

S.—Botany: Morphology and Introduction to the Classification of Flowering Plants, by Mr. Hicks (Sidney), M. W. F., 11; Anatomy of Plants, with Practical Work, by Mr. Vines (Christ's), M. W. F., 12; Elementary Course (begun), by the same (New Museums), T. Th. S., 10.—Anatomy and Physiology: Geographical Distribution of Animals, by Professor Newton, M. W. F., 1; Advanced Class, by the Demonstrator, M. W. F., 10; Practical Morphology, Elementary Course (*Vertebrata*), M. W. F., 10; Advanced Course (*Ichthyopsida*), T. Th., 11; Physiology (at the New Museums), Elementary Course (continued), by the Trinity Prælector (Mr. Michael Foster), T. Th. S., 9; Advanced Course (continued), by Mr. Lea, W. F., 11; Anatomy and Physiology (Circulatory and Respiratory Systems), by Professor Humphry, T. Th. S., 1; Human Anatomy, Class in Osteology, by the Demonstrator, M. W. F., 12; Class in Anatomy and Physiology, suited for third-year men, by Professor Humphry, M. W., 12; Practical Anatomy in the Dissecting-room, daily, 9 to 4.—Medicine: Principles and Practice of Medicine, by Professor Paget, M. F., 9; Methods of Physical Diagnosis, by Mr. M'Alister, T. Th. S., 9; Clinical Medicine, by Professor Latham, M. W. F., 10; Clinical Surgery, by Mr. G. E. Wherry, T. Th. S., 10; Practical Midwifery (Gentlemen wishing to attend may apply to Dr. Ingle). Instruction in Practical Surgery (continued), by Mr. Wherry, 1.

Easter Term, 1883.—Chemistry and Physics: Elementary Course, by a Demonstrator of Chemistry, M. W. F., 12; General Course (continued), by Mr. Main (St. John's College), T. Th. S., 11; Non-Metals (continued) and Organic Chemistry (elementary), by Mr. Pattison Muir (Caius College), M. W. F., 10; General Principles (continued) and Organic Chemistry (advanced), by Mr. Muir, T. Th. S., 10; Heat, by Mr. Trotter (Trinity College), M. W. F., 10; Elementary Physics, by Mr. Glazebrook (Trinity College), M. W. F., 9; Practical Chemistry, (University Chemical Laboratory), daily, 10 to 6; do. (St. John's College Laboratory), daily, do. (Caius College Laboratory), daily, 10 to 4; do. (Sidney College Laboratory), daily; Practical Physics (Cavendish Laboratory), daily, 10 to 5; Demonstrations in Optics and Acoustics (Cavendish Laboratory), T. Th. S., 10 to 12; Demonstrations in Electricity (elementary) (Cavendish Laboratory), M. W. F., 10.30 to 12.30.—Botany: Morphology (chiefly Phanerogamic and Systematic), by Professor Babington, M. T. Th. F., 1; Morphology (chiefly Cryptogamic), with Practical Work, by Mr. Vines (Christ's College), M. W. F., 12; Elementary Course (continued) by Mr. Vines (New Museums), T. Th. S., 10; Examination Class in Elementary Botany, by Mr. Hicks (Sidney), M. F., 11.—Anatomy and Physiology: Advanced Course, by the Demonstrator of Comparative Anatomy, M. W. F., 10; Embryology of Birds and Mammals, with Practical Work, T. Th. S., 10; Elementary Biology, by the Trinity Prælector (Mr. Michael Foster), T. Th. S., 9; Physiology, by Mr. Hill (Downing College), T. Th. S., 12; Human Anatomy, Demonstrations by the Demonstrator, M. W. F.; Practical Anatomy, in the Dissecting Room.—Medicine: Principles and Practice of Medicine, by Professor Paget, M. F., 9; Clinical Medicine, by Dr. J. B. Bradbury, M. W. F., 10; Clinical Surgery, by Dr. Humphry, T. Th. S., 10; Practical Midwifery (Gentlemen wishing to attend may apply to Dr. Ingle); Instruction in Practical Surgery (continued), by Mr. Wherry, 1;

Long Vacation (July and August) 1883.—Practical Physics, in the Cavendish Laboratory; Practical Chemistry, in the University Laboratory; Course of General Chemistry, by Mr. H. T. H. Fenton; Practical Anatomy; Human Osteology; Practical Histology; Clinical Instruction at the Hospital; Instruction in Surgery, by Professor Humphry; Medical Jurisprudence, by Dr. Anningson; Instruction, and Practical Midwifery, by Dr. Ingle; Instruction in Practical Surgery, by Mr. Wherry.

Medical Students requiring Certificates of attendance in Cambridge on a course of lectures on Chemistry may attend one of the following: Either the General Course of the Professor of Chemistry or the two courses of the Jacksonian Professor in Michaelmas and Lent terms; or Mr. Main's course in Lent and Easter terms; or Mr. Pattison Muir's courses in two terms, or the course of the Demonstrator of Chemistry in Easter term, together with Mr. Main's course on Organic Chemistry in Michaelmas term. Manipulations have to be practised besides, which may be done in any term.

The Laboratories of the University, the Dissecting rooms, and Museums of Anatomy are open daily during the vacations, as well as in the terms. Opportunities for Clinical instruction in Mental Diseases are afforded at the County Asylum, Fulbourn, by Dr. Bacon. Notice will be given of the days and hours. Commencing Students of Medicine must be registered according to the Regulations of the General Council of Medical Education and Registration. Forms for registra-

tion, abstracts of regulations, schedules, and other papers, may be obtained from the attendant at the Anatomical Schools, Pembroke Street.

ASSOCIATION INTELLIGENCE.

COMMITTEE OF COUNCIL:

NOTICE OF QUARTERLY MEETINGS FOR 1882: ELECTION OF MEMBERS.

A MEETING of the Committee of Council will be held on Wednesday, October 18th. Gentlemen desirous of becoming members of the Association must send in their forms of application for election to the General Secretary not later than 21 days before the meeting—viz., 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.

August 31st, 1882.

FRANCIS FOWKE, *General Secretary*.

COMMITTEE OF COUNCIL.

NOTICE OF MEETING.

A MEETING of the Committee of Council will be held in the Council Room, Exeter Hall, Strand, London, on Wednesday, the 18th day of October next, at 2 o'clock in the afternoon.

FRANCIS FOWKE, *General Secretary*.

161A, Strand, London, September 12th, 1882.

COLLECTIVE INVESTIGATION OF DISEASE.

THE following subjects are now under investigation by the Committee: Acute Rheumatism; Pneumonia; Chorea.

Cards to be filled up with particulars of cases, together with memorandum papers explaining the nature and objects of the investigations, have been prepared and distributed through the Secretaries of the Branches or of local committees.

Members who have not received them will be supplied with them on application to the Secretary of their local committee, or to myself.

Cards and memorandum papers for the investigation of Diphtheria are nearly ready, and will shortly be in the hands of the local Secretaries, who will supply them, on application, to any members having cases of this disease under their care, and willing to assist in its investigation.

F. A. MAHOMED, *Secretary to the Committee*.

12, St. Thomas Street, London, S.E.

BRANCH MEETINGS TO BE HELD.

SOUTH MIDLAND BRANCH.—The autumnal meeting will be held at Kettering on Thursday, September 28th. Gentlemen desirous of reading papers, or of showing cases or specimens, are requested to communicate at their earliest convenience with the Honorary Secretary.—G. F. KIRBY SMITH, *Honorary Secretary*, Northampton.—August 29th, 1882.

NORTH OF ENGLAND BRANCH.—The autumnal meeting will be held in Bishop Cosin's Library, Durham, on Wednesday, September 20th, at 2.30 P.M.; Denis Embleton, Esq., M.D., F.R.C.P., President, in the chair. The following papers will be read: 1. Dr. Philipson: On Perihepatitis. 2. Mr. Ellis: On some points in Aural Surgery with reference to a Register of 4,000 Ear Cases. 3. Mr. G. E. Williamson: Note on Retinoscopy. 4. Mr. J. F. Le Page: On Transfusion. Mr. Le Page will show Le Page's Transfusion Apparatus. 5. Dr. Drummond: Note on the Pathology of Pulmonary Phthisis. Dr. Drummond will demonstrate the Bacillus of Tubercle. Service in Durham Cathedral at 4 P.M. Dinner at the Royal County Hotel, at 5 o'clock, 6s. 6d. (exclusive of wine). Gentlemen who intend to be present at the dinner are particularly requested to give notice to the Secretary, on or before Monday, September 18th. The Secretary will be glad to receive any cards of the Collective Investigation Committee already filled up.—DAVID DRUMMOND, M.D., *Honorary Secretary*, 11, Ellison Place, Newcastle-on-Tyne.—September 11th, 1882.

SOUTH-EASTERN BRANCH: EAST AND WEST KENT DISTRICTS.—A conjoint meeting of the above Districts will be held at the Town Hall, Folkestone, under the presidency of R. L. Bowles, M.D., F.R.C.P., on Thursday, September 28th, at 3 P.M. The President kindly invites members to luncheon. Dinner will take place at the West Cliff Hotel, at 5 P.M. Agenda: Collective Investigation Committee: Nomination of District Subcommittees. Dr. Bowles will open a discussion on the Ventilation and Management of Sewers. Mr. Thurston: Case of Atresia Vaginae. Dr. Tyson: Malignant Disease *versus* Syphilis.—A. H. B. HALLOWES, Maidstone, T. WHITEHEAD REID, Canterbury, *Honorary Secretaries*.—September 6th, 1882.

SOUTH-EASTERN BRANCH: EAST SUSSEX DISTRICT.—The next meeting of the above District will take place on Wednesday, September 27th, at the Railway Hotel, East Grinstead, at 4 P.M.; Mr. Wallis of Hartfield in the chair. Dinner at 6; charge 6s., exclusive of wine. The following communications have been promised: 1. The Chairman: Carcinoma of the Kidney in a Child two years old; with preparation and microscopic specimen. 2. Dr. Mackey: Case of Hysteria with very Rapid Breathing. 3. Mr. Collins: Amenorrhœa. 4. Dr. Ranking: The Relations

of Lithæmia to Cardiac Prognosis and Treatment. 5. Mr. Abbott; Antiseptic Atropine and Eserine Solutions. Gentlemen desirous of contributing papers are requested to communicate with the Honorary Secretary.—T. JENNER VERRALL, Honorary Secretary, 95, Western Road, Brighton.—September 5th, 1882.

EAST ANGLIAN BRANCH.—President, W. M. Crowfoot, Esq., M.B.—The autumn meeting will be held at the Assembly Rooms, East Dereham, on Thursday, September 28th, at 1.45 P.M. The following papers have been promised. 1. H. C. Hastings, Esq. (East Dereham): Notes of a Case of Rheumatic Fever, with Observations on the past and present Treatment of the Disease. 2. James Vincent, M.D. (East Dereham): An Account of Three Cases of Total Suppression of Urine. 3. H. Mallins, M.D. (Watton): Notes of a Case of Aphasia with Right Hemiparesis, in a girl aged 12. 4. F. Bateman, M.D. (Norwich): Hystero-Epilepsy. 5. S. H. Burton, Esq. (Norwich): A Case of Scarlatina followed by Septicæmia. 6. Alan Reeve Manby, Esq. (East Dereham): The Curability of Fevers. 7. F. Haward, Esq. (Halesworth): Notes of a Case of Ovariectomy. 8. W. A. Elliston, M.D. (Ipswich): Notes of a case of Excision of the lower four inches of the circumference of Rectum. The medical men of East Dereham and neighbourhood have most hospitably invited the members of the East Anglian Branch to a *déjeuner* at the King's Arms Hotel, at 4.30 P.M.; it is requested that all who intend to accept their invitation will send in their names to Dr. Beverley, 63, St. Giles' Street, Norwich, not later than Tuesday, the 26th instant. Mr. H. B. Vincent, the Medical Officer of Health for Dereham, has kindly offered to show members over the Sewage Farm, the New System of Town Drainage, and the Waterworks. Mr. Vincent will attend at the Local Board Office at 11 A.M. for this purpose. By the kind permission of the Vicar (Rev. B. J. Armstrong), a Recital will be given by the Organist, Mr. Martin, on the New Organ, at the Parish Church of East Dereham, at 12. Members of the medical profession, whether members of the Association or not, are invited to attend the general meeting at 1.45 P.M.—W. A. ELLISTON, M.D., Ipswich; MICHAEL BEVERLEY, M.D., Norwich, Honorary Secretaries.—September 1882.

SOUTH AUSTRALIAN BRANCH: ANNUAL MEETING.

The annual meeting of this Branch was held in the Board-room of the Adelaide Hospital, on June 29th, 1882. Twelve members were present. The retiring President, Mr. C. W. T. CLINDENING, took the chair.

Apologies for non-attendance were received from Dr. W. Gosse and Mr. Way.

A letter was read, dated May 3rd, 1882, from the general secretary (Mr. Francis Fowke, London), congratulating the Branch on its continuing and increasing success, both in point of numbers and usefulness of work.

The annual report of the Council was taken as read, and adopted; as was also the financial statement of the honorary treasurer, Mr. T. W. Corbin.

Address of Retiring President.—Mr. CLINDENING, the retiring president, addressed the meeting on vacating the chair. He said that it became his duty to retire from the honourable position which he had held for the last year, and to initiate his successor, the Vice-president, in it; but, before doing so, he would return to all his most grateful acknowledgments for the unanimous support and kind consideration he had received on all occasions during his tenure of office. It had been one of high honour, but it had been also one of great usefulness and advantage to himself, inasmuch as it had brought him into conclave and friendship with the best, most eminent, and useful of the profession in that colony. He thanked the Council for their co-operation and business-like support, without which it would have been impossible to have carried on the affairs of the Branch with success. He was glad, too, that he left the Branch to his successor in a highly prosperous condition, having increased in numbers, in importance, and in public estimation; and he was sure nothing would be left undone by his successor for the advancement of its good and welfare. Many circumstances had occurred during the past year of great moment to the profession at large, principally embodied in the report, but notably (which were not referred to) the insurance conspiracy cases. There was a public outcry that the profession was disgraced and dishonoured; but the President denied most emphatically this assertion, and said that, instead of our noble profession being disgraced, dishonoured, and dragged through the mud, it withstood the shock with which it was threatened through the misconduct of two of its members. Those men, he said, disgraced themselves, and not the profession, and were reaping the penalty of their defection. It was well, not only for the profession, but also for the public at large, that these conspiracies transpired, for there was no knowing what magnitude they would have attained, or what damage and injury they might have entailed. Mr. Clindening concluded by again thanking the members, and introducing his successor.

Mr. ASTLES then took the chair, expressing the pleasure it gave him to do so, and the hope that during his tenure of office the Branch would continue to prosper as it had done in the past.

Council.—The election for the Council then took place, as follows: *Vice-President*, W. Gardner, M.D.; *Treasurer*, T. W. Corbin, Esq.; *Honorary Secretary*, W. L. Cleland, M.B.; *Members of Council*, W. T. Clindening, Esq., E. Gosse, M.D., E. C. Stirling, M.D.

New Members.—The following gentlemen having made written applications for the membership of the British Medical Association and South Australian Branch, and having been duly certified as eligible, were elected—viz.: Drs. Addison and Seabrook, and Messrs. Ellison, Jay, Mann, Nickoll, Thompson, and Welchman.

Changes in Rules.—Propositions were put and carried, to the effect that members might vote for the election of officers at the annual meetings *in absentia*; and that vacancies occurring in the Council, between one annual meeting and another, should be filled up at a monthly meeting.

It was also resolved to place a short statement of how the Branch had been started at the commencement of the printed *Proceedings* for the past year, and to continue the practice in future.

CORRESPONDENCE.

DR. MILNER FOTHERGILL AND THE PROPOSED ALTERATION OF BY-LAW 12.

SIR,—In his letter, published in your issue of to-day, Dr. Milner Fothergill says, "I appeared at the general meeting on Wednesday morning to tender an explanation" (of his absence on the previous evening) "which was cut short summarily (see BRITISH MEDICAL JOURNAL, August 12th, page 278), and which I now tender to the Association....." On turning to the page referred to, Dr. Fothergill and your readers will find this passage: "The President said Dr. Fothergill could be heard, if he had any explanation to offer in regard of his absence on Tuesday, but he could not bring forward his motion." Why, then, may I ask, did not Dr. Fothergill give his explanation to me, and to the meeting, of his absence when his motion was duly called on the previous evening? Had he done so, it would have been for the meeting to decide whether such explanation was or was not sufficient, and to take action accordingly. Instead of that, Dr. Fothergill resumed his seat without a word of remonstrance. It is not, therefore, fair to me to say that "his explanation was cut short summarily." Dr. Fothergill's motion had been set down in the agenda for the Tuesday evening, with the excellent motive of getting rid of all unpleasant controversial matters before the jubilee day, Wednesday—a day which we in Worcester had determined should be as free from strife as we could make it.—Faithfully yours,

W. STRANGE, M.D., President of the Association.
Worcester, September 2nd.

THE PROPOSED AMENDMENT OF BY-LAW 12.

SIR,—It is with much reluctance I again appear in your correspondence columns, but the concluding sentence of the comments by the President of Council on my letter in the JOURNAL of the 2nd instant leaves me no alternative. He says, "It was not possible to communicate with him before the meeting on Tuesday, as his address at Worcester was not known." Now, it was no fault of mine if the Council did not know where to address a communication to me, as I wrote below my signature, "15 Severn Terrace, Worcester," as legibly as I knew how; and, on my arrival there, my first inquiry was, had any note been received for me?

Whether my "corrections" were but "arguments," especially as to the question of "precedent," is a matter on which the Association must judge betwixt him and me. I desire no disrespect to the first official of our Association; but there is one's duty to oneself as well as our duty to our neighbour; and on such a matter it is most desirable to have all clear.—I am, sir, etc.,

J. MILNER FOTHERGILL,
September 5th, 1882.

NOTIFICATION OF INFECTIOUS DISEASES.

SIR,—In my letter which appeared in the JOURNAL of August 26th, I omitted to refer to the Infectious Diseases Notification (Ireland) Bill. The ideal scheme which I believed to be in the mind of the proposer of the resolution finally adopted at the Worcester meeting, is not identical with that which had already assumed definite shape in the Bill referred to; it, however, so closely resembles it, that I ought to have mentioned the fact; and I am obliged to Dr. Jacob of Dublin for supplying the omission. The resemblance consists in this, that, under both schemes, the physician is under no legal obligation to help in any way towards the notification of cases of infectious disease which come under his treatment—not even by the handing of a formal certificate of the nature of the disease, etc., to the householder, or informing him of his responsibility to notify. The difference consists in this, that, according to the proposed scheme of the Irish Medical Association, there would be an extra difficulty placed in the way of the medical man who

being 139 more than in 1879, and 25 more than in 1880. The chief fatality was caused by measles which occurred epidemically in the last quarter of the year, when the disease prevailed to an enormous extent, causing no less than 111 deaths—more than 50 per cent. of the total zymotic mortality. In some parts of the town where the epidemic was most severely felt, Mr. Cogan secured the closing of several schools and is able to assert confidently that this course was unmistakably followed by a speedy abatement of the epidemic. The fatal cases were chiefly among children from one to five years of age, 81 such deaths being registered, while 16 were infants under one year of age. The health-officer adds that so extensive was the prevalence of the disease that, excepting the closure of the day-schools, all precautionary measures for mitigating its spread were impracticable. Scarlet fever was also present in the town; and 36 deaths were attributed to this cause, being the largest mortality experienced since 1877. Whooping-cough caused 32 deaths; but only 20 deaths happened from diarrhoea, against 147 in the previous year—a result which is attributed to the low summer temperature of 1881. Mr. Cogan has some observations on the subject of the compulsory notification of infectious disease, the successful working of which would, he thinks, be sensibly frustrated unless at the same time provision were made for the hospital treatment of infectious cases.

HOVE.—During the first quarter of the present year, four deaths were registered from small-pox here; but Dr. Kebbrell is able to state that there is not now a single case of that disease in the town. The epidemic of small-pox, which has been prevalent in a part of the district since August, has been almost entirely confined to the labouring classes in the parts of the town where it first appeared; and there has not been a single death from the disease amongst the middle or upper classes, either in the neighbourhood or elsewhere. This the health-officer attributes to the care taken by the latter in efficiently protecting themselves by vaccination and re-vaccination. If, he adds, the same care could be bestowed upon the working classes, amongst whom, there is every reason to believe, vaccination is very indifferently performed, while many object to it altogether, and who, as a rule, cannot be persuaded to take any precautions to keep out of the way of infection, there is little doubt that small-pox would, before long, become a rare disease, and might perhaps be eventually eradicated altogether. The death-rate for last quarter was, unfortunately, the highest (19.0 per 1,000) yet recorded. The total deaths registered were 105; and of these, 21 were from zymotic diseases, whooping-cough accounting for 13, small-pox for 4, scarlet fever for 3, and diphtheria for one. During the quarter, a house-to-house inspection was made of some parts of the town—a practice that has been adopted in other health-resorts with excellent results.

OBITUARY.

SIR JAMES ALDERSON, M.D., D.C.L., F.R.S.

AT the moment of going to press, we hear with regret of the death of the veteran physician, and ex-President of the Royal College of Physicians of London, Sir James Alderson, D.C.L., F.R.S. Sir James Alderson had attained a very advanced age, being more than octogenarian, and had for some years retired from active professional life. He filled the office of President of the College from 1867 to 1870, being knighted in 1869, and receiving the honorary degree of D.C.L. from the University of Oxford in 1870. The deceased physician was the son of Dr. John Alderson of Hull; he was Sixth Wrangler at Cambridge in 1822, and became Fellow of Pembroke College. On the opening of St. Mary's Hospital, Paddington, he was elected senior physician, and held that office for twenty years. Sir James Alderson was a man of cultivated mind, kindly disposition, and correct and courteous deportment. He was spare and erect in figure, and reserved in manner, conservative in his opinions, little disposed to scientific novelties or collegiate reforms; acute in thought, simple in diction, trustworthy in diagnosis, attentive to detail in treatment, and with a full sense of professional and personal responsibility. The honour of his calling and his college were safe in his hands; and with him passes away one of the earlier type of physicians whose sense of dignity, academic propriety, and culture were among their most marked and agreeable characteristics.

THE Very Rev. Dr. Egan has been appointed Rector of the Catholic University, and a Fellow of the Royal University of Ireland.

MEDICAL NEWS.

APOTHECARIES' HALL.—The following gentlemen passed their Examination in the Science and Practice of Medicine, and received certificates to practise, on Thursday, September 7th, 1882.

Church, William, Hereford Road, Bayswater.
Hull, Walter, Acton, Middlesex.
Larder, Herbert, Denmark Hill, Wimbledon.

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

Bullock, Thomas Warren, St. Thomas's Hospital.
Jefferies, Horace, Queen's College, Birmingham.
Plummer, Henry George, Guy's Hospital.
Mander, Percy Robert, Westminster Hospital.

MEDICAL VACANCIES.

The following vacancies are announced:—

ANDERSON'S COLLEGE DISPENSARY.—Physician. Applications to D. Wilson, Honorary Secretary.

ANDERSON'S COLLEGE DISPENSARY.—Surgeon. Applications to D. Wilson, Honorary Secretary.

AYR NEW HOSPITAL AND DISPENSARY.—House-Surgeon to the Hospital and Surgeon to the Dispensary. Salary, £50 per annum. Applications to R. M'Callum, Town Chamberlain, Ayr, by September 22nd.

BALLATER AND SURROUNDING DISTRICT.—Medical Practitioner. Salary, £35 per annum. Applications, by October 1st, to J. Rinch, Inspector of Poor.

DENTAL HOSPITAL OF LONDON MEDICAL SCHOOL, Leicester Square, W.C.—Demonstrator of Contour and Cohesive Fillings. Salary, £50 per annum. Applications by September 29th.

DERBY AMALGAMATED FRIENDLY SOCIETIES' MEDICAL ASSOCIATION.—Assistant-Surgeon. Salary, £170 per annum. Applications by September 27th.

DOWNPATRICK UNION.—Medical Officer for Portaferry Dispensary District. Salary, £100 per annum, with £15 yearly as Medical Officer of Health, registration, and vaccination fees. Election on September 20th.

DURSLEY UNION.—Medical Officer. Salary, £80 per annum. Applications by September 27th.

GENERAL HOSPITAL FOR SICK CHILDREN, Pendlebury, Manchester.—Junior Resident Medical Officer. Salary, £80 per annum. Applications by September 27th.

GLENLIES UNION, Dungloe Dispensary District.—Medical Officer. Salary, £110 per annum, and £15 as Medical Officer of Health. Applications by September 26th.

GREAT NORTHERN HOSPITAL, Caledonian Road, N.—Dispenser. Salary, £100 per annum. Applications by September 30th.

HAMPSTEAD PROVIDENT DISPENSARY.—Medical Officer. Applications, by September 23rd, to the Secretary, 23, High Street, Hampstead.

JOINT COUNTIES' ASYLUM, Carmarthen.—Junior Assistant Medical Officer. Salary, £100 per annum. Applications by September 30th.

LISMORE UNION.—Medical Officer for Workhouse and Fever Hospital. Salary, £100 per annum. Applications by October 4th.

MACCLESFIELD GENERAL INFIRMARY.—Junior House-Surgeon. Salary, £70 per annum. Applications to the Chairman, House Committee, by September 23rd.

MANCHESTER ROYAL INFIRMARY.—Resident Surgical Officer. Salary, £150 per annum. Applications by September 22nd.

MIDDLESEX COUNTY LUNATIC ASYLUM, Colney Hatch.—Assistant Medical Officer. Salary, £150 per annum. Applications by September 26th.

PARISHES OF NORTHMAVINE AND DELTING, Shetland.—Medical Officer. Salary, £60 per annum. Applications to T. M. Adie, Esq., Voc, Shetland, by September 30th.

QUEEN'S COLLEGE, CORK.—Chair of Natural History. Candidates to forward testimonials, on or before September 20th, to the Under Secretary, Dublin Castle.

RADCLIFFE INFIRMARY, Oxford.—Resident Medical Officer. Salary, £100 per annum. Applications by September 30th.

ROYAL INFIRMARY OF EDINBURGH.—Pathologist. Applications to Mr. Peter Bell by September 30th.

SALFORD UNION.—Assistant Medical Officer and Dispenser. Salary, £140 per annum. Applications by September 18th.

ST. GEORGE'S, HANOVER SQUARE, PROVIDENT DISPENSARY, 59, Mount Street.—Resident Medical Officer. Salary and allowance for last year, £214 4s. 3d. Applications to Mr. G. H. Leach, Secretary, by September 30th.

UNIVERSITY OF ABERDEEN.—Six Examiners in Medicine. Salary, £30 per annum. Applications to Robert Walker, Secretary.

WESTON-SUPER-MARE HOSPITAL AND DISPENSARY.—House-Surgeon. Salary, £70 per annum. Applications by September 20th.

WINCHCOMB UNION.—Medical Officer for the Vale District. Salary, £65 per annum. Applications by September 22nd.

WORCESTER COUNTY AND CITY LUNATIC ASYLUM.—Second Assistant Medical Officer. Salary, £700 per annum. Applications by September 22nd.

MEDICAL APPOINTMENTS.

BARNOW, A. Boyce, M.B., F.R.C.S., appointed Assistant-Surgeon to the West London Hospital.

BUSH, J. Paul, M.R.C.S.Eng., L.S.A., appointed House-Physician to the Bristol Royal Infirmary, *vice* C. S. Watson, M.B., resigned.

COBBOLD, C. S. W., M.D., Assistant Medical Officer Colney Hatch Asylum, appointed Medical Superintendent of Earlswood Asylum, *vice* G. W. Graham, M.D., appointed Commissioner in Lunacy for New Zealand.

COLLINS, G. W., M.R.C.S., appointed Resident Medical Officer to the Wednesday Small-pox Hospital.

COOK, J. N., M.R.C.P., appointed House-Surgeon to the Great Northern Hospital, Caledonian Road, N.

COURTENAY, John Hoysted, M.K.Q.C.P.I., L.R.C.P.Lond., appointed Honorary Consulting Surgeon to the Echuca District Hospital, Echuca, Victoria, Australia.

CRADDOCK, Frederick Hurst, B.A., M.R.C.S., L.S.A., Senior Assistant Medical Officer of the Worcester County and City Asylum, appointed Medical Superintendent of the Gloucester County Asylum.

HENDLEY, Harold, M.R.C.S.Eng., appointed House-Surgeon of the West London Hospital, *vice* Richard W. Lloyd, M.R.C.S.Eng., resigned.

HOPKINS, John Walter, M.R.C.S., appointed House-Surgeon and Secretary to the Royal Isle of Wight Infirmary, Ryde, *vice* T. M. Kendall, L.R.C.S., L.R.C.P.Ed., resigned.

THOMPSON, J., M.D., appointed Honorary Treasurer to the Irish Graduates' Association.

THOMPSON, J., M.D., appointed Surgeon to the Surgical Appliance Society, Finsbury Circus.

SMALLMAN, B. F., L.K.Q.C.P.I., appointed Medical Officer to the Boston Union, *vice* J. A. Storey, L.R.C.P., resigned.

SWABY-SMITH, C., M.R.C.P., appointed Honorary Surgeon to the West Metropolitan Fire Brigade.

WEST, John A., M.R.C.S., appointed Clinical Assistant and Registrar to the North-Eastern Hospital for Children, Hackney Road.

HEALTH OF FOREIGN CITIES.—According to a table in the Registrar-General's return for the week ending August 26th, the annual death-rate averaged 24.5 per 1000 in the three principal Indian cities, and was equal to 21.4 in Calcutta, 24.6 in Bombay, and 27.4 in Madras. Cholera caused 19 deaths in Calcutta, and 8 fatal cases of small-pox occurred in Madras. According to the most recent weekly returns, the average annual death-rate per 1000 persons, estimated to be living in twenty-three of the largest European cities, was equal to 28.0 per 1000; this rate showed the usual marked excess upon the average rate in twenty-eight of the largest English towns, which did not exceed 22.7 per 1000 last week, or 5.3 below the mean rate in the European cities. The rate in St. Petersburg was equal to 45.8, and showed a slight increase upon the rate in the previous week; diarrhoeal diseases caused 191, or nearly a third of the deaths from all causes within the city. In three other Northern cities—Copenhagen, Stockholm, and Christiania—the death-rate averaged 27.6; the excess of mortality in these towns was mainly due to the fatality of diarrhoeal diseases in Copenhagen and Stockholm, and of whooping-cough in Christiania. The Paris death-rate was 24.0, and slightly lower than in the previous week; the fatal cases of typhoid fever were 74, being 32 less than the number in the previous week, and 28 deaths from diphtheria were also reported. The 196 deaths in Brussels, which included 56 from diarrhoeal diseases, were equal to a rate of 25.4. The death-rate in Geneva, however, did not exceed 18.8. In the three principal Dutch cities—Amsterdam, Rotterdam, and the Hague—the mean death-rate did not exceed 22.2; the highest rate was 23.5 in Amsterdam, where 4 fatal cases of whooping-cough and 2 of "fever" were recorded. The Registrar-General's table includes nine German and Austrian cities, in which the death-rate averaged 28.9 per 1000, and ranged from 22.8 in Vienna and 24.1 in Hamburg, to 33.4 in Berlin and 35.3 in Breslau. Diarrhoeal diseases showed especial fatality in Berlin, Breslau, and Munich; and small-pox caused 11 deaths in Vienna and 6 in Buda-Pesth. In four of the principal Italian cities, the death-rate averaged 27.9; the lowest rate was 23.4 in Turin, and the highest 34.0 in Naples. Fevers caused 20 deaths in Rome, and scarlet fever 15 in Naples. In four of the largest American cities, the average death-rate was no less than 43.1; the rate was 26.7 in Baltimore, 31.3 in Philadelphia, 52.1 in Brooklyn, and 52.5 in New York. Excessive diarrhoeal fatality was the main cause of the high death-rates in these American cities. Typhoid fever caused 10 deaths in Philadelphia. The return for the week ending September 2nd shows that the annual death-rate in the three principal Indian cities averaged 27.8 per 1000; it was 25.6 in Bombay, 26.0 in Calcutta, and 33.7 in Madras. Cholera caused 8 deaths in Calcutta, and small-pox 11 in Madras. According to the most recent weekly returns, the average annual death-rate, per 1000 persons estimated to be living in twenty-three of the largest European cities, was 27.6 per 1000; this rate showed the usual marked excess upon the average rates in twenty-eight of the largest English towns, which during last week did not exceed 22.7 per 1000. The rate in St. Petersburg was 42.1, but showed a further decline from still higher rates in recent weeks; no fewer than 188, or more than a third of the deaths from all causes, resulted from diarrhoeal diseases. In three other Northern cities—Copenhagen, Stockholm, and

Christiania—the death-rate averaged 33.6, showing a further increase upon the rates in recent weeks, mainly owing to the fatality of diarrhoeal diseases; scarlet fever caused 7 deaths in Stockholm and 5 in Copenhagen. The Paris death-rate declined to 23.4, although the 1006 deaths included 165 from infantile diarrhoea, 82 from typhoid fever, and 26 from diphtheria and croup. The 179 deaths in Brussels, which included 40 fatal cases of diarrhoeal diseases and 3 of small-pox, were equal to a rate of 25.2. The death-rate in Geneva was 30.3, but no exceptional zymotic fatality is reported. In the three principal Dutch cities—Amsterdam, Rotterdam, and the Hague—the mean death-rate did not exceed 20.3, the highest rate being 23.8 in Rotterdam. The Registrar-General's table includes nine German and Austrian cities, in which the death-rate averaged 28.6, and ranged from 22.5 and 24.0 in Vienna and Munich, to 31.0 in Trieste and 40.2 in Breslau. Diarrhoeal diseases showed considerable fatality in all these German cities, and small-pox caused 12 deaths in Vienna. In four of the principal Italian cities, the death-rate averaged 27.5; it was 22.7 both in Rome and Turin, 31.2 in Naples, and 34.3 in Venice. Scarlet fever caused 8 deaths in Naples, and typhoid fever 4 in Turin; while the high rate in Venice was mainly due to the fatality of diarrhoeal diseases. In four of the largest American cities, the death-rate averaged 32.8, and ranged from 23.5 in Philadelphia to 40.5 in New York. Diarrhoeal diseases showed fatal prevalence in each of these American cities; typhoid fever caused 11 deaths in Baltimore and 10 in Philadelphia, while 6 fatal cases of small-pox were recorded in Baltimore.—For the week ending September 9th, in Calcutta and Bombay the annual death-rate was equal to 23.8 and 25.0 per 1000 respectively; 81 deaths were referred to "fevers" in Bombay, and 66 in Calcutta, where also 7 fatal cases of cholera were returned. According to the most recent weekly returns, the average annual death-rate in twenty-three European cities was equal to 26.2 per 1000 of their aggregate population, showing the usual excess upon the average rate in twenty-eight of the largest English towns, which during last week was 19.9. The rate in St. Petersburg was 46.7, against 45.0 and 42.1 in the two preceding weeks; 200 of the 600 deaths during the week were referred to diarrhoeal diseases, equal to a rate of 15.6 per 1000, whereas the death-rate from these diseases in London last week did not exceed 1.3 per 1000. In three other northern cities—Copenhagen, Stockholm, and Christiania—the death-rate averaged 28.0, the highest rate being 30.9 in Stockholm, where 55 deaths resulted from diarrhoea. The Paris death-rate was equal to 21.7, showing a further decline from the rates in recent weeks; 63 deaths, however, were referred to typhoid fever, equal to an annual rate of 1.47 per 1000, whereas in London the rate of mortality from this disease was last week only 0.15 per 1000. The 193 deaths in Brussels were equal to a rate of 24.6 per 1000, and included 42 from diarrhoeal diseases. The rate in Geneva was as low as 14.3, and showed a considerable decline from those in recent weeks. In the three principal Dutch cities—Amsterdam, Rotterdam, and the Hague—the death-rates ranged from 16.8 in Rotterdam to 21.9 both in Amsterdam and the Hague; typhoid fever caused 4 deaths in Amsterdam, and a fatal case of small-pox was returned in Rotterdam. The Registrar-General's table includes nine German and Austrian cities, in which the death-rate averaged 26.7, and ranged from 20.6 and 22.9 in Dresden and Hamburg, to 32.2 in Breslau and 33.6 in Trieste. Diarrhoeal diseases caused 166 deaths in Berlin, and showed a general excess in the other German cities; 11 deaths were referred to small-pox in Vienna and 10 in Buda-Pesth. The death-rate averaged 24.8 in the four principal Italian cities, and ranged from 19.3 in Rome to 30.1 in Naples; scarlet fever caused 11 deaths in Naples, and 5 deaths were referred to typhoid fever in Turin and 4 in Venice. In four of the largest American cities the death-rate averaged 30.6; it was equal to 25.4 in Philadelphia, 28.7 in Baltimore, 29.9 in Brooklyn, and 38.7 in New York. Excessive fatality of diarrhoeal diseases caused the comparatively high death-rate in each of these cities, 281 deaths being referred to them in New York and 146 in Brooklyn. Typhoid fever caused 7 deaths both in Philadelphia and Baltimore.

PRESENTATION.—Dr. John W. Cook, being about to leave Manningtree, has been presented with a silver inkstand, a purse of gold, and a list of the subscribers, handsomely illuminated, as a token of esteem, and of regret at losing his valuable services.

THE Sisters of Charity at Aspinwall, in consequence of the medical staff, the dispensers, and male nurses being down with fever, have had to manage the whole establishment of the Canal Company's Hospital in that town.

DR. WILLIAM NASSAU IRWIN died at his residence in Monaghan last week, at an advanced age. The funeral was a very large one, and the coffin was carried to the hearse by a number of the staff of the Monaghan Regiment, to which the deceased had been so long attached.

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., 1; 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., 1; 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, 1.45; Obstetric, Tu. F., 9.30; o.p., Tu. F., 2; Eye, Tu. F., 9.15; Ear, M. Th., 2; Skin, Tu. Th., 1.30; Throat, M. Th., 1.45; 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. T., 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., 3; Eye, M. Th., 2.30; Ear, Tu. F., 9; Skin, Th., 1; Dental, W. S., 9.15.

LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

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

AUTHORS desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL, are requested to communicate beforehand with the Manager, 161A, Strand, W.C.

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

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

WE CANNOT UNDERTAKE TO RETURN MANUSCRIPTS NOT USED.

ANECDOTES OF THE BRITISH MEDICAL ASSOCIATION.

SIR,—Will you allow me to indicate to your correspondent "T. L.", in the JOURNAL for August 26th, the existence of some doubt regarding the originality of the *bon mot* attributed by Mr. J. Noake to the late Dr. Malden of Worcester, who, at the Bath dinner in 1838—when champagne-corks were making a great noise—is reported to have said to a gentleman across the table, "Dr. Macartney, I drink your good health, and congratulate you on coming all the way from Ireland to see so many beautiful 'Drawings of Cork'."

It would appear that the reference to the "Drawings" is merely an alteration of the witty repartee made long before by the celebrated comedian Foote.

The late Mark Lemon, *Anecdotes and Sayings* (Macmillan, 1864), relates that the "English Aristophanes", after one of his trips to the sister kingdom, and praising the hospitality received there, was asked by a gentleman if he had ever been at Cork, and replied: "No, sir; but I have seen many 'Drawings' of it."

Perhaps the Dr. Macartney alluded to may have been the well known Professor of Trinity College, Dublin, author of the *Treatise on Inflammation*.—I am, sir, yours truly, A MEMBER.

EARTH-CLOSETS.

SIR,—In reply to the inquiry of "Medical Officer of Health" as to construction of earth-closets, allow me to state that a little pamphlet (price sixpence) has been published by Mr. Leonard Armstrong, Medical Officer of Health for Newton Abbot, *On the Advantages and Arrangement of Dry Ash and Earth-Closets in Country Districts*, in which the principles that should regulate all dry systems, and various plans of applying these principles, are shortly pointed out and explained. This pamphlet would probably supply your correspondent with the directions he requires.—Yours, etc., M.B.

THE DEATH-RATE OF EDINBURGH.

SIR,—In the JOURNAL of September 2nd, there was a letter from Dr. Carter of Liverpool, requiring attention on my part, as I have no doubt the matter he refers to was sent by me. My authority for the statement in the JOURNAL of January 7th, 1882, was the *Scotsman* of Monday, January 2nd, 1882, in which it was stated that the death-rate per 1,000 of the population of Edinburgh for 1881 was 20.06, and the number of deaths 4,581. A tabular statement regarding the previous five years was also given in the same paragraph.

Year.	Deaths.	Rate per 1,000 of the population.
1880	4,694	21.05
1879	4,195	19.06
1878	4,676	21.53
1877	4,442	20.86
1876	4,149	19.51

This statement, publicly circulated, was unchallenged, as was also the part of it which appeared in the JOURNAL until Dr. Carter directed attention to it. Probably it was unobserved by Dr. Littlejohn; but that gentleman has it in his power to furnish the official return, and, by so doing, not only to settle the question in a satisfactory manner, but possibly enable me to discover the cause of the discrepancy between Dr. Littlejohn's and the *Scotsman's* statements regarding the mortalities.—I am, etc., YOUR EDINBURGH CORRESPONDENT.

SUGGESTION FOR A SICK FUND.

SIR,—I have read with pleasure the two admirable letters in your JOURNAL from Messrs. Boys and Measures respecting the establishment of a sick fund. I have long thought that there should be some society of this kind amongst the middle classes. There are a host of us hard working individuals, who would hail with delight a sick club or society of this kind. There are the Oddfellows' and Foresters' clubs for the working classes; why should there not be a similar one for us hard-worked practitioners? I have suggested the scheme to several insurance companies, and they have one and all declined to take the matter up, and said it would not pay; but I am convinced that, if properly managed on good sound principles, it would not fail to pay.

If the British Medical Association would start a scheme of this sort, I am sure it would be supported by a large number of the medical profession. This society should be for sickness only, as insurance against accident is well provided for by the several accidental insurance companies now existing. Every member joining should pay an entrance fee of two guineas. This would give the society a fund to start with. Then the annual premium should be regulated according to the weekly allowance when ill. I would make one more suggestion, which is this. The amount of annual premium should be also governed by the age of a member at the time of joining the society; for it would be very unfair for a member joining at the age of thirty to pay as much as a member joining at fifty years of age.

I hope the British Medical Association will take the matter up, and start a benefit sick club for us; but, should they decline to do so, I should be happy to co-operate with any of my medical fraternity with a view of establishing a society for the objects above named.—I remain, sir, yours faithfully, EDWIN CHILD.

Vernham, New Malden, September 4th, 1882.

PEDICULI CAPITIS.

SIR,—I should feel much obliged if any of your correspondents would kindly tell me what form of application they have found most cleanly and most efficacious for the destruction of pediculi capitis and their eggs in a case where they are due to accidental contact with an unsuspected source, and in which scrupulous cleanliness is carried out. It is undesirable to cut the hair, which is long and thick, if possible.—I am, etc., INSECTICIDE.

INJUDICIOUS PRAISE.

It is much to be regretted that the friends of medical men will sometimes, with the best intentions, send to the local papers such injudicious remarks as the following, which appears in the *Derbyshire Times* of September 2nd. "Some years ago, the local Oddfellows' lodges banded themselves together at Chesterfield, and established the Chesterfield Medical Aid Association, a society which retained the services of a duly qualified medical man, and thus secured to the members medical assistance at economical rates. I regret, for the sake of the poorer classes, to hear that the Association is to be wound up at the end of the present quarter from lack of funds, a collapse probably due to want of experience in the management. This will be unwelcome intelligence to many among the working classes; but fortunately the medical officer hitherto—Mr. E. Madeley, M.R.C.S. Eng., L.S.A. Lond.—does not intend to remove, but remains in Chesterfield; and no doubt the societies will be able to make individual arrangements in lieu of the united action which has now come to an end. The Association has been valued hitherto by a considerable section of the working classes, who will be glad to hear that, although the institution cannot be kept up, their medical adviser will still be accessible."

laundryman) was going his rounds one morning from house to house—which were few and far between, with tracts of uncultivated land intervening. As he trudged along, he spied a caly anteater, manis, or pangolin, and ran it down. The animal, intercepted from its burrow, rolled itself up into a ball, as is its wont when irritated or overtaken—an action not unlike that of the common hedgehog when placed under similar circumstances. Pleased with the capture (for the flesh is esteemed a delicacy in that part of the country), he laid it, coiled as it was, on the bundle of soiled clothes he was carrying strapped across his shoulders. He had not proceeded far ere the manis unwound itself, and the man, apprehensive of losing his prize, seized it. Unfortunately for him, it once more rolled itself up, but this time circling his neck. To anyone acquainted with the habits of these creatures, their great muscular strength, and the almost utter impossibility of uncoiling them by sheer force, the event must be obvious: being hastened, no doubt, by the instinctive efforts of the asphyxiated man to free himself.

Dr. Ogston, Professor of Medical Jurisprudence and Medical Logic, Aberdeen University, considers this a singular addition to the few known cases of accidental strangulation.—I am, sir, yours faithfully, PHILIP S. BRITO, M.B., M.C.
64, Dee Street, Aberdeen.

EXTERNAL USE OF IODINE IN ERYSIPELAS.

SIR,—In the JOURNAL for August 26th, p. 398, are three subjects in which a simple reference to myself would have saved both you and the writers trouble. Regarding the use of iodine as an external application in erysipelas, Section 43: 5 shows that it was highly spoken of in 1852. The "Medical Officer of Health" will find most, if not all, he desires to know on reference to Section 209: 3; while "Hospital Surgeon" will obtain a fund of information regarding the trephine and its antiquity in Section 1684: 1-3.—Yours faithfully, THE MEDICAL DIGEST.

SIR,—I am somewhat surprised at the idea of the local application of tincture of iodine in cases of either idiopathic or traumatic erysipelas being considered a novelty. I used it in 1857, and in numerous cases when with the 3rd Dragoon Guards; also in Africa, India, England, and Ireland, and invariably with success. —Truly yours,
R. M. ALLEN, F.R.C.S., Deputy Surgeon-General.
Welbourn Hall, Grantham, August 30th, 1882.

SIR,—When I wrote my letter of July 22nd, I was fully under the impression that I had made a valuable discovery in the treatment of erysipelas. I did not write it without first consulting several of my medical friends, and every author I could lay my hands upon; none of my friends had ever heard of the iodine treatment, and in only two works was it named. Mr. Holmes, in his work, says it was to be used diluted with water, but with doubtful effect. Bryant simply says that "Mr. Norris thought highly of the free application of the tincture of iodine." This is all. When and where Mr. Norris made his remarks, I was some time in finding out; at last, through Braithwaite's *Retrospect* (vol. xxvii, page 194, 1853), I found an epitome of Mr. Norris's paper, which was published in the *Medical Times and Gazette*, vol. v for 1852, page 590. In this paper, Mr. Norris fully describes the wonderful action of iodine, not only in erysipelas, but also in puerperal peritonitis. I was very glad to see that Mr. Norris had written the note which appeared in your number for September 2nd. Now, as the use of iodine in erysipelas has been lost sight of by the older members, and is not known to the juniors, if Mr. Norris would reprint his paper, giving the results of his thirty years' experience of its use and of its antiseptic powers, etc., it would be a valuable contribution, though dispelling my dream of being the originator of an useful remedy.

I must take this opportunity of thanking Dr. Hutchinson of Scarborough for his courteous letter of the 26th ultimo.—I am, sir, yours truly, C. N. SPINKS.
Warrington, September 5th, 1882.

SYPHILIS: AN OPINION WANTED.

SIR,—I was consulted, a few days ago, by a gentleman, and should be greatly obliged if a more experienced member of our profession than myself would give an opinion on the case.

My patient is twenty-eight years of age, and for two years studied for the medical profession, giving it up after that for family reasons. Whilst attending a London hospital eight years ago, he contracted syphilis. He had a true Hunterian chancre, followed by secondary symptoms. These latter were not severe—a copious rash on the body, a few sores in the mouth and on the tongue, but no sore throat; the hair came out. He never took mercury, and lost all signs of the complaint in eighteen months; and since then has led a fairly steady life.

Three or four months ago, he became engaged to a young lady, and is to be married in the spring of next year. Unfortunately, during the last six weeks, three or four small patches of psoriasis have shown themselves on the inner side of the thigh, elbow, and axilla. I have examined him carefully, and find him a well developed and apparently healthy young man, except for the patches I have mentioned, and a slight enlargement and hardness of the glands in the groin and neck.

The question he asks is this: Are the patches of psoriasis indications that he is still constitutionally syphilitic; in which case, ought he to marry? In my opinion, they are indications of the disease. Such being the case, ought he to undergo a course of mercurial treatment? and, if so, what form of administration is advisable?

If any member experienced in the treatment of syphilis will kindly give an opinion on this case, he will greatly oblige

A JUNIOR MEMBER OF THE PROFESSION AND ASSOCIATION.

A REMARKABLE DOOR-PLATE.

Sir,—I observe in your issue of August 19th, that M. C. H. Dowson, of Kingston Villa, Tyndall's Park, Bristol, has been good enough to address you in reference to me. Surely I ought to feel exceedingly obliged to him for thus affording me so much professional publicity, especially as we reside only about one hundred yards from each other, and are both members "of the Bristol Branch". How much time and trouble he might have saved himself—for he cannot plead the excuse of another "Member of the Bristol Branch", viz., that he has "no personal knowledge of" me—if he had only hit upon the happy idea of either giving me a friendly call, or sending in a private letter; by such means, he could have had the desired information fully a month ago.

I now perceive that, as is *he* rather than my previous assailant, though possibly the two may be in league, if not identical, with each other) who would like to be "enlightened"; but he has somewhat frustrated his object by preferring "to make no comment at present". I fear it might prove to be a tedious undertaking if I were to "endeavour to enlighten him generally", seeing that he is quite unable, so far, either to describe or copy accurately, for both door and freestone angles, engraving and printing, would appear to be equally insurmountable to him.—I am, sir, yours faithfully,

JOHN BROOM, M.D., etc.

St. Paul's Road, Clifton, August 31st, 1882.

MIDWIFERY ENGAGEMENTS

SIR,—Early in the month of May last, a Mrs. X. called and engaged me to attend her in her approaching confinement, which she expected would be about July 4th. In the meantime, my partner attends Mr. X. and his servant, the fees for which were paid. On July 20th. I received the following letter :

(Copy.)—"Sir,—Kindly cross Mrs. X.'s name off your list; and oblige, yours truly, R. X."

Now, neither my partner nor myself can assign any reason or my receiving such a note. The question is, Can I make Mr. X. pay me the midwifery fee, £2 2s., by taking out a summons against him in the court? An answer will oblige, yours truly.

P. S.—I may add that, on receipt of the note from Mr. X., I wrote to him for an explanation, but he has taken no notice of my letter.

DIFFICULT LABOUR.

SIR,—I would venture to suggest that, had Mr. Olpherts made use of the cephalotribe after perforating, instead of the long forceps, in his case reported in the *BRITISH MEDICAL JOURNAL* of August 26th, he would undoubtedly have delivered with less danger and suffering to his patient, and certainly with greater ease and comfort to himself.—I am, sir, yours obediently,

J. FFRENCH BLAKE, M.B., M.A.
1, Prince's Street, S.W., September 2nd, 1882.

ERRATA.

THE following corrections require to be made in the article "Changes in the Medical Schools", at page 495 of last week's number.—In the paragraph on St. Bartholomew's Hospital, at the end, for "Mr. Baker," read "Mr. Bullar".—In the paragraph on Guy's Hospital, line 2, for "Ophthalmic Surgeon," read "Assistant-Surgeon". In line 3, after "Ophthalmic Surgeon," insert, "and has been appointed Consulting Ophthalmic Surgeon". In line 7, for "associated," read "succeeded". In the last line, for "Mr. Jacobson," read "Dr. Hilton Fagge"; and add, "Mr. Symonds gives demonstrations in Morbid Histology in place of Mr. Jacobson".—In the paragraph on the London Hospital, line 1, for "E. W. Mansell Moullin," read "Dr. C. W. Mansell Moullin". In line 3, after "Aveling," insert "The number of surgeons has been increased from four to five by the promotion of Mr. Waren Tay," and, in line 4, after "Aural Surgery," insert "Mr. T. Mark Hovell has been appointed junior Aural Surgeon". At end of paragraph, add "Mr. Rodgers has resigned the lectureship on Toxicology."

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

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BOOKS, ETC., RECEIVED.

A Treatise on the Diagnosis and Treatment of Diseases of the Chest. By William Stokes, M.D. London: New Sydenham Society. 1882.

A Practical Treatise on Electro-Diagnosis in Diseases of the Nervous System. By A. Hughes Bennett. M.D. London: H. K. Lewis. 1882.

St. Thomas's Hospital Reports. Edited by Dr. Robert Cory and Mr. Francis Mason. London: J. and A. Churchill. 1882.

A Critique on the Criticisms of the Simplicity of Life. By Ralph Richardson, M.D. London: H. K. Lewis. 1882.

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