

nurses kept in the hospital. The numbers, so far as we were enabled to get them, are as follows: probationers, 26; day-nurses, 29; night-nurses, 28; sisters, 26; ward-maids, 27; extra nurses, 20; total, 157.

And now as to the hours for duty: we find that the nurses enter on their avocations at 7 A.M., and remain continuously until 10 P.M., save that half an hour is allowed, in which they get their dinners. These hours are true, not for six, but seven days in the week. They have, however, an average of seven and a half hours allowed weekly for recreation and exercise; and, *credat judex*, each nurse, in addition, is permitted to go to church once every Sunday.

It has happened not unfrequently that a nurse has gone on at 7 A.M., and has remained in the wards till 4 or 5 P.M.; she has then been sent to bed, and afterwards required to resume work at 10 P.M. for a turn of night duty. It further appears that no distinctive provision is made for the sick nurse; thus, when ill, the superintendents and nurses either lie in their own rooms, where they cannot get adequate attention, or, if they be very bad, they are transferred to the general wards. One case was mentioned, where a nurse sickening for typhoid fever, was permitted to remain from 2 to 8 P.M. without any assistance being afforded her, not even a drink of water. Nor is this all. So limited is the staff, and so scanty the arrangements for nursing in this huge establishment, that we learn that a house-surgeon having applied to the matron for a nurse to take charge of a special case, one was allowed, she had, however, to be sent back, being herself an invalid actually under this gentleman's care; her place was attempted to be supplied by another, labouring under a similar disability. But if the staff of nurses be limited, and as a consequence their hours of labour excessive, what will the public think of their accommodation when we state that one small room serves the ward-sister as her sitting-room and bedchamber? In some cases, a nurse, tired with the toils and anxieties of the day, has only a wooden partition between her bed and the entrance to a block of wards, whilst the sounds from her ward come to her, broken only by a half-glass door. In almost every instance, the sister's room is partitioned off the landing, and communicates with the ward. Many of the day-nurses' bed-rooms are similarly constructed, being partitioned off the landing, and having no direct communication with the outer air, the only opportunity for ventilation being a window which opens on to the public staircase, and a door into the ward. To increase the unhealthiness and diminish the comfort of the apartment, there are no fire-places; whilst most of the night-nurses' bed-rooms look on a noisy thoroughfare, named Duke Street. From this brief sketch, it must be sufficiently obvious that the condition of the nursing arrangements in this hospital call loudly for a radical alteration. The hours for duty are not only excessive, but beyond the capacity of the very strongest to meet; they require to be materially curtailed if the legitimate requirements of the sick poor treated therein are to be fairly met. Nor is this all: when off duty, it should be so managed that each nurse should have some room or place set apart to which she might retire, for nothing is so depressing as the unbroken sight and sound of sickness; indeed, we see no reason why the governing authorities should not provide some distinctive home for their nursing staff. Surely, an establishment the governors of which boast that they have 710 beds, that they treat annually 6,000 in- and 150,000 out-patients, and whose other offices are arranged on a scale of palatial magnificence, might make better provision for the health and comfort of those on whom devolve the onerous and important duties of nursing their sick, and that, too, when we recall the princely hospitality recently exhibited towards the Prince and Princess of Wales on the occasion of their visit to see the new buildings.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

An ordinary monthly meeting of the Council of the College was held on Thursday, the 8th inst. The minutes of the ordinary Council held last month were confirmed. Signatures to the by-laws of members elected to the fellowship were presented. Reports were received from the Court of Examiners on candidates found qualified for the fellowship; and from the Nomination Committee, who, taking advantage of the clause of the regulations adopted in June by the Council, namely, that the regulations limiting the period of office for any examinership to five consecutive years may, upon special recommendation by the Nomination Committee and the approval of the Council, specially recommended for the approval of the Council, that the regulation be suspended in favour of Mr. Pick, who has held office as an Examiner in Anatomy for the past five years. The Committee recommended the following Fellows, arranged in order of seniority of fellowship, as members of the Board of Anatomy and Physiology for the membership and fellowship of the College for the ensuing year: for anatomy, Messrs. Rivington, Langton, Pick, and Bellamy; and for physiology, Messrs. Henry Power, Morratt Baker, Lowrie,

McCarthy, and Professor Yeo. The report and recommendations were approved of and accepted by the Council. Letters were read from Sir William Mac Cormac and Mr. Miller (Registrar of the General Medical Council).

ASSOCIATION INTELLIGENCE.

COMMITTEE OF COUNCIL:

NOTICE OF QUARTERLY MEETINGS FOR 1882: ELECTION OF MEMBERS.

MEETINGS of the Committee of Council will be held on Wednesday, January 18th, April 12th, July 12th, October 18th. Gentlemen desirous of becoming members must send in their forms of application for election to the General Secretary not later than 21 days before each meeting, viz., December 28th next, March 22nd, May 22nd, September 27th, in accordance with the regulation for the election of members passed at the meeting of the Committee of Council of October 12th, 1881.

November 4th, 1881.

FRANCIS FOWKE, *General Secretary*.

BRANCH MEETINGS TO BE HELD.

SOUTH-EASTERN BRANCH: WEST KENT DISTRICT.—A meeting of the West Kent District will be held at the West Kent General Hospital, Maidstone, on Friday, December 16th, at 3 P.M. Members wishing to read papers or show specimens are requested to communicate with the Honorary Secretary as soon as possible. —A. H. B. HALLOWES, Honorary Secretary, 11, King Street, Maidstone.

METROPOLITAN COUNTIES BRANCH: EAST LONDON AND SOUTH ESSEX DISTRICT.—The next meeting of the above District will be held on Thursday evening, December 15th, at 8.30 P.M., at the New Town Hall, Hackney, when Mr. Timothy Holmes will open a discussion on the Metropolitan Provident Dispensary System. —FREDERICK WALLACE, Honorary Secretary, 96, Cazenove Road, E., November 22nd, 1881.

METROPOLITAN COUNTIES BRANCH: NORTHERN DISTRICT.—The next meeting of the District will be held at the house of Dr. Williamson, 44, Mildmay Park, Highbury, on Thursday, December 15th, at 8.30 P.M. Dr. Stephen Mackenzie will read a paper on Purpura; its Varieties and Causes. Dr. Edward Woakes will read a paper on The Etiology of Diphtheria; its Contagium; the Occurrence of Sudden Death in it: re-considered. —GEO. W. POTTER, M.D., Honorary Secretary, 12, Grosvenor Road, N.

NORTH OF IRELAND BRANCH.—A meeting of this Branch will be held in the Belfast Royal Hospital, Belfast, on Thursday, December 15th, at 12 o'clock noon. Members wishing to read papers will please communicate with JOHN MOORE, M.D., Honorary Secretary, 2, Carlisle Terrace, Belfast. —November 21st, 1881.

GLASGOW AND WEST OF SCOTLAND BRANCH.—There will be a meeting on Thursday, December 15th, in the Royal Infirmary. After the transaction of business a demonstration will be given by Dr. William Macewen, embracing illustrations of Cranial Surgery; Results of a modification of the Subperiosteal Method of Resection of the Elbow; and Remarks on some points in the immediate Treatment of Wounds. —JOSEPH COATS, Secretary.

BATH AND BRISTOL BRANCH: ORDINARY MEETING.

THE second ordinary meeting of the session was held, at the Bristol Museum and Library, on Wednesday, November 30th, at a quarter-past four o'clock; DAVID DAVIES, Esq., President, in the chair. There were also present seventy-one members and two visitors.

New Members.—Messrs. H. G. Terry, Bath; R. A. Busby, Bath; and J. Parette, Bristol, were duly elected members of the Association and of the Branch.

Consultations with Homœopathic Practitioners.—Dr. HENRY MARSHALL proposed the following resolution: "That this Branch hereby records its entire disapproval of the opinions expressed by the readers of addresses, at the annual general meeting of the Association at Ryde, in reference to consultations with homœopathic practitioners." This was seconded by Dr. H. F. A. GOODRIDGE.

To this the following amendments were moved:

1. Proposed by Mr. E. CROSSMAN, and seconded by Dr. T. E. CLARK: "That this Branch, regretting that the question of consultation with homœopathic practitioners was discussed at the annual meeting, proceeds to the business of the evening."

2. Proposed by Mr. R. W. COE, and seconded by Mr. MICHELL CLARKE: "That this Branch considers it very inadvisable to meet homœopathic practitioners in consultation—whether as regards the best interest of the patient, the honesty of the profession, or the position to which the homœopathic practitioner would necessarily be driven."

The second amendment was first put to the meeting, and was carried

mem. con.; on being put as a substantive resolution, it was again carried mem. con.

The following gentlemen took part in the discussion: Messrs. H. Marshall, M.D.; H. F. A. Goodridge, M.D.; J. Stewart; E. Crossman; T. E. Clark, M.D.; R. W. Thomas; J. G. Swayne, M.D.; Alex. Waugh; G. F. Burder, M.D.; E. L. Fox, M.D.; J. Beddoe, M.D.; C. H. Collins; C. Elliott, M.D.; A. Carr; E. Markham Skerritt, M.D.; R. W. Coe; W. Michell Clarke; G. Thompson; and F. R. Cross, M.B.

CORRESPONDENCE.

HAS THE DURATION OF HUMAN LIFE IN ENGLAND INCREASED DURING THE LAST THIRTY YEARS?

I.

SIR,—The question, whether the life and health of the people of England has been improving, or otherwise, during the last generation, is one which cannot fail to be of interest both to medical men and the public. Having given some attention to this question, I propose to put before you, as a sanitary authority, and before the readers of the JOURNAL, some facts and arguments, which appear to show that there is not so much reason as is commonly supposed to congratulate ourselves on the present state of things. It is often stated on public platforms, and by eminent men, that human life in this country has lengthened since the present very elaborate set of statistics began to be kept in 1838. The way in which this conclusion is arrived at is the following. If the death-rate of the three years 1838-40 be compared with that of the four years 1876-9, it appears that the average mortality-rate of the former years was 22.3 per 1000, and of the latter 21 per 1000, or an average duration of life of 44.8 years, against 47.6 years. This gives an average increase of 2.8 years of life to each individual in the country; or, taking the population of England and Wales in 1881 at 25,798,922 persons, an average increase of life of 2.8 years to each individual would represent, in the aggregate, no less an addition to the life of the community than 72,236,981 years in a generation. At the same rate, the increase in the United Kingdom would amount to little less than one hundred millions of years in a generation. This is, no doubt, a very material increase, and one on which we are entitled to congratulate ourselves, since much of the improvement is unquestionably due to improved sanitation, in the better ventilation, better sewerage and drainage, diminished overcrowding, fewer cellar-dwellings, and so on, that exist now, as compared with former years.

But, unfortunately, this is not all that is to be learned from the figures of the Registrar-General; and it has to be added that some of his statements are not of so reassuring a character. Thus, we find that the *whole* of the improvement referred to *has been effected in saving young lives; while adult males above thirty-five years of age, and females above forty-five, are dying at a greater rate than they used to do.* Thus, if we compare the average of the period of twenty-eight years, 1851-78, with the year 1879, it appears that, on the average of the twenty-eight years, out of every 1000 male children born, 360.5 died before attaining the age of five years; while, if the rate obtaining in the year 1879 were to hold, only 319.5 would die. This would mean a decreased mortality of 11.4 per cent. on male children under the age of five years; and, in following the figures for the higher ages of males, it appears that in 1879 the saving was 19 per cent. for ages five to ten, as compared with the previous twenty-eight years; from ages ten to fifteen years, it was 24.4 per cent.; from fifteen to twenty, it was 22.6; from twenty to twenty-five, it was 22.6 per cent.; and from twenty-five to thirty-five, it was 11.3 per cent. For females, the saving was 14.1 per cent., 22.4, 24.4, 25.4, 23.7, and 16.7, respectively, for the same ages; while, from thirty-five to forty-five years of age, there was a saving effected of 5.8 per cent. in 1879, as compared with the previous twenty-eight years. That is to say: of females living in 1879, between the ages of thirty-five and forty-five years, 5.8 per cent. fewer died than there died at these ages on the average of the twenty-eight preceding years. Taking, now, the case of males *above* thirty-five years of age, the contrary appears; and we find that, while 13.3 died out of every 1000 living at ages thirty-five to forty-five years, on the average of the twenty-eight years, 13.5 per 1000 (or 1.5 per cent. more) died in 1879; at ages forty-five to fifty-five, 2.6 per cent. more died; at fifty-five to sixty-five, 11.9 per cent. more died; at sixty-five to seventy-five, 7.8 per cent. more; at seventy-five to eighty-five, 11 per cent. more; and at eighty-five and upwards, 7 per cent. more. For females above forty-five years of age, the figures are these: between the ages of forty-five and fifty-five years, .6 or $\frac{1}{16}$ per cent. more died in 1879 than on the

average of the preceding twenty-eight years; from fifty-five to sixty-five years of age, 12.2 per cent. more died; from sixty-five to seventy-five, 11.6 per cent. more; from seventy-five to eighty-five, 9.5 per cent. more; and above eighty-five years of age, 4.8 per cent. more. These figures show a very considerable saving of life at the younger ages, in the year 1879, over the average of the previous twenty-eight years; and, on the other hand, a considerable loss above the age of thirty-five years for males and forty-five years for females.

I have compared the three years 1838-40 with the four years 1876-9, in order to find the improvement in human life during the period over which present statistics extend; and, on this calculation, it appears that about 2.8 years have been, on the average, added to each life. But there is reason to believe that this is rather too favourable an estimate of the improvement. If, for instance, periods of ten years were compared through the forty-two years, the numbers would stand thus. For the ten years 1841-50, the mean annual mortality was 22.4 per 1000; for 1851-60, it was 22.2 per 1000; for 1861-70, it was 22.5 per 1000; and for the nine years 1871-9, it has been 21.5 per 1000. These figures show no improvement at all; but, on the contrary, a slight deterioration up to 1870, and since then an increase of only 1.9 years to each life, on the average. If, again, the period be divided into quinquennials, we find that the rate in 1841-5 was 21.4 per 1000, and in 187-69 (four years) 21 per 1000; and this only means an average increase to each life of .9 or $\frac{1}{10}$ of a year.

But, even on the most favourable estimate that can be formed of the improvement which has been effected, I now propose to show that this addition to human life in this country has been made solely by a better management (and, no doubt, prevention) of zymotic diseases or fevers; and that, if the mortality from these diseases were as high now as it used to be, human life in this country, instead of being longer than before, would be somewhat shorter. I am, unfortunately, unable to go back beyond 1850 for this calculation; but I think it will not be denied that thirty years is a fair period of time on which to base an opinion as to the increase or decrease of the length of life. In the five years 1850-4, the deaths from zymotic diseases averaged 5234 per million persons living. In 1855-9, it averaged 5039 per million living; in 1860-4, 4899 per million; in 1865-9, 5172 per million; in 1870-4, 4849 per million; and in 1875-9, 3911 per million. In the years 1877, 1878, and 1879, the zymotic death-rates were respectively 3559 per million persons living, 4278, and 3239—the total death-rates for these years being 20.4 per 1000, 21.7, and 20.9. In commenting on these figures, it may be said that the death-rate from zymotic diseases to a great extent controls the total death-rate. If the deaths from zymotic diseases are numerous, the total death-rate is high. This is not the case absolutely; but it is undoubtedly a tendency. For instance: in the five years 1865-9, both the zymotic death-rate and the total death-rate were high. In the previous five years, the zymotic death-rate was less, and so was the total death-rate. In 1877-8-9, the zymotic death-rates were low; while 1878, which had a higher zymotic death-rate than either of the other two years, had also a higher total death-rate, 21.7 per 1000, against 20.4 in 1877 and 20.9 in 1879. Now, if the death-rate, exclusive of that from zymotic diseases, be calculated for the five years 1850-4, and also for the five years 1875-9, it will be found to be higher for the latter set of years than for the former; and it is also higher, on the average of the three years 1877-8-9, than for the five years 1850-4. Thus, for 1850-4, the average total death-rate was 22,299 per million living; and the average zymotic death-rate 5234—leaving a general death-rate of 17,065. For the five years 1875-9, the average total death-rate was 21,379 per million, and the zymotic death-rate 3911—leaving a general death-rate of 17,468. For the three years 1877-9, the corresponding figures are 21,007 per million, and 3692; and the average general death-rate is, therefore, 17,315. Therefore, on comparing 1850-4 with 1875-9, it appears that there is a greater mortality in the latter period by 403 per million, when the death-rate from zymotic diseases is deducted. The increase is equal to 2.3 per cent. On comparing 1850-4 with 1877-9, it appears that there is a greater mortality by 250 per million in the latter period, or nearly 1.5 per cent., after the zymotic death-rate is deducted.

To translate these results in such a way as to enable us to realise them better, it may be said that, if the general death-rate (that is, the total death-rate *minus* the zymotic-rate) had been as low on the average of the five years 1875-9 as it was in 1850-4, some 49,370 adults, or a population equal to that contained in the City of London proper, would now be living in England and Wales more than is actually the case; and, if the three years 1877-9 had shown as low a general death-rate as the five years 1850-4, some 19,642 persons, who died in those years, would now be living amongst us. So far, therefore, from its being the fact that human life is now longer than it was thirty years ago, the fact is that the apparent lengthening of life can be more than

COMPULSORY REPORTS OF INFECTIOUS DISEASES.

A FURTHER discussion took place, at the last meeting of the Public Health Committee of Liverpool, on the proposed amendments to the Sanitary Acts by local legislation, empowering the medical officers, in all cases of infectious disease, "to order schools, dairies, and provision stores to be temporarily closed"; and requiring all medical practitioners, under penalty, to report to the medical officer of health all cases of infectious diseases under their charge. Dr. Jacob's letter, published last week in the JOURNAL, was read; also the following letter from Dr. Littlejohn, medical officer of health for Edinburgh.

"I am now the oldest medical officer of health in the country, having been appointed in 1863, and having been surgeon of police since 1854. I saw how helpless the Corporation were when infectious diseases broke out, from ignorance of the localities where the first cases had appeared, and year by year I did my best to impress upon the local authority the importance of obtaining this information. Meanwhile, Edinburgh, as an educational centre, suffered much from repeated outbreaks of epidemic disease, and ultimately the Corporation became fully alive to the importance of the subject, and determined to bring in a local Act. With a view to this, I was instructed to bring the subject before our two colleges of physicians and surgeons. Their bodies reported almost unanimously against it. Meanwhile the Corporation presented their bill before Parliament, and this, having successfully run the gauntlet before committees of both houses, passed into law in November 1879. The medical profession were taken somewhat by surprise when the enclosed letter was forwarded to them, and also forms of intimation, and also stamps and envelopes. So convinced were the Corporation that the information thus sought to be obtained was advantageous to the city, that they spontaneously offered a fee of 5s. for each intimation. Up to the 31st October 1881, 9,000 intimations have been received, at a cost to the ratepayers of £1,150. The profession have withdrawn all opposition, and have loyally obeyed the Act, and the only instance of refusal was the case of a gentleman, who believed that 'gastric' was not included in the term 'typhoid'. He determined to make himself a martyr, refused all compromise, and was fined by the stipendiary magistrate. He did not enter an appeal, and has since the trial regularly sent in intimations of his cases."

In the course of the discussion which followed, it was stated that the medical profession in Liverpool were very strong, and almost unanimously opposed to such provisions, and that their opposition would render the enactment, if carried out, a dead letter. Dr. Hamilton and Dr. Bligh both strongly opposed the clauses, Dr. Bligh stating that, at a meeting of the medical profession at the Stanley Hospital, out of twenty-three present, twenty voted against the adoption of these provisions; and in the result it was resolved, by a large majority, to omit the clause."

HOSPITAL AND DISPENSARY MANAGEMENT.

THE METROPOLITAN PROVIDENT DISPENSARY ASSOCIATION.

SPEAKING of this Association, the *Charity Organisation Reporter* informs us that up to the present time four dispensaries have been established—one in Leicester Square, one in Lamb's Conduit Street, one in Kensal Town, and one at Croydon. Two others will be opened shortly in the Goswell Road and in the Camden Road. At Croydon, more than seventy members were enrolled during the first week; and it was stated that on the first day of the new year one thousand members of different friendly societies would give in their names. Though it will thus be seen that the Association is advancing rapidly, money is still needed to enable the Council to put it forward on a scale which shall be at all adequate to the wants of the metropolis; and they solicit the support of all persons who are interested in the cause.

MURRAY'S ROYAL ASYLUM, PERTH.

MURRAY'S Royal Asylum at Perth, one of the chartered asylums of Scotland, which in great measure fill the place occupied by private asylums in England, seems to be thriving under the spirited superintendence of Dr. Urquhart, whose annual report has just been published. Various improvements have been effected or are in progress. Enclosed airing-courts have been converted into open terraces, a stage has been erected for theatrical and musical performances, and telephonic communication has been established between the asylum and the detached residence of the medical officer. The Visiting Commissioner notices that seclusion has been resorted to on seventeen occasions in the case of four ladies, and that a *box-bed with a lid* is in regular use

in the case of one lady. It is somewhat curious to find that the box-bed, an objectionable and humiliating instrument of mechanical restraint which was banished from English asylums, we believe, many years ago, is still in use in the country which boasts itself of its open-door system.

MEDICAL NEWS.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—The following Members of the College, having undergone the necessary examinations for the Fellowship at the half-yearly meeting of the Court of Examiners terminating on the 28th ultimo, were reported to have acquitted themselves to the satisfaction of the Court, and at a meeting of the Council on the 8th instant were admitted Fellows of the College.

Messrs. Charles B. Lockwood, L.S.A., Serjeant's Inn, diploma of membership dated April 17th, 1878; Walter S. A. Griffith, Guildford Street, W.C., April 16th, 1878; Henry G. Barling, M.B.Lond., Newnham, Gloucestershire, July 25th, 1879; Samuel G. Shattock, L.S.A., Devonshire Hill, Hampstead, January 25th, 1876; John C. Uthoff, M.D.Lond., Hove, Brighton, July 25th, 1877; Albert W. D. Leahy, L.S.A., Warwick Street, S.W., November 11th, 1878; and Richard Gill, M.B.Lond., Prince's Street, Hanover Square (not a member).

One candidate had not yet attained the legal age, but the diploma will be presented to him on reaching the age of 25.

Seventeen candidates, out of the twenty-five examined, having failed to acquit themselves to the satisfaction of the Court of Examiners, were referred to their professional studies for twelve months.

At the same meeting of the Council, Mr. Richard Cross, M.D. St. Andrew's, of Scarborough, was elected a Fellow of the College, his diploma of membership bearing date November 13th, 1840; and Mr. Edward Haddack, L.S.A., of Biddulph, Congleton, elected a Fellow at a previous meeting of the Council, was admitted as such, his diploma of Membership bearing date October 21st, 1842.

APOTHECARIES' HALL.—The following gentlemen passed their Examination in the Science and Practice of Medicine, and received certificates to practise, on Thursday, December 1st.

Day, John Roberson, 121 Camden Road, N.W.
Phillips, Frank Leslie, National Hospital, Ventnor.
Spicer, Robert Henry Seams, 24, Cambridge Street, Hyde Park.
Stuart, Ernest Offord, Nightingale Vale, Woolwich.

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

Parakh, Nasarwanji N., Grant Medical College, Bombay.

MEDICAL VACANCIES.

The following vacancies are announced:—

BALLINA UNION—Medical Officer for Crossmolina Dispensary District. Salary, £120 per annum, with £20 yearly as Medical Officer of Health, registration and vaccination fees. Election on the 28th instant.

BECKITT HOSPITAL AND DISPENSARY, Barnsley—House-Surgeon. Salary, £150 per annum. Applications by December 10th.

DENTAL HOSPITAL, Leicester Square—Dental House-Surgeon. Applications by December 12th.

EAST LONDON HOSPITAL FOR CHILDREN, Shadwell, E.—Resident Clinical Assistant. Applications by December 16th.

GENERAL HOSPITAL, Birmingham—Honorary Surgeon. Applications to Mr W. T. Grant, House-Governor, by December 24th.

HUNTINGDON COUNTY HOSPITAL—House-Surgeon. Salary, £60 per annum. Applications to the Rev. R. H. Gatty, Honorary Secretary, Buchden, Huntingdon, by December 12th.

LINCOLN GENERAL DISPENSARY—Resident Medical Officer. Salary, £150 per annum. Applications by December 14th.

LONDON LOCK HOSPITAL—Assistant House-Surgeon to the Female Department. Applications to the Secretary, Lock Hospital, Westbourne Green, Harrow Road, W., by the 20th instant.

METROPOLITAN FREE HOSPITAL, 81, Commercial Street, Spitalfields, E.—Assistant House-Surgeon. No Salary. Applications to Mr. George Croxton, Secretary.

MIDDLESEX COUNTY LUNATIC ASYLUM, Colney Hatch—Assistant Medical Officer. Salary, £150 per annum. Applications by December 13th.

ROYAL SOUTH LONDON OPHTHALMIC HOSPITAL, St. George's Circus, S.E.—Clinical Assistant for three days a week. Salary, £25 per annum. Applications to the Secretary by the 14th instant.

SHEFFIELD GENERAL INFIRMARY—House-Surgeon. Salary, £120 per annum. Applications to the Medical Staff (care of the Secretary) by December 17th.

TOTNES UNION—District Medical Officer for No. 4 Berry Pomeroy District. Salary, £35 per annum. Applications by December 10th.

UNIVERSITY OF EDINBURGH—Examinerships in Clinical Medicine, Surgery, Physiology, Materia Medica, and Pathology. Applications to the Secretary of the University by January 16th.

VICTORIA HOSPITAL FOR CHILDREN, Queen's Road, Chelsea, S.W.—Assistant Physician. Applications to the Secretary by December 12th.

VICTORIA HOSPITAL FOR CHILDREN, Queen's Road, Chelsea, S.W.—House-Surgeon. Applications to the Secretary, December 12th.

WEST DERBY UNION—Medical Officer for the Township of Wavertree. Salary, £45 per annum. Applications by December 13th.

MEDICAL APPOINTMENTS.

BATTERHAM, J. W., M.R.C.S., L.S.A., appointed Junior House-Physician to the Westminster Hospital.

GUBBIN, G. F., M.R.C.S., L.R.C.P. Lond., appointed Senior House-Physician and Chloroformist to the Westminster Hospital.

MACNAMARA, H. W., M.R.C.S., appointed Resident Obstetric Physician to the Westminster Hospital.

MORRIS, C. K., M.R.C.S., appointed Surgeon to the Johnson Hospital, Spalding.

MORRIS, Edwin, M.D., F.R.C.S., appointed Senior Surgeon to the Johnson Hospital, Spalding.

MORRIS, W. W., L.R.C.P., appointed Medical Officer and Public Vaccinator for the East District of the Bingham Union, *vice* T. P. Wright, M.R.C.S., L.S.A., resigned.

WEBSTER, J. H., L.R.C.P., appointed Medical Officer and Public Vaccinator to the No. 1 and Morden District, Wareham and Purbeck Union, *vice* W. J. Boreham, M.D., resigned.

WILLIAMS, C. R., M.B., appointed Medical Officer to the Ashby-de-la-Zouche Union, *vice* M. Coote, M.D., deceased.

WOODHOUSE, Stewart, M.D., elected Assistant-Physician to the Richmond, Whitworth, and Hardwicke Hospitals, *vice* Reuben J. Harvey, M.D., 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.

BIRTH.

MONTGOMERY.—At Strickland House, Penrith, on the 29th November, the wife of T. Lowther Montgomery, F.R.C.S.E., of a daughter.

MARRIAGE.

BEATTY—SCOTT.—On December 1st, at Christ Church, New Seaham, by the Rev. W. A. Scott (uncle of the bride), assisted by the Rev. D. W. James, William J. Beatty, L.R.C.P., etc., of Barrington Crescent, Stockton-on-Tees, youngest son of Dr. Beatty, of Seaham Harbour, to Alice Fitzgerald, third daughter of the late Rev. John Scott, Rector of Marshalstown, Ireland, and niece of the late General Hill.

DEATHS.

ELLIOTT.—On November 30th, at Orrell House, Sowerby Bridge, James Elliott, Surgeon, only son of the late William Elliott, M.D., aged 38.

HENRY.—On the 4th inst., at 10, Lowther Street, Whitehaven, Emerson Wilson Henry, M.D., M.Ch., aged 37.

HEALTH OF FOREIGN CITIES.—The following facts and figures, derived from a table in the Registrar-General's last weekly return, afford trustworthy indications of the recent health and sanitary condition of various foreign and colonial cities. In the three principal Indian cities, the death-rate, according to the most recent weekly returns, averaged 31.4 per 1000; it was equal to 25.2 in Bombay, 33.7 in Calcutta, and 35.3 in Madras. Cholera caused 26 deaths in Calcutta, and fatal cases of small-pox were reported in Madras; the usual large proportion of fever fatality occurred in each of the three cities. The death-rate in Alexandria was equal to 35.4, and showed a further increase upon the rates in recent weeks; 12 deaths resulted from typhoid fever, and 12 from whooping-cough. According to the most recent weekly returns, the average annual death-rate in twenty-one European cities was equal to 26.7 per 1000 of their aggregate population, whereas the average rate in twenty of the largest English towns during last week did not exceed 20.6. The rate in St. Petersburg showed a further increase to 43.9, and the 563 deaths included 35 from typhus and typhoid fevers, and 11 from diphtheria. In three other northern cities—Copenhagen, Stockholm, and Christiania—the rate did not average more than 22.2, the highest being 27.5 in Copenhagen; measles caused 6 deaths in Christiania, and diphtheria 3 in Copenhagen. The Paris death-rate declined to 24.8, and 54 deaths were referred to diphtheria and croup, 31 to typhoid fever, and 10 to small-pox. The rate in Brussels did not exceed 21.5; the deaths, however, included 5 fatal cases of typhoid fever. In the three principal Dutch cities—Amsterdam, Rotterdam, and the Hague—the average death-rate was 22.9, and the highest was 23.8 in the Hague; the zymotic fatality in these towns was very small. The death-rate in Geneva was equal to 25.0, and 3 fatal cases of diphtheria and croup were reported. The Registrar-General's table includes eight German and Austrian cities, in which the death-rate averaged 26.4, and ranged from 21.8 and 24.1 in Dresden and Hamburg, to 29.0 and 29.3 in Prague and Budapest. Small-pox caused 19 deaths in Vienna and 15 in Budapest; diphtheria again showed fatal prevalence in Berlin and Hamburg. The death-rate in Naples, Turin, and Venice was equal to 28.7, 24.9, and 26.2 respectively, and averaged 27.2; typhoid fever caused 10 deaths in Naples and 8 in Turin. In four large American cities, the death-rate averaged 26.1; it was 21.6 in Philadelphia, 25.9 in Baltimore, 26.0 in Brooklyn, and 29.0 in New York. Small-pox caused 11 deaths in Philadelphia and 7 in New York. Diphtheria showed excessive fatal prevalence in each of these American cities.

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.—North-west London, 2.30 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. 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., 1; Ophthalmic Department, W., 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, M. Th., 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. Tu. Th. F., 2; Ear, S., 1.30; Skin, W., 1.45; S., 9.15; Throat, Th., 2.30; Dental, W., 10.3.

WESTMINSTER.—Medical and Surgical, daily, 1.30; Obstetric, Tu. F., 1; 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. Dr. Hilton Fagge will open a discussion on the Salicylate Treatment of Acute Rheumatism, when numerous Hospital Statistics will be laid before the Society by the President (Dr. Broadbent), Dr. Coupland, Dr. de Havilland Hall, Dr. Charles Hood, Dr. Isambard Owen, Dr. Warner, and Dr. Gilbert Smith.

TUESDAY.—Royal Medical and Chirurgical Society, 8 P.M., Ballot. 8.30 P.M., Mr. Reginald Harrison (Liverpool): Case of Lithotomy where a Tumour of the Prostate was successfully enucleated; with Remarks on the Removal of such Growths. Mr. Berkeley Hill: Case of Fibrous Polypus of the Bladder successfully removed.

WEDNESDAY.—Royal Microscopical Society, 8 P.M. Mr. A. D. Michael: Further Observations on British Oribatidæ. Mr. W. H. Symons: On a Hot and Cold Stage for the Microscope.

THURSDAY.—Harveian Society of London, 8.30 P.M. Third Harveian Lecture, by Dr. Alfred Meadows, on Menstruation and its Derangements.—Abernethian Society, St. Bartholomew's Hospital. Mr. Gill: Rises of Temperature after Operations.

FIFTIETH ANNUAL MEETING, 1882.

THE BRITISH MEDICAL ASSOCIATION.

President.—BENJAMIN BARROW, F.R.C.S.Eng., Consulting Surgeon to the Isle of Wight Infirmary, Ryde.

President-Elect.—WILLIAM STRANGE, M.D., Senior Physician to the Infirmary, Worcester.

President of Council.—C. G. WHEELHOUSE, F.R.C.S.Eng., Senior Surgeon to the General Infirmary, Leeds.

Treasurer.—W. F. WADE, F.R.C.P., Physician to the General Hospital, Birmingham.

Editor of Journal.—ERNEST HART, Esq.

General Secretary.—FRANCIS FOWKE, Esq.

The FIFTIETH ANNUAL MEETING of the Association will be held
August 8th, 9th, 10th, 11th, 1882, at WORCESTER.

Under the Presidency of

WILLIAM STRANGE, M.D.

The ADDRESS in MEDICINE will be delivered by W. F. WADE, F.R.C.P., Physician to the General Hospital, Birmingham.

The ADDRESS in SURGERY will be delivered by W. STOKES, M.D., F.R.C.S.I., Professor of Surgery in the Royal College of Surgeons of Ireland.

The business of the Annual Meeting will be carried on in seven Sections, viz.: Medicine, Surgery, Obstetric Medicine, State Medicine, Anatomy and Physiology, Pathology, Ophthalmology and Otology.

The objects of the Association are—the promotion of Medical Science, and the maintenance of the honour and interests of the Medical Profession. The Subscription to the Association is One Guinea annually; and each Member on paying his Subscription is entitled, in addition to the other advantages of the Association, to receive weekly, post-free, the “BRITISH MEDICAL JOURNAL: BEING THE JOURNAL OF THE BRITISH MEDICAL ASSOCIATION.” The Subscription is payable, in advance, on the 1st January in each year.

Gentlemen desirous of becoming members of the Association should communicate their wish to the HONORARY LOCAL SECRETARIES, or to the General Secretary, F. FOWKE, Esq., 161A, Strand, London, W.C., in order that the proper steps may be taken for their election.

For the Annual Subscription of One Guinea, paid in advance, the BRITISH MEDICAL JOURNAL is forwarded weekly to Members, free by post. For persons not Members of the Association, the Annual Subscription is Twenty-eight Shillings.—Orders, enclosing remittances, should be addressed to FRANCIS FOWKE, Esq., at the Office of the Journal, 161A, Strand, W.C.

GRANTS IN AID OF ORIGINAL RESEARCHES IN MEDICINE AND THE ALLIED SCIENCES.

Annual Grants of the total value of £300 are made, in aid of Scientific Researches in Medicine and the Allied Sciences. Applications, stating the nature and objects of the intended research, should be sent to Mr. ERNEST HART, Honorary Secretary to the Scientific Grants Committee, or to the General Secretary, at the Office of the Association, 161A, Strand, London, W.C.

The BRITISH MEDICAL JOURNAL for 1882.

Edited by ERNEST HART, Esq.

The JOURNAL includes the earliest *scientific, social, and political information* on all subjects interesting to the Profession; LEADING ARTICLES and Editorial Comments on the Subjects of the Week; ORIGINAL ARTICLES and LECTURES by the most eminent authorities; MEMORANDA and RECORDS of DAILY PRACTICE by Hospital and General Practitioners; Extracts from British and Foreign Journals; Reports of the Practice of the Hospitals and Asylums of Great Britain and Ireland; Full Reports of the Proceedings of the British Medical Association and of its Branches and Committees; Special Correspondence from the principal Cities and localities of Great Britain, Ireland, and the Continent; Reports of the Principal Medical Societies in England, Scotland, and Ireland; Reports on New Inventions; Special Reports on Sanitary and Medico-Legal Questions; Reviews of Books; a Department devoted to the Public Health and Poor-Law Service; a Department devoted to the Military and Naval Medical Services; University Intelligence; Lists of Vacant Appointments; Obituaries of Medical Men; Notices and Answers to Correspondents.

The arrangements for reporting the proceedings of the MEDICAL SOCIETIES in the United Kingdom are very complete, and include the Transactions of Societies in London, Edinburgh, Dublin, Birmingham, Manchester, Liverpool, Glasgow, Cambridge, Leeds, etc., together with selected Reports of the Papers read, and the Cases and Specimens exhibited, at the Meetings of the Branches of the BRITISH MEDICAL ASSOCIATION.

The Department devoted to the interests of the **PUBLIC HEALTH** and **POOR-LAW MEDICAL SERVICES** has been largely developed, and the services of gentlemen of the highest authority and largest experience have been obtained. The Department includes notices and answers to questions from Medical Officers of Health and Poor-Law Medical Officers, and is intended to assist and support them in the performance of their difficult duties.

The Department devoted to the interests of the **ARMY** and **NAVY MEDICAL SERVICES** fulfils similar functions in respect to these services.

In the forthcoming Volumes will be published, adequately illustrated—

THE LUMLEIAN LECTURES, delivered at the Royal College of Physicians of London, on the **Pathology of Inflammations**. By **J. Burdon Sanderson, M.D., F.R.C.P., LL.D., F.R.S.**, Jodrell Professor of Physiology in University College, London.

THE CROONIAN LECTURES delivered at the Royal College of Physicians of London, on the **Climate and Fevers of India**. By **Sir Joseph Fayrer, M.D., F.R.C.P., LL.D., F.R.S.**, Physician to the Secretary of State for India in Council.

THE GULSTONIAN LECTURES delivered at the Royal College of Physicians of London, on **Pulmonary Cavities, their Origin, Growth, and Repair**. By **William Ewart, B.A., M.B., F.R.C.P.**, Assistant-Physician to the Hospital for Consumption at Brompton.

THE BRADSHAW LECTURE delivered at the Royal College of Physicians, on the **Position of the Sympathetic in the Causation of Disease**. By **Edward Long Fox, M.D., F.R.C.P.**, Consulting Physician to the Bristol Royal Infirmary.

SIX HUNTERIAN LECTURES on **Temperament, Diathesis, and Idiosyncrasy**, delivered at the Royal College of Surgeons of England. By **Jonathan Hutchinson, F.R.C.S.**, Senior Surgeon to the London Hospital.

LECTURES on the Anatomy, Physiology, and Zoology of the Edentata, delivered at the Royal College of Surgeons of England. By **W. H. Flower, LL.D., F.R.S.**, Professor of Human and Comparative Anatomy in the College.

LECTURES on the Morphology of the Vertebrata, delivered at the Royal College of Surgeons of England. By **W. K. Parker, F.R.S.**, Professor of Human and Comparative Anatomy in the College.

Reports presented to the Scientific Grants Committee of the British Medical Association : with Illustrations.

The Subjects of Research are :—

The Pathology of the Brain : Dr. Hamilton.

The Organisms of Septic Disease : Mr. Watson Cheyne.

The Time and Relations of Muscular Contraction in the Human Body in Health and Disease : Dr. Augustus Waller.

Life History of Contagium : Dr. Braidwood and Mr. Vacher.

Vegetable and Animal Parasites of the Human Skin : Dr. Thin.

The Application of Antiseptic Surgery in Cases of Lesion of the Head : Dr. Gerald Yeo.

The Function of the Kidney : Dr. Newman.

The Relation between Bacteria and Surgical Diseases : Dr. Ogston.

The Relation between the Nitrogenous Egesta and Muscular Work : Mr. W. North.

Septicæmia in Animals : Mr. J. A. Dowdeswell.

Inflammation : with Special Reference to the Alterations of the Blood Vessels : Mr. Stanley Boyd.

The Pathology of the Heart : Dr. Roy.

Variations in the Duration of the Cardiac Ventricular Systole in Man : Dr. P. Chapman.

Investigations of Anæsthetics : Special Committee.

The JOURNAL will also contain :—

The President's Address, the Addresses in Medicine and Surgery, and the Addresses of the Presidents of Sections, delivered at the Annual Meeting of the BRITISH MEDICAL ASSOCIATION.

Clinical and other Lectures and Addresses, and Papers on Important Scientific and Practical Subjects, by Medical Officers of the Hospitals in the United Kingdom, and other eminent Members of the Medical Profession.

A Series of Articles on Recent Advances in Therapeutics : on Matters connected with the Legal Obligations of the Medical Profession ; and on various important points in the Progress of Medical Science.

Lectures and other Contributions from the following, among other, Members of the Profession:—

- Allbutt, T. Clifford, M.A., M.D. F.R.S.,** Senior Physician to the General Infirmary, Leeds.—THE SURGICAL AIDS TO MEDICINE.
- Anderson, McCall, M.D.,** Professor of Clinical Medicine in the University of Glasgow.—LECTURES ON CLINICAL MEDICINE.
- Annandale, Thomas, F.R.C.S. Ed., F.R.S.E.,** Professor of Clinical Surgery in the University of Edinburgh.—NOTES and CASES in CLINICAL SURGERY.
- Atthill, Lombe, M.D., F.K.Q.C.P.I.,** Master of the Rotunda Hospital, Dublin.—CONTRIBUTIONS ON DISEASES PECULIAR to WOMEN.
- Baker, W. Marrant, F.R.C.S. Eng.,** Surgeon to, and Lecturer on Physiology at, St. Bartholomew's Hospital.
- Barker, Arthur E., F.R.C.S.I.,** Assistant-Surgeon and Assistant-Professor of Clinical Surgery in University College Hospital.
- Barnes, Fancourt, M.D., M.R.C.P.,** Physician to the British Lying-in Hospital, Assistant-Physician to the Royal Maternity Charity.—CLINICAL EXPERIENCE OF A LYING-IN HOSPITAL.
- Barnes, Robert, M.D., F.R.C.P.,** Obstetric Physician to St. George's Hospital.—CLINICAL LECTURES.
- Bartleet, T. H., M.B., F.R.C.S.,** Surgeon to the General Hospital, Birmingham.—SURGICAL CLINICAL NOTES.
- Bastian, H. Charlton, M.D., F.R.C.P.,** F.R.S., Professor of Pathological Anatomy and Clinical Medicine in University College, and Physician to University College Hospital.—CLINICAL LECTURES.
- Bellamy, Edward, F.R.C.S. Eng.,** Surgeon to Charing Cross Hospital.—CERTAIN DISEASES of the JAWS.
- Braidwood, P. M., M.D.,** Liverpool.—CLINICAL NOTES ON DISEASES of CHILDREN.
- Browne, J. Crichton, M.D., LL.D., F.R.S.E.,** Lord Chancellor's Visitor in Lunacy.—GROWTH and EDUCATION.
- Brunton, T. Lauder, M.D., F.R.C.P.,** F.R.S., Assistant Physician to and Lecturer on Materia Medica and Therapeutics at St. Bartholomew's Hospital.
- Bryant, Thomas, F.R.C.S. Eng.,** Senior Surgeon to Guy's Hospital.
- Buchanan, George,** Professor of Clinical Surgery in the University of Glasgow.—CLINICAL LECTURES ON SURGICAL SUBJECTS.
- Butlin, Henry T., F.R.C.S. Eng.,** Assistant-Surgeon to St. Bartholomew's Hospital.—THE DIAGNOSIS of EPITHELIOMA.
- Buzzard, Thomas, M.D., F.R.C.P.,** Physician to the National Hospital for Epilepsy and Paralysis.—DISEASES of the NERVOUS SYSTEM.
- Churton, Thomas, M.D.,** Physician to the General Infirmary, Leeds.
- Clutton, H. H., M.A., M.B., F.R.C.S. Eng.,** Assistant-Surgeon to St. Thomas's Hospital.
- Cory, Robert, M.A., M.D., M.R.C.P.,** Assistant Obstetric Physician to St. Thomas's Hospital.
- Cowell, George, F.R.C.S. Eng.,** Surgeon to the Westminster Hospital.—CLINICAL LECTURES ON SURGICAL CASES.
- Croft, John, F.R.C.S. Eng.,** Surgeon to and Lecturer on Clinical Surgery at St. Thomas's Hospital.—THE TREATMENT of STRICTURE by INTERNAL URETHROTOMY.
- Dalby, W. B., M.B., F.R.C.S. Eng.,** Aural Surgeon to St. George's Hospital.—SUBJECTS CONNECTED with AURAL SURGERY.
- Davy, Richard, F.R.C.S. Eng.,** Surgeon to the Westminster Hospital.—1. ON TORSION of the TENDO ACHILLIS, for the RELIEF of TALIPES CALCANEUS. 2. ON the USE of the AORTIC LEVER in UTERINE OPERATIONS.
- Day, W. H., M.D., M.R.C.P.,** Physician to the Samaritan Hospital.—SOME DISEASES of CHILDREN.
- Doran, Alban, F.R.C.S. Eng.,** Assistant Surgeon to the Samaritan Hospital.
- Dreschfeld, Julius, M.D., M.R.C.P.,** Assistant-Physician to the Manchester Royal Infirmary.—NEURO-PATHOLOGICAL CONTRIBUTIONS.
- Drummond, David, M.A., M.D.,** Physician to the Newcastle-on-Tyne Infirmary.—HYSTERIC PARAPLEGIA, and other Subjects.
- Durham, Arthur E., F.R.C.S. Eng.,** Surgeon to Guy's Hospital.—SURGICAL NOTES and EXPERIENCES.
- Eddison, John E., M.D.,** Physician to the Infirmary, Leeds.
- Edis, Arthur W., M.D., F.R.C.P.,** Assistant Obstetric Physician to the Middlesex Hospital. CASES of INTEREST in Gynaecology and Obstetrics.
- Emrys-Jones, A., M.D.,** Assistant-Surgeon to the Manchester Royal Eye Hospital.—CLINICAL OPHTHALMIC CASES.
- Finlayson, James, M.D.,** Physician to the Western Infirmary, Glasgow.—PULSE-BREATH and PULSATILE RESPIRATION.
- Foster, Balthazar, M.D., F.R.C.P.,** Professor of Medicine in Queen's College, Birmingham.—CLINICAL LECTURES.
- Galabin, Alfred L., M.A., M.D., F.R.C.P.,** Assistant Obstetric Physician and First Lecturer on Midwifery at Guy's Hospital.—CASE of HYDATID TUMOUR of the ABDOMEN SIMULATING OVARIAN TUMOUR.
- Glynn, T. R., M.D.,** Physician to the Royal Infirmary, Liverpool.—CLINICAL REPORTS.
- Godson, Clement, M.D., M.R.C.P.,** Assistant-Physician-Accoucheur to St. Bartholomew's Hospital.
- Herman, G. Ernest, M.B.,** Assistant Obstetric Physician to the London Hospital.—CONTRIBUTIONS ON OBSTETRICAL and GYNÆCOLOGICAL SUBJECTS.
- Hicks, J. Braxton, M.D., F.R.C.P., F.R.S.,** Obstetric Physician to Guy's Hospital.—SECONDARY POST PARTUM HÆMORRHAGE.
- Holmes, Timothy, M.A., F.R.C.S. Eng.,** Senior Surgeon to St. George's Hospital.—CLINICAL COMMUNICATIONS.
- Hulke, J. W., F.R.C.S. Eng., F.R.S.,** Surgeon to the Middlesex Hospital.—CLINICAL LECTURES and CASES.
- Jackson, J. Hughlings, M.D., F.R.C.P.,** F.R.S., Physician to the London Hospital.—ON SOME DISEASES of the BRAIN.
- Johnson, George, M.D., F.R.C.P., F.R.S.,** Senior Physician to King's College Hospital.—CLINICAL LECTURES on RENAL and LARYNGEAL DISEASES.
- Jones, H. Maenaughton, M.D.,** Professor of Midwifery in Queen's College, Cork.—NOTES of CLINICAL CASES of INTEREST.
- Jones, Thomas, M.B., F.R.C.S. Eng.,** Surgeon to the Royal Infirmary, Manchester.—REPORTS of SURGICAL CASES.
- Jordan, Furneaux, F.R.C.S. Eng.,** Surgeon to the Queen's Hospital, and Professor of Surgery in Queen's College, Birmingham.
- Latham, P. W., M.D., M.A., F.R.C.P.,** Downing Professor of Medicine in the University of Cambridge; Physician to Addenbrooke's Hospital.—THE THERAPEUTIC VALUE of CHINOLINE.
- Liveing, Robert, M.D., F.R.C.P.,** Physician to the Department of Diseases of the Skin at the Middlesex Hospital.—CLINICAL LECTURES and PAPERS on DISEASES of the SKIN.
- Lucas, R. Clement, M.B., B.S., F.R.C.S. Eng.,** Assistant-Surgeon to Guy's Hospital.—PRINCIPLES for REGULATING the APPLICATION of TAXIS in HERNIA.
- Mackenzie, Stephen, M.D., F.R.C.P.,** Senior Assistant Physician to the London Hospital.—CLINICAL LECTURES and HOSPITAL CASES.
- Mason, Francis, F.R.C.S. Eng.,** Surgeon to St. Thomas's Hospital.—CLINICAL LECTURES and CASES in HOSPITAL PRACTICE.
- Morris, Malcolm, F.R.C.S. Ed.,** Joint Lecturer on Dermatology at St. Mary's Hospital.—DISEASES of the SKIN.
- Murrell, William, M.D., M.R.C.P.,** Lecturer on Materia Medica and Therapeutics at the Westminster Hospital; Senior Assistant-Physician to the Royal Hospital for Diseases of the Chest.—LECTURES on MATERIA MEDICA and THERAPEUTICS.
- Page, Herbert W., B.A., M.B., F.R.C.S. Eng.,** Surgeon to, and Lecturer on Operative and Practical Surgery at, St. Mary's Hospital.—CASES of SECONDARY SUTURE of NERVES. 1
- Parker, Rushton, M.B., F.R.C.S. Eng.,** Professor of Surgery in University College, Liverpool: Assistant-Surgeon to the Liverpool Royal Infirmary.—CONTRIBUTIONS to CLINICAL SURGERY and SURGICAL PATHOLOGY.
- Philipson, G. H., M.A., M.D., F.R.C.P.,** Professor of Medicine in the University of Durham and Senior Physician to the Newcastle-on-Tyne Infirmary.—1. MITRAL STENOSIS. 2. PROGRESSIVE MUSCULAR ATROPHY.
- Pierce, F. M., M.D.,** Senior Surgeon to the Institution for Diseases of the Ear, Manchester.—REPORTS of CASES in AURAL SURGERY.
- Pritchard, Urban, M.D., F.R.C.S. Eng.,** Aural Surgeon to King's College Hospital.
- Roberts, F. T., M.D., F.R.C.P.,** Physician to University College Hospital and Professor of Materia Medica and Therapeutics in University College.—1. CLINICAL LECTURES. 2. CASES in HOSPITAL PRACTICE.
- Ross, James, M.D.,** Assistant-Physician to the Royal Infirmary, Manchester.—REPORTS of MEDICAL CASES.
- Sanctuary, T., M.D.,** NOTES of FOUR CASES of DILATED STOMACH.
- Sargent, A., M.R.C.S.,** Surgeon Bombay Army.—CASES ILLUSTRATING the DIFFICULTIES of DIAGNOSING SUPPURATION of the LIVER.
- Saundby, Robert, M.D.,** Assistant-Physician to the General Hospital, Birmingham.—THE TREATMENT of BRIGHT'S DISEASE.
- Simpson, Henry, M.D.,** Physician to the Royal Infirmary, Manchester.—CLINICAL REPORTS and OBSERVATIONS.
- Skerrett, E. Markham, M.D., M.R.C.P.,** Lecturer on Medicine at the Bristol Medical School; Physician to the Bristol General Hospital.—INTERLOBULAR EMPHYSEMA of the LUNG.
- Smith, R. Shingleton, M.D., M.R.C.P.,** Physician to the Bristol Royal Infirmary.—THE TREATMENT of DIABETES by CODERA.
- Southam, F. A., M.A., F.R.C.S. Eng.,** Assistant-Surgeon to the Royal Infirmary, Manchester.—SURGICAL CASES and NOTES.
- Spanton, W. D., M.R.C.S.,** Surgeon to the North Staffordshire Infirmary.—A further SERIES of CASES of IMMEDIATE CURE of INGUINAL HERNIA.
- Stewart, T. Grainger, M.D., F.R.C.P. Ed., F.R.S.E.,** Professor of Practice of Medicine in the University of Edinburgh.—CONTRIBUTIONS to CLINICAL MEDICINE.
- Swain, Paul, F.R.C.S. Eng.,** Surgeon to the South Devon and East Cornwall Hospital.—NOTES on HOSPITAL CASES.
- Thompson, Sir Henry, M.B., F.R.C.S. Eng.,** Consulting Surgeon to University College Hospital.
- Thornton, J. Knowsley, M.B.,** Surgeon to the Samaritan Hospital.
- Waters, A. T. H., M.D., F.R.C.P.,** Physician to the Royal Infirmary, Liverpool.—CLINICAL LECTURES.
- Wells, T. Spencer, V.P.R.C.S. Eng.,** Consulting Surgeon to the Samaritan Hospital.—EXCISION of the WHOLE UTERUS.
- Whipham, Thomas T., M.A., M.B., F.R.C.P.,** Physician to St. George's Hospital.
- Whitehead, Walter, F.R.C.S. Eng.,** Surgeon to the Royal Infirmary, Manchester.—THE SURGICAL TREATMENT of HÆMORRHOIDS.
- Wilks, Samuel, M.D., F.R.C.P., F.R.S.,** Senior Physician to Guy's Hospital.—CLINICAL LECTURES.
- Wood, John, F.R.C.S., F.R.S.,** Professor of Clinical Surgery in King's College, and Senior Surgeon to King's College Hospital.—CONTRIBUTIONS to CLINICAL SURGERY.

BRITISH MEDICAL ASSOCIATION.

President.

BENJAMIN BARROW, F.R.C.S., Consulting Surgeon to the Royal Isle of Wight Infirmary, Ryde.

President-Elect.

WILLIAM STRANGE, M.D., Senior Physician to the Worcester Infirmary.

Vice-Presidents.

GEORGE S. JENKS, M.D., F.R.C.P., Bath.
ALFRED LOCHÉE, M.D., F.R.C.P., Canterbury.
SIR GEORGE BURROWS, Bart., M.D., F.R.C.P., F.R.S., London.
EDWARD WATERS, M.D., F.R.C.P., Chester.
CHARLES CHADWICK, M.D., D.C.L., F.R.C.P., Tunbridge Wells.
W. D. HUSBAND, F.R.C.S., Bournemouth.
ALFRED BAKER, F.R.C.S., Birmingham.

GEORGE E. PAGET, M.D., F.R.C.P., F.R.S., Cambridge.
SIR ROBERT CHRISTISON, Bart. M.D., D.C.L., Edinburgh.
M. M. DE BARTOLOMÉ, M.D., Sheffield.
DENIS CHARLES O'CONNOR, M.D., LL.D., Cork.
GEORGE MURRAY HUMPHRY, M.D., F.R.C.S., F.R.S., Cambridge.
ALFRED CARPENTER, M.D., J.P., Croydon.

President of the Council.

C. G. WHEELHOUSE, F.R.C.S., Senior Surgeon to Leeds General Infirmary.

Treasurer.

W. F. WADE, F.R.C.P., Physician to the General Hospital, Birmingham.

Committee of Council.

THE PRESIDENT OF THE COUNCIL.
THE PRESIDENT OF THE ASSOCIATION.
THE PRESIDENT-ELECT.
THE VICE-PRESIDENTS.
THE TREASURER.
ONE SECRETARY FROM EACH BRANCH.
T. CLIFFORD ALLBUTT, M.D., Leeds.
L. BORCHARDT, M.D., Manchester.
T. H. BARTLETT, F.R.C.S., Birmingham.

CHARLES DRAGE, M.D., Hatfield.
B. FOSTER, M.D., Birmingham.
E. L. FOX, M.D., Bristol.
C. HOLMAN, M.D., Reigate.
A. J. HARRISON, M.B., Bristol.
LESLIE JONES, M.D., Blackpool.
D. J. LEECH, M.D., Manchester.
C. MACNAMARA, F.R.C.S., London.
F. E. MANBY, F.R.C.S., Wolverhampton.

F. MASON, M.R.C.S., Bath.
R. H. B. NICHOLSON, M.R.C.S., Hull.
HENRY POWER, M.B., F.R.C.S., London.
S. W. SIBLEY, F.R.C.S., London.
H. STEAR, M.R.C.S., Saffron Walden.
A. P. STEWART, M.D., London.
W. F. WADE, F.R.C.P., Birmingham.

Editor of the British Medical Journal.
ERNEST HART, Esq., London.

General Secretary.
FRANCIS FOWKE, Esq., London.

LOCAL SECRETARIES.

Aberdeenshire. R. J. GARDEN, M.D., Aberdeen; J. URQUHART, M.D., Aberdeen.
Argyleshire. JOSEPH COATS, M.D., Glasgow; JAMES G. LYON, M.D., Glasgow.
Ayrshire. JOSEPH COATS, M.D., Glasgow; JAMES G. LYON, M.D., Glasgow.
Banff. R. J. GARDEN, M.D., Aberdeen; JOHN URQUHART, M.D., Aberdeen.
Bath. R. S. FOWLER, Esq., 6, Belmont, Bath.
Bedfordshire. G. F. KIRBY SMITH, Esq., Northampton.
Birmingham. EDWARD MALINS, M.D., 8, Old Square, Birmingham.
Bristol. E. M. SKERRITT, M.D., Clifton.
Berkshire. R. C. SHUTTLE, M.D., Reading.
Buckinghamshire. G. F. KIRBY SMITH, Esq., Northampton.
Cambridgeshire. BUSHELL ANNINGS, M.D., Cambridge.
Carnarthen. A. SHEEN, M.D., Cardiff; J. H. WATHEN, Esq., Clifton.
Carnarvonshire. J. LLOYD ROBERTS, M.B., Denbigh.
Cheshire. A. DAVIDSON, M.D., Liverpool.
Clackmannanshire. JOSEPH COATS, M.D., Glasgow; JAMES G. LYON, M.D., Glasgow.
Cornwall. SUTHERLAND REES PHILLIPS, M.D., Exeter.
Cumberland. J. SMITH, M.D., Dumfries; J. K. BURT, M.B., Kendal.
Denbighshire. J. LLOYD ROBERTS, M.B., Denbigh.
Derbyshire. F. W. WRIGHT, Esq., Derby.
Devonshire. SUTHERLAND REES PHILLIPS, M.D., Exeter.
Dorset. W. G. V. LUSH, M.D., Weymouth; C. H. W. PARKINSON, Esq., Wimborne.
Dublin. G. F. DUFFEY, M.D., 30, Fitzwilliam Place, Dublin.
Dumbartonshire. JOSEPH COATS, M.D., Glasgow; J. G. LYON, M.D., Glasgow.
Dumfries. J. SMITH, M.D., Dumfries; J. K. BURT, M.B., Kendal.
Durham. T. W. BARRON, M.B., 10, Old Elvet, Durham.
East Lothian. CHARLES E. UNDERHILL, M.B., Edinburgh.
Elgin. J. W. N. MACKAY, M.D., Elgin.
Essex. A. HENRY, M.D., 132, Highbury Hill, London, N.; W. CHAPMAN GRIGG, M.D., 6, Curzon Street, Mayfair, W.
Flintshire. J. LLOYD ROBERTS, M.B., Vale Street, Denbigh.
Glamorgan. A. SHEEN, M.D., Cardiff; J. H. WATHEN, Esq., Clifton.
Glasgow. JOSEPH COATS, M.D., 33, Elmbank Street, Glasgow; JAMES G. LYON, M.D., Glasgow.
Gloucestershire. E. M. SKERRITT, M.D., Clifton (for Bristol and neighbourhood); R. W. BATTEN, M.D., Gloucester.
Hampshire. J. WARD COUSINS, M.D., Southsea; T. W. TREND, M.D., Southampton; W. E. GREEN, Esq., Sandown, Isle of Wight; T. C. LANGDON, Esq., Winchester.
Hertfordshire. GEORGE W. CROWE, M.D., Shaw Street, Worcester.
Hertfordshire. A. HENRY, M.D., 132, Highbury Hill, London, N.; W. CHAPMAN GRIGG, M.D., 6, Curzon Street, Mayfair, W.
Huntingdonshire. BUSHELL ANNINGS, M.D., Cambridge.
Inverness-shire. J. W. N. MACKAY, M.D., Elgin.
Ireland. G. F. DUFFEY, M.D., 30, Fitzwilliam Place, Dublin.
Ireland (North). JOHN MOORE, M.D., Belfast.
Ireland (South). T. GELSTON ATKINS, M.D., Cork.
Ireland (West). J. I. LYNHAM, M.D., Galway.
Kent. C. PARSONS, M.D., Dover; T. W. REID, Esq., Canterbury; A. H. B. HALLOWES, Esq., Maidstone.
Kirkcudbright. J. SMITH, M.D., Dumfries; J. K. BURT, M.B., Kendal.
Kincardineshire. R. J. GARDEN, M.D., Aberdeen; J. URQUHART, M.D., Aberdeen.
Lanarkshire. JOSEPH COATS, M.D., Glasgow; JAMES G. LYON, M.D., Glasgow.
Lancashire. A. DAVIDSON, M.D.; C. E. STEELE, Esq., Assistant Sec., Liverpool; C. E. GLASCOTT, M.D., Manchester; H. A. CHESSBROUGH, M.D., Blackburn; W. HALL, Esq., Lancaster; JAMES FAYLOR, Esq., Chester; J. E. GARNER, M.B., Preston.

Leicestershire. F. H. HODGES, F.R.C.S. Ed., Leicester.
Leinster. G. F. DUFFEY, M.D., 30, Fitzwilliam Place, Dublin.
Lincolnshire. C. HARRISON, M.D., Lincoln.
Lincolnshire (North). E. P. HARDEY, Esq., Hull.
Merionethshire. J. LLOYD ROBERTS, M.B., Vale Street, Denbigh.
Middlesex. A. HENRY, M.D., 132, Highbury Hill, London, N.; W. CHAPMAN GRIGG, M.D., 6, Curzon Street, W.
Monmouth. A. SHEEN, M.D., Cardiff; J. H. WATHEN, Esq., Clifton.
Norfolk. M. BEVERLEY, M.D., Norwich.
Northamptonshire. GEORGE KIRBY SMITH, Esq., 53, Sheep Street, Northampton.
Northumberland. T. W. BARRON, M.B., Old Elvet, Durham.
Nottinghamshire. L. W. MARSHALL, M.D., General Hospital, Nottingham.
Renfrewshire. JOSEPH COATS, M.D., Glasgow; JAMES G. LYON, M.D., Glasgow.
Ross and Cromarty. J. W. N. MACKAY, M.D., Elgin.
Rutland. C. HARRISON, M.D., Lincoln; F. H. HODGES, F.R.C.S. Ed., Leicester.
Scotland (Border Counties). J. SMITH, M.D., Dumfries; J. K. BURT, M.D., Kendal.
Scotland (Edinburgh, Lothians, and Fifeshire). CHARLES E. UNDERHILL, M.B., Edinburgh.
Scotland (North). J. W. N. MACKAY, M.D., Elgin.
Scotland (West). JOSEPH COATS, M.D., Glasgow; JAMES LYON, M.D., Glasgow.
Shropshire and Mid-Wales. H. NELSON EDWARDS, Esq., Moreton House, Shrewsbury.
Somerset (East). R. S. FOWLER, Esq., Belmont, Bath.
Somerset (West). W. M. KELLY, M.D., Taunton.
Staffordshire. VINCENT JACKSON, Esq., Wolverhampton; J. G. U. WEST, Esq., Stoke-upon-Trent.
Stirlingshire. JOSEPH COATS, M.D., Glasgow; JAMES G. LYON, M.D., Glasgow.
Suffolk. W. A. ELLISTON, M.D., Ipswich.
Surrey. C. PARSONS, M.D., Dover.
Surrey (Thames Valley). E. L. FENN, M.D., Richmond; J. H. STOWERS, M.D., 15, Lower Tulse Hill, S.W.; A. A. NAPPER, Esq., Cranleigh, Guildford.
Sussex. C. PARSONS, M.D., Dover; T. TROLLOPE, M.D., St. Leonard's; GOLDING BIRD COLLET, Esq., Worthing.
Ulster. JOHN MOORE, M.D., Belfast.
Wales (Mid). H. NELSON EDWARDS, Esq., Shrewsbury.
Wales (North). J. LLOYD ROBERTS, M.B., Denbigh.
Wales (South). A. SHEEN, M.D., Cardiff; J. H. WATHEN, Esq., Clifton.
Warwickshire. E. MALINS, M.B., 8, Old Square, Birmingham; E. RICKARDS, M.D., 14, Newhall Street, Birmingham.
West Lothian. CHARLES E. UNDERHILL, M.D., Edinburgh.
Westmorland. J. K. BURT, M.B., Kendal.
Wiltshire (North). R. S. FOWLER, Esq., Belmont, Bath.
Wiltshire (South). J. WARD COUSINS, M.D., Southsea; H. J. MANNING, Esq., Laverstock, Salisbury.
Worcestershire. GEORGE W. CROWE, M.D., Shaw Street, Worcester.
Yorkshire. ARTHUR JACKSON, Esq., Sheffield.
Yorkshire (East). E. P. HARDEY, Esq., Hull.

COLONIAL BRANCHES.

Adelaide and South Australia. W. L. CLELAND, M.D., Adelaide.
Jamaica. M. STERN, Esq., Kingston.
Melbourne and Victoria. LOUIS HENRY, M.B., St. Kilda, Melbourne.
Sydney and New South Wales. F. MILFORD, M.D., Sydney, N.S.W.