

## PRECAUTIONS AGAINST CHOLERA.

THE Prefect of Police continues to take precautionary measures against cholera, and to actively superintend the organisation under his personal superintendence. He has recently issued a circular calling upon the Mayors of Paris to consult with the medical men of their districts, and conjointly organise medical stations where sufferers from cholera may obtain medical aid at any hour during the day or night. M. Camille has also addressed a circular to the Police Commissioners, directing them to keep the "Warning Service" (*Service d'Avertissement*) in good working order, and to strictly enforce a thorough observance of all necessary sanitary laws and regulations.

A MEDICAL man was ill-treated and wounded by the inhabitants of Porto, a district of Naples, where he went to attend some cholera-patients. A crowd gathered round him, and accused him of being a poisoner.

## ALLEGED CLANDESTINE BURIALS.

It has been discovered at Spezzia that the first cholera corpses were clandestinely buried in gardens, and graves were not dug for them. The last few days there has been an abundant fall of rain, which has partly washed away their slight covering of earth, consequently pestilential effluvia have, it is said, rendered the air impure and spread the epidemic.

ALL merchandise arriving at Madrid from France or Morocco will undergo quarantine on reaching Ceuta and Algeiras.

## THE HEALTH OF MARSEILLES.

At Marseilles the public health is satisfactory; although cholera has not quite disappeared, on the 29th of August the mortality was below the average. The theatres will be opened in a few days, and the public is more occupied with Chinese affairs than with the cholera epidemic.

## INFLUENCE OF SYPHILIS AND MERCURY ON CHOLERA.

M. MARTINEAU has investigated the influence of syphilis and mercurial preparations on cholera. His inquiries lead him to believe that syphilitic patients under mercurial treatment are not exempt from cholera. In 1849 and 1865 the wards of the Lourcine hospital were full, and the mortality from cholera was excessive there. M. Dujardin-Beaumetz says that syphilis has a fatal influence on typhoid fever. The patients from the Lourcine and Midi hospitals, seized with typhoid fever, are sent to the Cochin hospital, where it is the prevalent opinion, that syphilitic patients attacked with typhoid fever have received their death warrant.

## ASSOCIATION INTELLIGENCE.

NOTICE OF QUARTERLY MEETINGS FOR 1884:  
ELECTION OF MEMBERS.

A MEETING of the Council will be held on October 15th, 1884. Gentlemen desirous of becoming members of the Association must send in their forms of application for election to the General Secretary not later than twenty-one days before the meeting, viz., September 25th, 1884, in accordance with the regulation for the election of members passed at the meeting of the Committee of Council of October 12th, 1881.

FRANCIS FOWKE, *General Secretary.*

## COLLECTIVE INVESTIGATION OF DISEASE.

CARDS for recording individual cases of the following diseases have been prepared by the Committee; they may be had on application to the Honorary Secretaries of the Local Committees in each Branch, or on application to the Secretary of the Collective Investigation Committee.

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|----------------------------|--|
| I. Cholera.                | VII. Puerperal Pyrexia.                    |
| III. Acute Rheumatism.     | VIII. Paroxysmal hæmoglobinæmia.           |
| IV. Diphtheria, clinical.  | X. Habits of Aged Persons.                 |
| IVa. Diphtheria, sanitary. | XI. Albuminuria in the Apparently Healthy. |
| V. Syphilis, acquired.     | XII. Sleep-walking.                        |
| Va. " " inherited.         |  |
| VI. Acute Gout.            |  |

An inquiry is now issued concerning the general condition, habits, and circumstances, past and present, and the family history, of persons who have attained or passed the age of 80 years.

The replies to this inquiry will be most valuable when given by a medical man; but the questions have been so arranged, that, with the exception of some on the last page, they may be answered by another person. *Partial information will be gladly received.*

There is also now issued an inquiry as to the occurrence of albuminuria in apparently healthy persons.

The Acute Gout card, which had been found too elaborate, has been made a great deal simpler, and is now re-issued.

Copies of these forms and memoranda are in the hands of all the local secretaries, and will be forwarded to any one who is willing to fill up one or more of the forms, on application by post-card or otherwise to the Secretary of the Collective Investigation Committee, 161A, Strand, London, W.C., to whom all applications and correspondence should be addressed.

July, 1884.

## BRANCH MEETINGS TO BE HELD.

**SOUTH-EASTERN BRANCH: EAST SUSSEX DISTRICT.**—The next meeting of the above district will be held at the Station Hotel, Hayward's Heath, on Wednesday, September 24th. Charge for dinner, 6s., exclusive of wine. Mr. Porter of Lindfield will take the chair. Members desirous of narrating cases or contributing short papers should communicate with the Honorary Secretary, T. JENNER VERRALL, 9, Western Road, Brighton.

**LANCASHIRE AND CHESHIRE BRANCH.**—It is proposed to hold an intermediate meeting of this Branch towards the end of September. Gentlemen desirous of reading papers or communications are requested to communicate at once with the Honorary Secretary, Dr. GLASCOTT, 23, Saint John Street, Manchester.

## SPECIAL CORRESPONDENCE.

## MANCHESTER.

[FROM OUR OWN CORRESPONDENT.]

*Medical Examinations at Victoria University. — Manchester Royal Infirmary. — Monsall Fever Hospital. — Vacancies in Manchester Hospitals. — Fatality of Zymotic Diarrhoea. — Nuisance created by Soil-carts.*

THE first medical examinations in connection with Victoria University, namely, the Preliminary Examination in Science and the Intermediate Examination for M.B., were held last month, the results being looked forward to with keen interest. The subjects for the former consisted of chemistry—inorganic and organic—biology, mechanics and physics. Nine candidates presenting themselves, of whom six passed. The subjects of the latter were anatomy, physiology, materia medica, and pharmacy; four men presented themselves, and all passed. The examinations were conducted by the professors of the University in their respective subjects, in conjunction with external examiners. From the nature of the questions given both in the written part, and also in the practical, it is clear that the standard aimed at does not fall short of that either of the London or of the Edinburgh University. It is rumoured that, before long, both University College, Liverpool, and the Yorkshire College at Leeds, having complied with the necessary conditions, will demand affiliation to the Victoria University.

At the annual meeting of the Royal Infirmary, recently held, it was announced that the system of "recommends" which for some time past had been falling into disuse, had been definitely abolished. This is a step in the right direction, as patients armed with the "recommends" of subscribers are by no means always the most urgent or the most suitable cases for the vacant beds, and much time is sometimes wasted by would-be patients in going about from place to place in order to obtain one from a subscriber.

The appointment of Dr. Graham Steell as acting visiting physician to Monsall Fever Hospital has given general satisfaction. As late resident medical officer of the infirmary, and also of the Leeds Fever Hospital, he has had much experience in the treatment of fever and of hospital-administration. Arrangements are being made for the reception of small-pox cases in buildings distinct from, and at a distance from, the present block of building where they have been hitherto received, but still on the same premises; cases of measles hitherto sent by the guardians are no longer to be received at Monsall. These changes will, of necessity, simplify the management of the institution.

## MEDICO-LEGAL AND MEDICO-ETHICAL

### MIDWIFERY ENGAGEMENTS.

I shall be glad of an opinion in your next issue on the following.  
Mrs. B., living half a mile from my home, calls at my surgery, and engages me to attend her in her approaching confinement. I book her name, fee, etc., in her presence. I have attended her twice before in the same capacity, and have been duly paid. She afterwards, I hear, engages a midwife to be with her at the time. When labour comes on, Mrs. B. sends for the midwife to attend her, which she does, and it is not till some days afterwards that I casually hear that the confinement has taken place. About a month later, I receive a note from Mrs. B., to the effect that my services will not be required, as she was confined a month since, and there was no time to send for me. My answer to this was to send in a claim for my full fee. This Mrs. B. flatly refuses to pay, as she does not consider she owes me anything.

Will you kindly inform me if I can legally demand the full fee, and if I can claim it in the County Court? I might say that this is a little trick which is becoming fashionable amongst the lower classes here—I am, sir, yours obediently,  
A MEMBER.

\* If our correspondent care so to do, he can recover the fee which was arranged to be paid by taking out a summons in the County Court. Decisions have been given on several occasions by judges in favour of the medical man, and the law on the subject is well understood.

## MEDICAL NEWS.

**APOTHECARIES' HALL.**—The following gentlemen passed their Examination in the Science and Practice of Medicine, and received certificates to practise, on Thursday, August 28th, 1884.

Davies, Howard, The Ash Grove, Pontypridd.  
Gorman, Hanway, Maywood, Sevenoaks.  
Green, Charles Robert Mortimer, St. Simon's Vicarage, Morpeth Street, E.  
Uddin, Tamiz, 3, Pump Court, Temple, E.C.  
Wharry, Henry Gordon Oliphant, 6, Gordon Square, W.C.  
Wood, Edward, Oaklea, Lansdown Road, Tottenham.

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

Congdon, George Julius, Guy's Hospital.

### MEDICAL VACANCIES.

The following vacancies are announced.

**BRISTOL GENERAL HOSPITAL.**—Physician's Assistant. Salary, 50*l.* per annum. Applications by September 22nd.  
**BURY ST. EDMUNDS FRIENDLY SOCIETIES MEDICAL AID ASSOCIATION.**—Resident Medical Officer. Salary, 200*l.* per annum. Applications to S. B. Hazell, 35, Victoria Street, Bury St. Edmunds.  
**DEVONSHIRE HOSPITAL,** Buxton, Derbyshire.—House-Surgeon. Salary, 100*l.* per annum. Applications by September 15th.  
**DURSLEY UNION.**—Medical Officer. Salary, 80*l.* per annum. Applications by September 10th.  
**FRIENDLY SOCIETIES PROVIDENT MEDICAL INSTITUTE.**—Medical Officer. Salary, 150*l.* per annum. Applications to the Secretary, 4, Bath Street, Bath.  
**GLOUCESTER COUNTY ASYLUM.**—Assistant Medical Officer. Salary, 100 guineas per annum. Applications by September 15th.  
**GROSVENOR HOSPITAL FOR WOMEN AND CHILDREN,** Westminster, S.W.—Physician. Applications by September 6th.  
**HARTLEPOOL FRIENDLY SOCIETIES' MEDICAL ASSOCIATION.**—Junior Medical Officer. Applications to T. Tweddell, West Hartlepool.  
**HOSPITAL FOR WOMEN,** Soho Square, W.—House-Physician. Salary, 75*l.* per annum. Applications by September 16th.  
**HULM DISPENSARY,** Manchester.—House-Surgeon. Salary, 130*l.* per annum. Applications by September 17th.  
**MANCHESTER ROYAL INFIRMARY.**—Resident Surgical Officer. Salary, 150*l.* per annum. Applications by September 12th.  
**PARISH OF BARVAS,** Island of Lewis.—Medical Officer. Salary, 150*l.* per annum. Applications to the Inspector of Poor for the Parish of Stornoway. Applications by September 16th.  
**PAROCHIAL BOARD OF ARDCHATTAN AND MUCKAIRN,** Argyllshire.—Medical Officer. Salary, 70*l.* per annum. Applications by September 6th.  
**QUEEN'S COLLEGE,** Cork.—Professor of Materia Medica. Applications to the Under Secretary, Dublin Castle, by September 15th.  
**ST. GEORGE-IN-THE-EAST PARISH.**—District Medical Officer. Salary, 250*l.* per annum. Applications by September 19th.  
**ST. MARY'S HOSPITAL,** Quay Street, Manchester.—House-Surgeon and Resident Obstetric Assistant-Surgeon. Salary, 130*l.* per annum. Applications by September 15th.  
**ST. PETER'S HOSPITAL FOR STONE AND URINARY DISEASES,** etc.—House-Surgeon. Honorarium, 25 guineas. Applications by September 21st.  
**ST. THOMAS'S HOSPITAL.**—Curator of Museum. Salary, 150*l.* per annum. Applications to Mr. Tritton by September 20th.  
**SOMERSET AND BATH ASYLUM.**—Senior Assistant Medical Officer. Salary, 160*l.* per annum. Applications to Dr. Wade, Superintendent County Asylum, Wells, Somerset, by September 10th.  
**SWANSEA HOSPITAL.**—Resident Medical Officer. Salary, 100*l.* per annum. Applications by October 28th.

**UNIVERSITY OF ABERDEEN.**—Six Examiners in Medicine. Each examiner will be appointed for one year, and will receive a grant of 80*l.* each year. Applications to Robert Walker, Secretary.

**WEST BROMWICH DISTRICT HOSPITAL.**—House-Surgeon. Salary, 80*l.* per annum. Applications by September 20th.

**WEST END HOSPITAL FOR DISEASES OF THE NERVOUS SYSTEM, PARALYSIS AND EPILEPSY,** 73, Welbeck Street, W.—Physician and two Assistant-Physicians. Applications by September 18th.

### MEDICAL APPOINTMENTS.

**BATTEN,** George B., M.B., C.M. Edin., appointed Assistant Medical Officer to the Fife and Kinross District Asylum, Cupar.

**FLOOD,** — M.D., appointed Sanitary Medical Officer of Port Said, Egypt.

**MACMUNN,** J. A., M.B., C.M., L.R.C.P., L.B.C.S. Edin., appointed Medical Officer to the Oddfellow's, Rechabites, and Parish of St. Anne, Alderney, Channel Islands.

**ROBERTSON,** W. S., M.B., C.M., appointed Medical Superintendent of the Government Hospital at Port Said, Egypt, *vice* Dr. Flood.

**SPOFFER,** R. H. S., M.D., appointed Medical Officer and Public Vaccinator to North Molton District of the South Molton Union, Devon, *vice* James Flaxman, resigned.

### BIRTHS, MARRIAGES, AND DEATHS.

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

#### BIRTH.

**KING.**—August 30th, at the Limes, Linton, Cambs., the wife of Herbert D. King, M.B., of a son.

#### MARRIAGES.

**KIDD-VINCENT.**—On August 30th, at the Church of the Holy Trinity, Sunderland, by the Rev. Richard Waters, Rector of Sunderland, Philip Horace Kidd, B.A., M.B., to Anna Matilda, elder daughter of James Vincent, of Hales, Norfolk.

**SEWELL-WHYTELAW.**—On August 26th, at Rowmore Row, Dumbartonshire, by the Rev. William Dunn, of Cardross, William R. Sewell, M.D., Helensburgh, to Jessie, daughter of Alexander Whitelaw, Esq.

#### DEATHS.

**EVERETT.**—On August 21st, at his residence, Crystal Palace Park, Sydenham, David Everett, Esq., F.R.C.S., aged 66. [The name was misprinted "Daniel" in last week's JOURNAL.]

**KERSHAW.**—On August 22nd, aged 82 years, Mary Alice, the beloved wife of Alfred Kershaw, M.R.C.S., etc., Farnworth.

At the Annual Meeting of the Governors of the Worthing Infirmary and Dispensary, the report submitted showed that the receipts for the past year amounted to £1,265 1*s.* 2*d.*, with a total deficit on the year's income of £55 5*s.* 10*d.* The subscriptions and donations were in excess of former years, but owing to the continued increase in the number of patients a further increase in the annual income was urgently needed. The report and statement of accounts were received and adopted. Mr. R. Dawes, in accordance with notice, moved that persons receiving parochial relief be not excluded the benefits of the Infirmary and Dispensary. Mr. Dawes pointed out that the Infirmary and Dispensary was essentially a charitable institution, and that its objects were not fully carried into effect while the poorest of the poor—those in receipt of parochial relief—were excluded from its benefits. Mr. W. J. Harris, principal surgeon of the Infirmary, said he should be sorry to see the rules altered; but if it was decided to make the change proposed he thought it would be undesirable that the medical officers should be attached to the Institution. A discussion ensued resulting in Mr. Dawes' resolution being carried by a large majority.

**GLANFORD BRIGG RURAL DISTRICT.**—The mortality in this district amongst children under five years of age is very serious. Taken as a whole, the deaths of children represented, in the year 1882, 38 per cent. of the whole mortality; but, excluding the ironstone villages, four in number, the percentage is reduced to 24. Mr. Moxon observes on the subject: "Perhaps the chief of the causes of this high death-rate consists of errors of diet. Unless infants are fed upon milk, either from the mother (which, of course, is infinitely the best food), or from the cow, it is exceedingly difficult to rear them. On inquiry, I find that a large number of the people are not supplied with this necessary article of infant food. They either do not take it at all, or only irregularly, and there is not sufficient encouragement for the milk-seller to carry it day by day to the door, as in towns. In one village, where there are over 200 houses, and probably 1,200 inhabitants, I could find only two milk-sellers, one having two cows, and the other only one. Bread-sop, as it is called, I found to be a common food for infants. This article of diet is merely bread soaked in hot water and sweetened, and is an unfit food for young children. This, and other errors of diet, are, I believe, chief causes of infant mortality. Strong and robust children struggle through such treatment."

## OPERATION DAYS AT THE HOSPITALS.

<b>MONDAY</b> .....	St. Bartholomew's, 1.30 P.M.—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, 3 P.M.—Hospital for Women, 2 P.M.
<b>TUESDAY</b> .....	St. Bartholomew's, 1.30 P.M.—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.
<b>WEDNESDAY</b> ...	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.
<b>THURSDAY</b> ...	St. George's, 1 P.M.—Central London Ophthalmic, 1 P.M.—Charing Cross, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Hospital for Diseases of the Throat, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—Hospital for Women, 2 P.M.—London, 2 P.M.—North-west London, 2.30 P.M.—Chelsea Hospital for Women, 2 P.M.
<b>FRIDAY</b> .....	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.
<b>SATURDAY</b> ...	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.

<b>CHARING CROSS.</b> —Medical and Surgical, daily, 1; Obstetric, Tu. F., 1.30; Skin, M. Th., Dental, M. W. F., 9.30.
<b>GUY'S.</b> —Medical and Surgical, daily, exc. T., 1.30; Obstetric, M. W. F., 1.30; Eye, M. Tu. Th. F., 1.30; Ear, Tu. F., 12.30; Skin, Tu., 12.30; Dental, Tu. Th. F., 12.
<b>KING'S COLLEGE.</b> —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.
<b>LONDON.</b> —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, Th., 9; Dental, Tu., 9.
<b>MIDDLESEX.</b> —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.
<b>ST. BARTHOLOMEW'S.</b> —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.
<b>ST. GEORGE'S.</b> —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.
<b>ST. MARY'S.</b> —Medical and Surgical, daily, 1.45; Obstetric, Tu. F., 9.30; o.p., M. Th., 9.30; Eye, Tu. F., 9.30; Ear, W. S., 9.30; Throat, M. Th., 9.30; Skin, Tu. F., 9.30; Electrician, Tu. F., 9.30; Dental, W. S., 9.30.
<b>ST. THOMAS'S.</b> —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.
<b>UNIVERSITY COLLEGE.</b> —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., 10.30.
<b>WESTMINSTER.</b> —Medical and Surgical, daily, 1.30; Obstetric, Tu. F., 2; Eye, M. Th., 2.30; Ear, Tu. F., 9; Skin, Th., 1; Dental, W. S., 9.15.

## 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.

In order to avoid delay, it is particularly requested that all letters on the editorial business of the JOURNAL should be addressed to the Editor at the office of the JOURNAL, and not to his private house.

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.

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

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

WE CANNOT UNDERTAKE TO RETURN MANUSCRIPTS NOT USED.

## No USE FOR HIS TEETH.

In an entertaining little book just published by the Doctor, of Burwash, entitled *Sussex Folk and Sussex Ways*, appears the following little anecdote, which has an amusing interest of its own. A labouring man, out of work and hungry, went one morning to the surgery of a neighbouring parish doctor, sat down, and asked to have one of his teeth taken out. The doctor opened the man's mouth and looked at his teeth, but seeing nothing amiss, said, "Which is the tooth, friend?" "Oh, e'er a one you like, sir," said the man. "I've got nothing for 'em to do, so I thought I might as well get rid of 'em." We are glad, for the credit of the profession, to hear that the doctor, appreciating the joke, gave the man the wherewithal to "go and get his teeth a job for one day, at all events."

## ASSALINI'S FORCEPS.

SIR.—Would "Forceps" kindly inform your readers the name of the maker of the Assalini forceps which he has used "500 times" without any mishap. I shall certainly give them a trial if I can obtain a pair from the same maker.—Yours obediently,  
A. COUNTRY SURGEON.

## HERNIA.

SIR.—Would you be so kind as to answer these two questions in the BRITISH MEDICAL JOURNAL?

1. Can you tell me which is the best standard work on Hernia, and where it is to be procured?

2. Does an umbilical or a ventral hernia ever become strangulated?—Yours, etc.,  
W. E.

1. The best work is that of Lawrence, which can be purchased for a small sum of any dealer in old and second-hand medical works.

2. Hernia through the linea alba is frequently strangulated; other forms of ventral hernia are very rarely strangulated, but some few instances have been recorded by Sir A. Cooper, Littre, and Petit. Umbilical hernia is frequently strangulated.

## THE LATE DR. MILLER.

SOME friends of the late Dr. Miller are desirous of presenting his widow with some substantial mark of their appreciation of his merits, and of their respect for his memory. Any donation will be gladly received by Captain McCoy, Elm Grove Villa, Southsea; or can be paid into Messrs. Grant and Co.'s Bank, Portsmouth or Southsea, to the joint names of Admiral Chads and Captain McCoy.

## THE PINK FUND.

SIR.—Please insert the subjoined.	£	s.	d.
G. E. Norton, Esq., 4, Gloucester Place	..	1	0
L. Druitt, M.D., Clapham Road	..	1	0
Miss Smith, Clifton	..	0	10
F. P. Atkinson, M.D., Surbiton	..	0	10
A. G.	..	1	0
—Yours obediently, Montague Place, W.C.	..		
			JOSEPH ROGERS.

## TREATMENT OF CHOLERA.

SIR.—During the last cholera-outbreak, I was called up one night to my coachman, whom I found in a state of collapse, with constant purging and vomiting, and severe cramps of the abdomen and lower extremities. I immediately prepared a liniment of tincture of opium, chloroform, and soap-liniment, equal parts, and rubbed it in freely and for about twenty minutes over the abdomen and legs, when the cramps ceased, vomiting and purging stopped, and he was able to keep down a mixture of small doses of tincture of opium, bicarbonate of soda, and chloric ether. He soon became warm, and I left him comparatively easy. I saw him again at 9 A.M., and all the bad symptoms had disappeared.

Since then, I have frequently used the above liniment in cases of cramps and diarrhoea, and always with the best results; for a child, the strength of the liniment should be reduced. The liniment could be rendered antiseptic by the addition of half a drachm of creasote to each ounce of the liniment.—I am, sir, yours faithfully,  
M.D.

## PAINFUL AFFECTION OF THE JAW.

Z. ASKS for advice in the treatment of the following case. A young girl, aged 15, in good health, save for slight menstrual irregularity, suffers from a painful affection of one temporomaxillary joint (left side). This causes her pain when gaping, and occasionally when eating, but not at other times. Counterirritation in many forms has been tried, mercurial inunction, electricity; internally, every remedy which seemed likely to be beneficial, but with an absolutely negative result. The affection is neither better nor worse, and has now lasted for about four months.

## TENNIS-ELBOW.

SIR.—I would feel much obliged if any of your correspondents would inform me through the JOURNAL of the best treatment for tennis-elbow.—I am, etc.,  
A.M.D.

\*\* Our correspondent will find communications on tennis-elbow in the JOURNAL for 1883, volume ii, pages 557, 708, 954, 1104, and 1168.

## SMALL-POX AND VACCINATION.

SIR.—The following case is, I think, worth recording. On July 2nd, I was called in to see a gentleman, who had returned home from his holiday two days previously. He was evidently commencing to have an attack of variola. I at once vaccinated all in the house, except a little child of four years, which had well marked vaccination-spots, equal in size together to a space which a shrapnel would cover. This child had only once seen the patient, and I immediately had it removed from the house. On the 17th—that is, fifteen days from seeing the invalid—I had to return the child, as it commenced to have a slight attack of small-pox on that day, the incubation being exactly fifteen days. One of the sisters whom I vaccinated, and who nursed the patient, did not take; nor again after vaccinating her with calf-lymph, which was evidently potent, as it took on applying it to another case; but when the child with small-pox was returned, I vaccinated her for the third time, a second time with human lymph. This time she took well, even as though it were a primary vaccination. Is it not singular that this lady, who had no marks on her arm of previous vaccination, should neither have become susceptible to the first human vaccination, the calf-vaccination, or the small-pox, the case of which she was nursing, but should have taken as a primary vaccination, after the second human vaccination? It shows, at any rate, I think, the absolute necessity of revaccination more than once in case of small-pox. Owing to isolation of the two cases, the disease has not spread further.—Yours truly,  
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