Medicine—Subject: "Sensation". The prize has been awarded for the essay signed "Sub Rosa". Peel Exhibition awarded at the First University Examination in Medicine—James Meek of Queen's College, Belfast, first; £20 a year for two years.

MEDICAL VACANCIES.

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

The following vacancies are announced:—

ASHTON-UNDER-LYNE INFIRMARY—Consulting Surgeon.

*BRADFORD FRIENDLY SOCIETIES' MEDICAL AID ASSOCIATION Assistant Medical Officer and Dispenser. Salary, £120 per annum. Applications, with testimonials, on or before November 4th.

BRIGHTON AND HOVE LYING-IN INSTITUTION—Honorary Surgeon. Applications, with testimonials, on or before November 5th.

CENTRAL LONDON SICK ASYLUM DISTRICT—Assistant Medical Officer and Dispenser. Salary, £100 per annum, with board and residence.

CHARING CROSS HOSPITAL—Assistant-Physician—Applications, with testimonials, on or before October 30th.

CHARING CROSS HOSPITAL—Assistant-Surgeon. Applications, with testimonials, on or before October 30th.

*CORK NORTH INFIRMARY—House-Surgeon and Apothecary. Salary, £105 per annum, with apartments, etc.

CORK FEVER HOSPITAL—Resident Medical Officer and Apothecary. Salary, £100 per annum, and £20 per annum to keep accounts of institution, with apartments, fire, and light. Election on 4th proximo.

DENTAL HOSPITAL OF LONDON—Assistant Dental Surgeon. Applications on or before November 1st.

FULHAM UNION—Medical Officer to the Third District. Salary, £60 per annum. Applications, with testimonials, on or before November 10th.

GREAT NORTHERN HOSPITAL—Physician for Out-Patients. Applications, with testimonials, on or before October 30th.

*HULL GENERAL INFIRMARY—Assistant House-Surgeon. Salary, £50 per annum. Applications not later than November 8th.

KILLARNEY UNION—Medical Officer for Coom and Glenflesk Dispensary District. Salary, £120 per annum, exclusive of sanitary, registration, and vaccination fees. Election on the 4th November.

LINCOLN ODD FELLOWS' MEDICAL INSTITUTION—Assistant or Second Medical Officer. Salary, £60 per annum. Applications, with testimonials, to the Secretary, on or before November 2nd.

*LINCOLN UNITED FRIENDLY SOCIETIES' DISPENSARY—Resident Medical Officer. Salary to commence at £175 per annum, with house, etc. Applications, with testimonials, to the Secretary on or before November 12th.

LISTOWEL UNION—Medical Officer for Workhouse, at a salary of £75 per annum. Election on the 4th November.

*NORFOLK AND NORWICH HOSPITAL—House-Surgeon. Salary, £100 per annum, with board, lodging, washing, coals, gas, etc. Applications, with testimonials, on or before November 19th.

OMAGH DISTRICT LUNATIC ASYLUM—Resident Superintendent.

ST. ANDREW'S PAROCHIAL AUTHORITIES—Medical Officer.

*SUNDERLAND PROVIDENT DISPENSARY—Secretary and Dispenser. Salary, £120 per annum. Applications, with testimonials, on or before November 4th.

TICEHURST UNION—Medical Officer to the Wadhurst District. Salary, £70 per annum, with extras. Applications on or before November 3rd.

TIVERTON INFIRMARY AND DISPENSARY—House-Surgeon and Dispenser. Salary, £100 per annum, with furnished apartments, etc. Applications not later than November 1st.

*VICTORIA HOSPITAL FOR SICK CHILDREN, Chelsea.—Honorary Assistant Physician. Applications on or before November 1st.

MEDICAL APPOINTMENTS.

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

Biss, Cecil Y., M.B., appointed Honorary Physician to the Western General Dispensary, *vice* A. T. W. Wise, M.D., resigned.—(In the JOURNAL of October 16th, Dr. Biss's appointment was by error described as that of "house-physician".)

EWBANK, F., M.R.C.S., L.R.C.P., appointed Resident Surgeon to the Cheltenham General Hospital and Dispensary, *vice* George Taylor, M.B., resigned.

JESSOR, Walter H. H., M.R.C.S.Eng., appointed House-Physician to the Royal Hospital for Diseases of the Chest, *vice* F. M. Pope, M.R.C.S.Eng., resigned.

LOUGH, John J., M.B., appointed Medical Officer to the N. Postal District (Islington Division), *vice* A. D. Harston, F.R.C.S.E., resigned.

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.

HITCHCOCK.—October 20th, at Market Lavington; the wife of C. K. Hitchcock, M.A., M.D. Cantab., Medical Superintendent of Kingdowm House Asylum, Box, Wilts, of a son.

MARRIAGES.

LOWNDES—LEWIS.—On October 26th, at St. Nicholas Parish Church, Liverpool, by the Rev. A. Stewart, M.A., Rector, Frederick Walter Lowndes, M.R.C.S.Eng., of Liverpool, to Elizabeth Ellen, youngest daughter of the late John Lewis, of Helsby, Cheshire.

WARDLE—HUTCHINSON.—At St. Andrew's, Auckland, on the 21st instant, by the Rev. Canon Long, M.A., Vicar, Mark A. Wardle, L.R.C.P. and S.Ed., to Jane E. M., third daughter of V. Hutchinson, M.D., The Elms, Bishop Auckland.

WHITE—JENNINGS.—On the 21st instant, at the Abbey, Malmesbury, by the Rev. G. W. Tucker, M.A., the Vicar, assisted by the Rev. C. D. Forbes, B.A., Edward Arthur White, M.D., of Malmesbury, third son of Richard White, of Heathfield House, Norwich, to Anne Maude, only daughter of Joseph C. S. Jennings, F.R.C.S., of the Abbey House, Malmesbury, Wilts.—No cards.

DEATHS.

HORNBY.—On the 21st instant, at High Street, Bromsgrove, Worcestershire, George Harcourt Hornby, M.R.C.S.Eng., in the twenty-eighth year of his age. Friends kindly accept this intimation.

INGHAM.—On the 24th instant, at Ash Mount, Haworth, Yorkshire, Mary, the beloved wife of Amos Ingham, M.D., aged fifty-two years.

DURING the past three weeks of the current quarter, the metropolitan death-rate has averaged 20.5 per 1,000, against 20.2 and 20.1 in the corresponding weeks of 1878 and 1879.

THE veteran surgeon Pirogoff, of St. Petersburg, completed the twenty-fifth year of his emeritus professorship on the 20th of September of this year.

DEPRESSION OF THE SKULL OF INFANTS.—Dr. Liddell quotes from Dr. Paul F. Eve's *Remarkable Cases in Surgery*: "I have heard of no less than three cases of depressed skulls in young children relieved by exhausting the air from a cupping glass, placed over the portion of the cranium driven below the surrounding level. One instance occurred in Europe, the second is recorded by Dr. Moultrie, of St. John's, and the third was mentioned to me by my colleague, Dr. Briggs."—*American Journal of Medical Science*.

PUBLIC HEALTH.—During last week, being the forty-second week of the year, 5,537 births and 3,748 deaths were registered in London and twenty-two other large towns of the United Kingdom. The mortality from all causes was at the average rate of 23 deaths annually in every 1,000 persons living. The annual death-rate was 16 in Edinburgh, 20 in Glasgow, and 33 in Dublin. The annual rates of mortality in the twenty English towns were as follow: Birmingham, 17; Portsmouth, 17; Bristol, 19; Oldham, 19; Leeds, 20; Sheffield, 20; Brighton, 20; London, 22; Sunderland, 22; Nottingham, 22; Wolverhampton, 23; Newcastle-upon-Tyne, 23; Manchester, 25; Norwich, 25; Salford, 26; Plymouth, 26; Bradford, 28; Liverpool, 30; Hull, 32; and the highest rate, 33, in Leicester. The annual death-rate from the seven principal zymotic diseases averaged 3.3 per 1,000 in the twenty towns, and ranged from 2.1 in Birmingham, Leeds, and Plymouth, to 6.7 and 7.6 in Salford and Leicester. Scarlet fever showed the largest proportional fatality in Sunderland, Liverpool, and Leicester; and measles in Leicester. The highest death-rate from fever (principally enteric) occurred in Portsmouth, Brighton, and Salford. The annual death-rate from diarrhoea did not exceed 0.8 per 1,000 in London, but averaged 1.4 per 1,000 in the nineteen large provincial towns. Diphtheria caused 11 deaths in London, and 2 in Bradford. Seven more fatal cases of small-pox occurred in London, but not one in any of the nineteen other towns. In London, 1,518 deaths were registered, which exceeded the average by 59, and gave an annual death-rate of 21.6. The 1,518 deaths included 7 from small-pox, 22 from measles, 58 from scarlet fever, 11 from diphtheria, 11 from whooping-cough, 24 from different forms of fever, and 59 from diarrhoea—being altogether 192 zymotic deaths, which were 36 below the average, and were equal to an annual rate of 2.7 per 1,000. The deaths referred to diseases of the respiratory organs, which had steadily increased from 124 to 273 in the six previous weeks, further rose to 323 last week, and exceeded the corrected weekly average by 38; 213 were attributed to bronchitis, and 77 to pneumonia. Different forms of violence caused 54 deaths; 47 were the result of negligence or accident, including 22 from fractures and contusions, 3 from burns and scalds, 6 from drowning, and 9 of infants under one year of age from suffocation. At Greenwich, the mean temperature of the air was 42.9°, and 7.6° below the average. The coldest day was Wednesday, when the mean was only 34.4°, and showed a deficiency of 16.2°. The direction of the wind was variable, and the horizontal movement of the air averaged 10.7 miles per hour, which was 0.4 below the average. Rain or melted snow was measured on four days of the week, to the aggregate amount of 1.35 inches. The duration of registered bright sunshine in the week was equal to 10 per cent. of its possible duration. Scarcely any ozone was measured during the week, except on Saturday.

BEQUESTS, ETC.—Mr. John S. Surman, of Swindon Hall, near Cheltenham, has bequeathed £2,000 to the Gloucester Infirmary, and £1,000 to the Cheltenham General Hospital and Dispensary.—The St. George's and St. James's Dispensary has become entitled to £1,000 under the will of Mr. Henry Ludlam of Piccadilly.—The Middlesex Hospital has become entitled to £100 under the will of Mr. T. H. Wyatt, of Great Russell Street, Bloomsbury.—The Sussex County Hospital, at Brighton, has received fifty guineas from Mr. William Grantham, M.P., and twenty-five guineas from Mr. C. W. Catt.

MIDLAND MEDICAL SOCIETY.—The inaugural meeting for the session of 1880-81 was held on Wednesday, October 20th, at the Grand Hotel, Birmingham, Dr. Savage (President) in the chair. About 170 members and friends were present. Dr. Matthews Duncan delivered the address, taking for his subject the treatment of puerperal fever. At the close of the address, a hearty vote of thanks was proposed by Mr. Berry, seconded by Dr. Bassett, and carried by acclamation. About sixty remained to entertain Dr. Duncan at supper. After the usual loyal toasts, his health was proposed by the President. Dr. Duncan, in reply, proposed "Success to the Midland Medical Society". Mr. Lawson Tait proposed "The Visitors", to which Professors Poynting and Bridge replied. Mr. Thomas (ex-President) proposed the health of the officers. Mr. Harmar (Treasurer) and the Secretaries having replied, the meeting separated, after a very enjoyable evening. Before the address, Professor Poynting showed some interesting physical experiments, including electrified water-jets, and the phoneidoscope. Messrs. Salt and Son, and Mr. W. G. Mappin, each exhibited surgical instruments and appliances. Messrs. Southall Brothers and Barclay exhibited new and rare drugs, and Mr. Gamgee's absorbent pads. Mr. Bailey showed a collection of microscopes, with beautifully prepared specimens.

PETERBOROUGH URBAN AND RURAL DISTRICTS.—Dr. Thomson's reports on these districts err on the side of brevity. In both urban and rural districts scarlatina and measles were unduly prevalent, and a large proportion of the schools were closed in consequence. Typhoid fever is less fatal in the city than it used to be, doubtless on account of the great sanitary improvements which are at last being made there, under pressure from Whitehall. Several cases of diphtheria are reported in connection with sanitary defects. The annual death-rate in the city was 22.4, against 24.1 per 1,000 in 1878. In the rural district it was 17.5 per 1,000. The want of a hospital for infectious diseases, and of a disinfecting apparatus, has been much felt. Taken as a whole, the sanitary condition of the districts is improving, but a good many arrears have got to be made up.

BINGHAM RURAL DISTRICT.—This, for a first report, is one of great promise, and reflects credit upon the energy of Mr. Poyntz Wright. From a systematic inspection, Mr. Wright feels justified in saying that the condition of the district is, as a whole, satisfactory in point of health. Though several cases of zymotic disease were recorded, there was no serious epidemic in the district. It was deemed necessary, however, to close several schools in consequence of threatened outbreaks of measles and scarlet fever. Mr. Wright discusses at length the drainage and water-supply, as to both of which it is evident that much improvement is required. During the year, there were 441 births and 276 deaths in the district, equal to rates of 30.07 and 18.07 per 1,000 respectively. From zymotic diseases 22 deaths occurred, the cases being distributed over several parishes. Phthisis caused 28 deaths, the greater number of which (19) were amongst females. Mr. Wright adverts to the necessity of early information of infectious cases being given to sanitary officers, and says, truly enough, that "one of the principal drawbacks towards the furtherance of sanitary progress is the want of a greater catholicism of hearty co-operation on the part of the public with sanitary authorities, frequently looked upon as expensive machines, which fail to produce corresponding or equivalent results."

SOCIETY FOR RELIEF OF WIDOWS AND ORPHANS OF MEDICAL MEN.—The usual quarterly court of this society was held on Wednesday, October 13th at five P.M., in the library of the Royal Medical and Chirurgical Society. The president, Sir George Burrows, was in the chair. Applications for relief were read from sixty Widows and seventeen Orphans. It was resolved that a sum of £1,219 10s. be recommended to be granted at the next meeting of the directors. The acting treasurer reporting favourably of the state of the finances of the society, the Court had the satisfaction of voting a Christmas present of £5 to each widow, and £2 to each orphan on the list of recipients, and £4 to each orphan on the Copeland Fund. One member was elected. No deaths were reported among the members or recipients of grants, and only one orphan was declared ineligible, from age, to receive any further assistance.

OPERATION DAYS AT THE HOSPITALS.

MONDAY Metropolitan Free, 2 P.M.—St. Mark's, 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.—St. Mark's, 9 A.M.—Cancer Hospital, Brompton, 3 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.—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.—Royal Westminster Ophthalmic, 1.30 P.M.—St. Thomas's, 1.30 P.M.—St. Peter's, 2 P.M.—National Orthopaedic, 10 A.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 King's College, 2 P.M.—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.—East London Hospital for Children, 2 P.M.

SATURDAY St. Bartholomew's, 1.30 P.M.—King's College, 1 P.M.—Royal London Ophthalmic, 11 A.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., 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; Skin, F., 4; Dental, daily, 9.

ST. BARTHOLOMEW'S.—Medical and Surgical, daily, 1.30; Obstetric, Tu. 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, Tu. 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, W. S., 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., 2; 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, 8.30 P.M. General Meeting. Dr. F. de Havilland Hall, "A Case of Pleuritic Effusion"; Dr. E. Symes Thompson, "A Case of Aortic Aneurism, in which Secondary Disease was set up in the Right Lung"; Dr. J. G. Thorowgood, "A Fatal Case of Atrophy of the Stomach".

TUESDAY.—Pathological Society of London, 8.30 P.M. The President (1) Myeloid Tumour of Femur; (2) Multiple Exostoses; (3) Specimens of Ainhum sent by Dr. Crombie. Dr. Norman Moore, Embolism of Cerebral Artery. Mr. Godlee (1) Fibrocellular Tumour from Knee-joint; (2) Epithelioma of Lung. Mr. Pearce Gould, Papilloma of Umbilicus. Dr. Payne, Joint-Disease in Tabes Dorsalis (living specimen). Dr. Thin, Histology of Molluscum Contagiosum. Dr. Lees, Telangiectasis in a Syphilitic Infant (living specimen). Mr. Shattock, Dissection of Cleft Palate. Dr. Payne, Hemiatrophy Facialis (living specimen).

WEDNESDAY.—Obstetrical Society of London, 8 P.M. Specimens will be exhibited by Dr. Roper, Dr. Herman, and others. Papers: Dr. Wade (Birmingham), Case of Chorea in Pregnancy, successfully treated by Dilatation of the Cervix Uteri; Dr. Braxton Hicks, "Congenital Abnormality of the Uterus simulating Retention of Menses"; Dr. Charles H. Carter, "Absence of the Vagina—Uterus distended by Retained Menstrual Fluid—Operation—Recovery".—Epidemiological Society of London, 8 P.M. Inaugural Address by the President. Mr. Nettleton Radcliffe, "On Certain Appearances of Cholera since 1873 in the Countries lying between India and Europe".

THURSDAY.—Harveian Society of London, 8.30 P.M. Mr. A. J. Pepper, "A Case of Trephining for Double Compound Fracture"; Dr. Broadbent, "A Case of Heart-Disease".

LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

COMMUNICATIONS respecting editorial matters should be addressed to the Editor, 161, Strand, W.C., London; those concerning business matters, non-delivery of the JOURNAL, etc., should be addressed to the General Manager, at the Office, 162, Strand, W.C., London.

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.

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

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

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

WE CANNOT UNDERTAKE TO RETURN MANUSCRIPTS NOT USED.

FARR TESTIMONIAL FUND.

SIR,—I am desired by the committee charged with the promotion of the Farr Testimonial Fund to request that you will add to their obligations by publishing, in your next issue, the following further list of subscriptions.—Faithfully yours,

NOEL A. HUMPHREYS, Hon. Sec.

Amount of subscriptions already published, £925 2s. od.

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Brown, J. B., F.S.S., F.R.G.S. . . .	2 2 0	Eddowes, Alfred, M.D. . . .
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Cadge, Wm., F.R.C.S. . . .	2 2 0	Sutton, J. Maule, M.D. . . .

As the committee proposes shortly to close the subscription list, intending subscribers, who have not yet intimated their intention, are requested to communicate with the Honorary Secretary, Mr. Noel A. Humphreys, General Register Office, Somerset House, London, W.C. All cheques or post office orders should be crossed Martin and Co.

EPSOM COLLEGE.

SIR,—I was not sorry to see the letter from "A Life Governor", asking for an investigation of the cause of the running away of six of the boys. The *régime* of the College as to punishments, etc., ought to be looked into, if there be any truth in what one hears.—I am, etc.,

PATERFAMILIAS.

H. T., M.B., M.A., will obtain the information which he requires by writing to the French authorities, or in a more condensed form in the Foreign Educational Number of the *London Medical Record*, which is chiefly occupied with the regulations of the Continental universities and hospital schools.

A JOURNAL versus TRANSACTIONS.

GAILLARD'S *Medical Journal*, referring to Dr. Sayre's proposal, in his presidential address to the American Medical Association, to abandon the existing bulky and little read volume of annual transactions, in favour of a periodical publication, says: "It may be said parenthetically that (laying aside all theories and speculations in regard to this important matter), when the British Medical Association adopted this plan and created the BRITISH MEDICAL JOURNAL, that Journal showed the wisdom of such a course not only by cementing together the strong elements of that body, but by giving it a power and influence, and a triumphant success, of which the most sanguine had never dreamed. It is to-day the moving power, the very heart and soul of that Association; any interruption of its publication would be followed by a dissolution of the body which created it. The recommendation of Dr. Sayre met with deserved support, for a special committee of five has been appointed to report upon the matter at the next meeting."

and there are no persons more liable to fall into intemperance than those who resort to alcohol for the relief of sinking sensations, low spirits, and other morbid feelings. All narcotics, chloral, opium, chlorodyne, alcohol, etc., have their victims through the feeling of necessity for them which their use creates in proportion to its extent; and the danger is so great, the habit so insidious, and the consequences so awful, that the profession ought to retain all such drugs in their own hands, and give them, if necessary, without the knowledge of the patients, so that they may not be able to administer to themselves more than is proper. Prescriptions of such drugs ought to be valid only for a definite time, after which it should be penal to dispense them without their being countersigned by a medical man. In this way, all, or nearly all, abuse would be prevented.—I am, sir, yours truly,

Enfield, October 1880.

J. JAMES RIDGE, M.D.

EFFECTS OF CHLORAL AND MORPHIA.

SIR,—I shall feel obliged if you, or any of your readers, can tell me where to find the best account of chloral and morphia, and their effects. I suffer fearfully from insomnia, and should be glad to know of any means to procure sleep without the aid of narcotics; but, suffering from a painful spinal complaint, any violent measures would be out of the question. I think the frequency of insomnia would form a very good subject for discussion.—Yours faithfully,

INSOMNIA.

SUSPENSORY BANDAGES FOR CIRSOCELE.

SIR,—My attention has recently been directed to the subject of "suspensory bandages" for cirsocele by the receipt of a catalogue of surgical "specialities" by a London maker, in which an apparatus for this purpose is figured and recommended. Having worn a suspensory bandage constantly for upwards of forty years, I may be supposed to possess some experience in the matter, and this I will now detail for the benefit of those who may be required to wear a similar appliance.

In the days of my youth, when a pupil of the late Mr. Syme of Edinburgh, I recollect his saying in his class, when touching upon the subject of cirsocele, that he would recommend any young man present, who might be affected with this complaint, to get a suspensory bandage at once, and wear it constantly. This arrow "shot at a venture" stuck in me, for I was then suffering from enlarged scrotal veins, and I made haste to follow my preceptor's advice, and by so doing have, through a pretty long life, hitherto escaped anything worse than an occasional inconvenience from the malady. I have always worn the simplest form of appliance—a net bag of rather fine cotton twist, crocheted, not woven, pretty open in the mesh, so as to admit of free transpiration. The bag is hollowed out above in front, to afford free passage to the penis, and is suspended by a band of tape, which passes across and is fixed to the upper edge of the bag, is then carried round the waist on each side, crossed behind, and brought back again and tied in front. The bag is steadied in its position and prevented from shifting to one side or the other by the aperture through which the penis passes, this member being encircled beneath and at the sides by the hollowed out edge of the bag, and bounded above by the suspending tape. If the aperture be made of proper dimensions, there is no risk of the testicle protruding through, as sometimes happens when the opening is unduly large. A bandage thus made and applied can be put on and off with great facility, is pleasant and convenient to wear, and when required, it can be washed and ironed, and made as good as ever. I much prefer this simple arrangement to those complicated contrivances, with perineal bands, India-rubber rings, *et hoc genus omne* of uncomfortable contrivances. In the matter of expense, also, the simple bandage has greatly the advantage. As to the inconveniences portentously attributed, in the instrument maker's circular, to the simple bag and tape, I can only say that I have never experienced them when the apparatus was properly made and fitted.—I am, sir, yours, etc.,

M.D. EDIN.

AN EXTENSIVE CARBUNCLE.

SIR,—In your clinical memoranda of this date, Mr. W. H. Walter records a case of extensive carbuncle, and asks whether any of your readers have seen similar cases. In 1860, I was called to a Chinaman, in good position, living in Batavia, who had a large carbuncle over the right shoulder, extending from the acromial process to the bend of the elbow; it had involved the whole circumference of the arm, and bid fair to terminate the life of its owner. Old tarred rope was teased out fine and wrapped round the large sloughing surface, which was daily dressed, and large quantities of slough pulled and cut out; indeed, it seemed as though all the intercellular tissues of the muscles of the arm were removed, each muscle being most beautifully and distinctly dissected out and cleaned. Eventually, the man battled through the disease, living entirely on rice and dried fish, nothing inducing him to take more strengthening diet; the wound healed up, but how was a puzzle, as every particle of skin had sloughed off, and a fairly useful, though mutilated, member was the outcome of all his sufferings. The day of epidermic grafting had not then dawned; otherwise, doubtless, the cure would have been even more satisfactory.—I am, etc.,

RICHARD NEALE, M.D. LOND.

60, Boundary Road, South Hampstead, N.W., October 23rd, 1880.

P.S.—A case of triple ovariectomy, at page 673, is noted as unique. Dr. Winkler, at Dresden, in 1877, also removed three ovarian tumours from the same patient (*vide Lancet*, February 1879, p. 241).

THE TREATMENT OF NÆVI.

SIR,—Having lately read many letters in your valuable JOURNAL on the treatment of nœvi, as my experience has been somewhat extensive in this direction, I beg to offer some remarks. One gentleman eulogises vaccination, another injections of lead, etc. Vaccination is all very well when the nœvus is small; but no one, I should say, would expect any good from it when the nœvus is larger than a shilling, or between that and the palm of a man's hand. I have had several cases brought to me where the nœvus has only been as large as my thumb-nail, and vaccination has been tried twice or thrice, and failed. I have also seen cases where the lead injections have failed. I think I have given all the various methods a fair trial, viz., lead, iron, and tannin injections; threads steeped in liquor ferri perchlorid passed through the nœvus, and left in two or three days. I have ligatured them in various ways, cut them off with harleip-pins and ligature; have burnt them with strong nitric acid, acid nitrate of mercury, and ethylate of sodium (this last is certainly the best of these three applications). With all these different ways and means, I have had, I suppose, about the average results, and in one way and another caused the children a good deal of suffering, and myself much anxiety; especially on one occasion, when a child, ten months old, was brought to me with a small nœvus on the front and right side of the head. I injected five drops of tincture of perchloride of iron (*not fortior*), with two drops of distilled water. Having injected the nœvus, I turned away to wash the instrument, when, in about one minute, the mother gave a scream. I turned to see what was the matter. The mother had fainted; and the child's face was of a peculiar pea-green colour, with black stripes—the veins. I at once saw what I had done; the tip of the syringe had entered a small vein. How could that have been prevented? After four hours of hard work and the greatest

care, I saved the child's life. Since then, I have never used injections for the cure of nœvi.

But this catastrophe led me to seek some other method of treatment. Since then (seven years ago), I have treated a large number of cases, both at St. Mary's Hospital and in private practice, with constant success. It makes no difference where they are; the needles will reach them. I have done them on the ear, nose, eyelids, lips, neck, body, arms, legs, fingers, toes, and the vulva. This latter was a case where the labia majora and minora on one side were implicated, extending some distance upwards and inwards; it recovered. The size of the nœvi treated by this method has varied from a split-pea to the size of the palm of my hand. I have never seen a case fail. A fainter cicatrix is left by this than by any other method. I have never had any anxiety or trouble; the pain ceases within a few minutes of the removal of the needles. This, then, I hold, is the treatment above all others for nœvi; for it matters not what may be their kind, shape, size, or locality—it cures them all. And having now treated a very large number, and given nearly everything I ever heard of a fair trial, I have every confidence in advising electrolysis to those of the profession who have not used it.—I am, sir, your obedient servant,

Burwood Place, W., October 18th, 1880.

SYDENHAM J. KNOTT.

VACCINATION FOR ECZEMA.

SIR,—If Dr. Drury will consult the BRITISH MEDICAL JOURNAL of January 27th, 1872, or Dr. M'Call Anderson's excellent treatise *On Eczema*, third edition, published in 1874, he will find vaccination referred to as a cure for chronic eczema.—Yours truly,

JAMES ADAMS, M.D.

MR. TREVOR FOWLER.—In the remarks referred to, there was no intention of imputing blame either to the sanitary authority or its officers; but we believe the facts are as stated. To Mr. Fowler's own personal action, no exception was, or could be, taken. We willingly recognise the energy displayed by the authority when the gravity of the situation was recognised; but it must, at the same time, be observed that the outbreak had attained wide-spread dimensions before an attempt was made by the authority to secure the isolation of any of the sufferers.

THE NEWCASTLE-ON-TYNE THROAT AND EAR HOSPITAL.

We have a communication from Mr. Torrance on the subject of the late Throat and Ear Hospital, Newcastle-on-Tyne, in which that gentleman produces satisfactory evidence that he and Dr. Wicks publicly retired from the Throat and Ear Hospital then in existence, in consequence of their finding it undesirable that they should be any longer associated in any way with Dr. Ellis. Dr. Wicks and Mr. Torrance publicly advertised, on February 4th, 1880, the necessity which they felt of severing their connection with the institution, inasmuch as Dr. Ellis declined to retire from it.

COMMUNICATIONS, LETTERS, ETC., HAVE BEEN RECEIVED FROM:—

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BOOKS, ETC., RECEIVED.

Hints on the Application of the Poro-Plastic Jacket in Spinal Curvature. By Paul Swain, F.R.C.S. Plymouth: W. Brendon and Son.

St. George's Hospital Reports. Edited by T. T. Whiphamp, M.B., F.R.C.P., and Thomas Pickering Pick, F.R.C.S.; vol. x; 1879. London: J. and A. Churchill, 1880.

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