

ASSOCIATION INTELLIGENCE.

NOTICE OF QUARTERLY MEETINGS FOR 1885:

ELECTION OF MEMBERS.

MEETINGS of the Council will be held on January 14th, April 8th, July 8th, and October 14th, 1885. 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 each meeting, namely, December 25th, 1884, and March, 18th, June 17th, and September 24th, 1885, 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. Acute Pneumonia. | VII. Puerperal Pyrexia. |
| II. Chorea. | VIII. Paroxysmal hæmoglobinuria. |
| III. Acute Rheumatism. | X. Habits of Aged Persons. |
| IV. Diphtheria, clinical. | XI. Albuminuria in the Apparently Healthy. |
| IVA. Diphtheria, sanitary. | XII. Sleep-walking. |
| V. Syphilis, acquired. | |
| 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 anyone 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 INDIAN BRANCH.—Meetings are held in the Central Museum, Madras, on the first Saturday in the month, at 9 P.M. Gentlemen desirous of reading papers or exhibiting specimens are requested to communicate with the Honorary Secretary.—C. SIEBTHORPE, Honorary Secretary, Madras.

METROPOLITAN COUNTIES BRANCH: EAST LONDON AND SOUTH ESSEX DISTRICT.—The next meeting (postponed from November 20th) will be held on Thursday, December 18th, at the Hackney Town Hall, at 8.30, Dr. Herman in the chair. A discussion on the use of the forceps will be opened by Frederick Wallace, Esq.—JOSEPH W. HUNT, Honorary Secretary, 101, Queen's Road, Dalston.

METROPOLITAN COUNTIES BRANCH: NORTHERN DISTRICT.—The first meeting of the session 1884-85 will be held at the Athenæum, Camden Road, N., on Friday, December 19th, at 8.30 P.M. C. Macnamara, Esq., President of the Branch, will take the chair. The Secretary will read a paper "On the desirability of exacting small payments from Patients attending the Out-patient Departments of the London Hospitals, and its effect on the General Practitioners." A discussion will follow. All members of the Branch are invited, and may introduce a medical friend.—GEORGE HENTY, M.D., Honorary Secretary, 308, Camden Road, N.

WORCESTERSHIRE AND HEREFORDSHIRE BRANCH: MEETING.

A MEETING of this Branch was held on the 2nd inst.

New Members.—Dr. Packer, of Worcester, and Mr. A. O. Holbeche, of Malvern Wells, were elected members of the Branch.

Medical Sickness, Annuity, and Life-Assurance Society.—On the motion of Dr. STANLEY HAYNES, seconded by Mr. COOMBS, it was decided that the following members be a Branch-committee to further the interests of the Medical Sickness, Annuity, and Life-Assurance

Society, viz., Mr. T. Turner (President of the Branch), Chairman, Mr. Coombs, Mr. W. A. S. Walsh, Mr. Douty, and Dr. Crowe; Dr. Stanley Haynes, honorary secretary.

Branch Subscription.—It was decided that, after this year, the Branch subscription be reduced from 4s. to 2s. 6d.

Enteric Fever at Kidderminster.—Dr. SWETE gave an address on the late enteric fever epidemic at Kidderminster.

Dinner.—The members afterwards dined at the Star Hotel.

BRITISH MEDICAL ASSOCIATION.

FIFTY-THIRD ANNUAL MEETING.

THE Fifty-third Annual Meeting of the British Medical Association will be held at Cardiff, on Tuesday, Wednesday, Thursday, and Friday, July 28th, 29th, 30th and 31st, 1885.

President: JAMES CUMING, M.D., F.R.C.Q.C.P., Professor of Medicine in Queen's College, and Physician to the Royal Hospital, Belfast.

President-elect: W. T. EDWARDS, M.D., F.R.C.S., Physician to the Glamorgan and Monmouth Infirmary, Cardiff.

An Address in Therapeutics will be delivered by W. Roberts, M.D., F.R.S., Consulting Physician to the Manchester Royal Infirmary.

An Address in Surgery will be delivered by John Marshall, F.R.C.S., F.R.S., Professor of Surgery in University College, and Senior Surgeon to University College Hospital.

An Address in Public Medicine will be delivered by Thos. John Dyke, F.R.C.S., Medical Officer of Health, Merthyr Tydvil.

SECTION A. MEDICINE.—**President:** S. Wilks, M.D., F.R.S., London. **Vice-Presidents:** T. D. Griffiths, M.D., Swansea; Byrom Bramwell, M.D., Edinburgh. **Secretaries:** W. Price, M.B., Park Place, Cardiff; E. Markham Skerrett, M.D., Richmond Hill, Clifton.

SECTION B. SURGERY.—**President:** E. H. Bennett, M.D., President of the Royal College of Surgeons in Ireland, Dublin. **Vice-Presidents:** P. R. Cresswell, F.R.C.S., Dowlais; Edmund Owen, F.R.C.S., London. **Secretaries:** G. A. Brown, M.R.C.S., Tredegar; Thomas Jones, F.R.C.S., 96, Mosley Street, Manchester.

SECTION C. OBSTETRIC MEDICINE.—**President:** Henry Gervis, M.D., London. **Vice-Presidents:** S. H. Steel, M.B., Abergavenny; W. C. Grigg, M.D., London. **Secretaries:** A. P. Fiddian, M.B., 6, Brighton Terrace, Cardiff; D. Berry Hart, M.D., 65, Frederick Street, Edinburgh.

SECTION D. PUBLIC MEDICINE.—**President:** D. Davies, M.R.C.S. M.O.H., Bristol. **Vice-Presidents:** E. Davies, M.R.C.S. M.O.H., Swansea; J. Lloyd-Roberts, M.B., Denbigh. **Secretaries:** Edward Rice Morgan, M.R.C.S., Morriston, Swansea; Herbert M. Page, M.D., 16, Prospect Hill, Redditch.

SECTION E. PSYCHOLOGY.—**President:** D. Yellowlees, M.D., Glasgow. **Vice-Presidents:** G. J. Hearder, M.D., Carmarthen; G. E. Shuttleworth, M.D., Lancaster. **Secretaries:** C. Pegge, M.R.C.S., Vernon House, Briton Ferry, Glamorgan; A. Strange, M.D., County Asylum, Bicton Heath, Shrewsbury.

SECTION F. OPHTHALMOLOGY AND OTOLGY.—**President:** Henry Power, M.B., F.R.C.S., London. **Vice-Presidents:** E. Woakes, M.D., London; D. C. Lloyd Owen F.R.C.S., Birmingham. **Secretaries:** J. Milward, M.D., 54, Charles Street, Cardiff; A. Emrys-Jones, M.D., 25, St. John Street, Manchester.

SECTION G. PHARMACOLOGY AND THERAPEUTICS.—**President:** T. R. Fraser, M.D., F.R.S., Edinburgh. **Vice-Presidents:** J. Talfourd Jones, M.B., Brecon; W. Murrell, M.D., 88, Weymouth Street, London. **Secretaries:** Evan Jones, M.R.C.S., Ty Mawr, Aberdare; J. H. Wathen, L.R.C.P., Coburg Villa, Richmond Hill, Clifton.

Local Secretaries: Alfred Sheen, M.D., Halswell House, Cardiff; Andrew Davies, M.D., Cadiz House, Cardiff.

TUESDAY, JULY 28TH, 1885.

2.30 P.M.—Meeting of 1884-85 Council.
3.30 P.M.—General Meeting. Report of Council and other business. Adjourn at 5 P.M.

5 P.M.—General Meeting. President's Address, and any business adjourned from meeting at 3.30 o'clock.

WEDNESDAY, JULY 29TH, 1885.

9.30 A.M.—Meeting of 1885-86 Council.

11.0 A.M.—Second General Meeting. Address in Therapeutics.

2 to 5 P.M.—Sectional Meetings.

8 P.M.—A Conversation will be given by the President of the Association and the South Wales and Monmouthshire Branch.

THURSDAY, JULY 30TH, 1885.

9.30 A.M.—Meeting of Council.

11 A.M.—Third General Meeting. Address in Surgery.

2 to 5 P.M.—Sectional Meetings.

6.30 P.M.—Public Dinner.

FRIDAY, JULY 31st, 1885.

10 A.M.—Address in Public Medicine.

11 A.M.—Sectional Meetings.

2 P.M.—Concluding General Meeting.

8 P.M.—Reception by the Mayor of Cardiff.

SATURDAY, AUGUST 1st, 1885.

Excursions.

EXCURSIONS.

1. *Tintern*.—Leave Cardiff by Great Western Railway 10.10 A.M.; by carriage from Chepstow at 10.56; stopping to visit Wyndcliff and Moss Cottage, and reaching Tintern at 12.30. Luncheon at Beaufort Arms. Leave Tintern at 3.30, and, proceeding by 4.53 train from Chepstow, return to Cardiff at 6 P.M.; or by train from Tintern Station at 4.25, reaching Cardiff at 6 P.M.

2. *Raglan*.—Leave Cardiff at 10.10 A.M., proceed *via* Newport and Pontypool Road to Raglan Footpath, reach this at 12.10. Luncheon at Beaufort Arms Hotel. Engage the old harper. Leave at 5.17 P.M., reaching Cardiff at 6.42.

3. *Cheddar and Weston-super-Mare*.—By *Lady Mary* steamship to Weston at 10 A.M. (according to tide). Proceed by carriages to Cheddar (twelve miles), which would be reached about 1 P.M.; returning at 5 P.M., reaching Cardiff at 8 o'clock.

4. *Glastonbury Abbey and Wells Cathedral*.—Leave Rhymney Railway Station at 8 A.M. for Low Water Pier, by steamer to Burnham. Special train to Wells. Luncheon at Wells. Sail round Steep Holm. Special train to Glastonbury, and afterwards to Burnham, returning to Cardiff about 8 P.M.

5. *Caerphilly, etc.*.—Leave Cardiff 12.20 P.M. Luncheon in Banqueting Hall, 1.30. Drive over top of mountain to Castle Coch, and home by way of Llandaff Cathedral, reaching Cardiff at 7 P.M.

6. *Vale of Neath Waterfalls*.—Leave Cardiff 7.48, reaching Neath 9.33 (next train 11.20, reaching Neath 1.3 P.M.). From Neath 11.51, arriving at Glyn Neath at 12.15, or arrange for special train. Return 3.51, Neath 4.16; depart 4.27, reach Cardiff 6.2 P.M.; or leave Cardiff 9 A.M. *via* Aberdare, reaching Glyn Neath at 10.38. Leave Glyn Neath at 4 P.M., returning to Cardiff at 5.45.

7. *Symonds Yat and Speech House*.—Leave Cardiff 10.10 A.M.; reach Symonds Yat 12.46. Luncheon at hotel. Walk to Lydbrook Junction, miles. Train to Speech House Road, 3.20; reach Speech House Road 4 P.M. Leave 7.20 for Lydney Junction, 7.45; or leave Cardiff 10.10; Lydney, arrive 11.9; proceed from Lydney 11.33, reaching Speech House Road 11.55. Luncheon. Special train enabling visitors to see Symonds Yat, and catch 5 P.M. train from Monmouth, arriving at Cardiff at 6.42.

SPECIAL CORRESPONDENCE.

BERLIN.

[FROM OUR OWN CORRESPONDENT.]

The Zoological Station at Naples.—Disinfectant Precautions in Berlin.—Obituary.—New Polyclinic for Diseases of the Skin.

PROFESSOR DOHRN, the Director of the German Zoological Station at Naples, gave an address before a large assembly last month, in a room lent for the purpose by the University. The Minister of Education, Herr von Gossler, presided at the meeting, the object of which was to collect funds for the large steamer that Professor Dohrn wishes to have for the scientific purposes of the station. After Herr von Gossler had spoken in favour of the project, appealing to the patriotism of his countrymen, Professor Dohrn explained why he wished to ask the German nation to present the station with the new ship. The nature and habits of the fish of the sea, he said, could not be so well examined on land alone; and the small steamer that the Italian Government had placed at their disposal was not large enough. A steamer was necessary, in order that they could carry on their experiments all over the Mediterranean. The Italian Government has promised a crew and the firing; but, besides the ship, they required 30,000 francs annually for the necessary expenses. Professor Dohrn said that the competition and ambition of other nations were threatening the existence of the German undertaking, so that he hoped that the appeal he was making in Berlin and the other large towns of Germany would not be in vain.

The Municipal Deputation for Hygiene held a meeting last week, to discuss the measures for affording the greatest possible security against cholera. It was decided to erect two disinfectant-stations in the town, with six disinfecting-machines; each of these stations is to have one of these machines for immediate use, the other four being kept in

reserve. On Professor Virchow's recommendation; it was also decided to test a new movable disinfecting machine, made by Herr Raedike. It may be remarked that the appearance of cholera abroad has only hastened the carrying out of these measures, which have been under consideration for some time. Twice a week all the rooms, corridors, and kitchens, in all Berlin barracks, are now washed with a solution of carbolic acid, and carbolic acid is strewn in all spittoons.

Last month Königsberg and Tübingen each lost a distinguished member of the medical faculty. Professor von Wittich died at Königsberg; and Professor K. von Vierordt died at Tübingen. Both of them have long been distinguished in matters connected with respiration and circulation. Professor Kolbe, of Leipzig, author of *Lehrbuch der Organischen Chemie*, died at Leipzig, on November 27th.

Professor Köbener opened a new polyclinic for diseases of the skin on December 1st, at 3, Friedrichstrasse, where clinical courses of lectures on Dermatology and Syphilis will be held on Mondays, Tuesdays, Fridays, and Saturdays, from 12 to 1 o'clock.

GLASGOW.

[FROM OUR OWN CORRESPONDENT.]

Western Infirmary.—Sanitary Protection Association.—Philosophical Society.—Anderson's College.—Ambulance Demonstration.

THE present week has seen a change in the office of medical superintendent in our Western Infirmary. After a service of nearly eight years, Dr. Alexander retires from the more immediate control of the hospital to enter on the duties of private practice. That his services have been appreciated, is shown by the testimonial given him by the official staff of the institution, and by the directors appointing him, without a contest, to fill the vacancy of Dispensary Physician. His successor, Dr. Russell, has entered on his duties. He takes office at a time when no special question affecting the Infirmary management is under discussion; but a post such as his always has its anxieties, and, owing to the fact that nearly all the arrangements connected with the management of the hospital, and the important medical school attached to it, pass through his hands, there is needed a great deal of tact and judgment to keep everything working smoothly.

Our local Sanitary Protection Association has held its third annual meeting, and it is quite clear that it has got over its early struggles for existence, and is firmly established in our midst. A gratifying sign about it is that its membership is increasing, and that the extent of its work, especially in the surrounding districts, is as much as it can conveniently undertake. The results of its numerous investigations testify to the need of it, and to its value, and there can be no doubt that the community are much indebted to Professor Gairdner and the other guarantors who came forward at first and set the scheme afloat. As long as it is managed with the same economy and tact as heretofore, it is bound to succeed, and to extend its sphere of beneficial work.

The last meeting of our Philosophical Society was marked by a large accession of members. The paper of the evening was one by Professor Dittmar, on the chemical work done by him in connection with the *Challenger* Expedition. It embodied a great deal of information on the composition of sea-water at various depths, and on several other allied topics. The discussion that followed naturally turned on the importance of the data furnished by Professor Dittmar, as bearing on the question how life was supported at great depths by marine animals, seeing that the amount of oxygen in sea-water was so small. The general feeling was in favour of Professor McKendrick's hypothesis, that the small quantity of oxygen which seemed to suffice for respiration was, perhaps, explained by the facility with which the carbonic acid was got rid of, so that it in no way accumulated in the vicinity, and that the existence of fishes, at such depths of the sea, with so little oxygen present, was only another illustration of the well-known fact that life can be maintained with a small quantity of oxygen, provided the carbonic acid is removed.

Under the Educational Endowments (Scotland) Bill of 1882, which will soon become law, the Medical School of Anderson's College must be separated from the parent institution, and will require new buildings of its own. This, no doubt, explains the appeal that has lately been issued by the Dean of the Medical Faculty, intimating the contemplated removal, and the decision to acquire a new site close to the University and Western Infirmary, and asking for public assistance to carry out a movement which it is felt is of vital importance to the future prosperity of the school. The sum wanted is £15,000, which, with the £5,000 granted by the present managers of Anderson's College, is regarded as sufficient to cover the cost of the new buildings.

result? Cyon, the critic, has disappeared from the scientific arena, while Leyden has reached the summit of his ambition, namely, the chair of medicine at Berlin. But, "to come back to our lambs," "time" was a perfectly legitimate term for me to use when writing a paper which was to be read at the annual meeting of the British Medical Association at Belfast; while, for the matter printed in the JOURNAL, "space" might have been better. Anyway I felt sure that, whether read or printed, my paper would be unduly lengthened by giving a complete account of all the theories of this extraordinary malady, which have from time to time been brought forward; and I, therefore, contented myself with mentioning those which are, by general consent, considered the most important.

Which one of all these theories, my own included, and which Dr. de Watteville playfully calls "airy cobwebs," will eventually stand, time alone can show. The Darwinian law of survival of the fittest will, no doubt, be operative here as elsewhere; and I can only say that I look forward to the eventual result with some degree of confidence as well as composure.—I am, etc.,

JULIUS ALTHAUS, M.D.

INCREASE IN BODY-WEIGHT IN CONSUMPTION.

SIR,—The value of drugs in the treatment of disease is at all times difficult to estimate, and the accuracy of Dr. Quinlan's opinion of the curative influence of the mullein-plant in consumption can only be determined by a much more extended experience of its use by skilled observers than is at present available.

Increase of body-weight in consumptive patients is, however, an important indication of improvement in most cases; and the annual "medical report" of this hospital refers specially to the gain and loss in weight of the patients who have been under observation during the year.

The reports for the years 1881, 1882, and 1883, show that, during these years, a total number of 1,513 patients passed through the hospital, the average period of residence being under nine weeks. The number of these patients that gained in weight was 1,107, or 73 per cent.; and, though of course the individual gain varied greatly in amount, the average increase per patient amounted to six and a quarter pounds. The dietary is a liberal one, and the consumption of new milk *per diem* averages over two pints for each individual.

A more precise idea of what the above figures represent may, perhaps, be better conveyed by a short account of the progress of the present occupants of one of the eight blocks of which the hospital consists.

CASE I.—A bricklayer, aged 38 years. "Bronchitis" three years ago. Right lung affected in its upper third, and an apex-cavity; incipient disease of left apex. Gained 30 lbs. in 64 days. Treated with cod-liver oil emulsion.

CASE II.—A watchmaker, 22 years old. Cough four years. Both lungs affected in their upper lobes; excavation at left apex. Pyrexial temperature; maximum 102° Fahr. Lost weight for three weeks with the emulsion; since its discontinuance has gained 5 lbs. in six weeks.

CASE III.—A warehouseman, aged 34. Ill eight months; had severe hæmoptysis. Upper lobes of both lungs affected; apex-cavity in the left. Pyrexial temperature, maximum 102.8° Fahr. Gained 5½ lbs. in three weeks; has not been weighed since, owing to repeated slight hæmoptysis.

CASE IV.—A seedsman, aged 26. Hæmoptysis twelve years since; ill two years now. Disseminated affection of the whole of right lung, with excavation at both apices. Gained 7½ lbs. in nine weeks. Treated with emulsion.

CASE V.—A carpenter, aged 23. Ill eight years; had two severe hæmoptyses last year. Cavities at both apices. Pyrexia for ten days; maximum 100.4° Fahr. Gained 2½ lbs. in eight weeks.

CASE VI.—Compositor, 47 years old. Cough two years. Apex-cavity on right side, incipient disease at left apex. Gained 15½ lbs. in eight weeks.

CASE VII.—Gardener, aged 31. Disseminated affection of right lung; laryngeal ulceration. Gained 2 lbs. in seven weeks.

CASE VIII.—Coachman, aged 25. Cough a year. Disseminated affection of right lung; incipient disease at left apex. Weight stationary during five weeks. Treated with emulsion.

CASE IX.—Clerk, aged 34. Ill nine weeks. Excavation at left apex, incipient disease at right apex. Gained 13½ lbs. in four weeks. Treated with emulsion.

CASE X.—Joiner, aged 33. Hæmoptysis fifteen years ago, and once since severely. Disseminated affection of right lung in its upper half,

and incipient disease at left apex. Gained 8½ lbs. in four weeks. Treated with emulsion.

CASE XI.—Harness-maker, aged 18. Cough six months. Consolidation of right apex. Gained 6 lbs. in four weeks.

CASE XII.—Soldier, aged 37. Cough three months. Left apex-cavity and incipient disease of right apex. Specific ulceration of the tongue. Gained 6½ lbs. in three weeks.

These patients are, of course, under very favourable conditions of climate and hygienic surroundings; and it may be, and probably is, that in these conditions the stimulus to improved nutrition is to be found rather than in any special treatment. Certainly it seems that conclusions as to the weight-increasing action of drugs in such cases cannot be safely reached, unless based on a thorough knowledge of the conditions affecting the patient's well-being antecedent to, and during, the use of the drug. Nor must it be forgotten that, given increased nutritional activity in a consumptive patient, amelioration of all urgent symptoms will most likely spontaneously occur as the patient grows fatter.—I am, etc.,

ROBERT ROBERTSON, M.B.,

Resident Medical Officer Ventnor Consumption Hospital.

THE TITLE OF DOCTOR.

SIR,—In your issue of November 29th, Dr. George W. Balfour says, speaking of the Royal College of Physicians of Edinburgh, "His college has never been in the habit of addressing its licentiate members or fellows by any title which they did not legally possess, and that the college would as soon call a man Lord — as Dr. —, unless the said man was legally entitled to be so called."

I am afraid Dr. Balfour has forgotten that the Edinburgh College of Physicians had for fifteen years after 1858 addressed all its licentiates as *doctor*, not only on conferring the diplomas, but also in all written communications.—I am Sir, yours faithfully,

Romsey.

WILLIAM DONOVAN, L.R.C.P.Ed.

UNIVERSITY INTELLIGENCE.

UNIVERSITY OF CAMBRIDGE.

PROFESSOR ROY was on Thursday last admitted to the degree of M.A. *honoris causa*. The Public Orator, in presenting him, spoke as follows.

Dignissime Domine, domine Procellarie, et tota Academia—Quis nescit Athenas illas Caledonicas, cum aliarum artium, tum praesertim studiorum medicorum praeclaram esse sedem. Academiae tam illustri alumnus, Pathologiae Professorem primum nobis nuperrime datum, hodie senatus totius nomine salutamus, ipsum senatorum nostrorum ordini libenter adjungimus. Neque vero una tantum doctrinae sedes Professorem nostrum sibi vindicat; scilicet Germaniae ipsius Academiae celeberrimae hunc virum inter alumnos suos numerant. Ne inter Cantabrigienses quidem prorsus hospes est, qui non modo Physiologiae praeceptoris nostri optimi experimentis aliquamdiu interfuerit, sed etiam ipse de Physiologiae arcanis praelectiones quasdam inter nosmetipsos habuerit. Idem quondam (ut ad remotiora transeamus) Ottomanorum inter milites arti medicae deditus, in ipsa Epiro, prope Pindi montes, prope Dodonae antiquae diu desertum oraculum, velut *larphavris* aliquis, consulentibus respondebat. Ad eundem postea Respublica Argentina, morbo gravi et inexplicabili oppressa, velut ad oraculum aliquod misit, ejus responsis obscura peste illa dirâ sese protinus liberavit. Inter antiquos quidem victimarum in visceribus rerum futurarum praesagia quaerebantur; hic autem, non vanus haruspex, ex ipsis morbis quos alii reformidant, ex ipsâ Morte quae aliis tacet, veritatem ipsam audacter extorquet—adeo ut Catonis verbis profiteri possit:

"*me non oracula certum
sed mors certa facit.*"¹

Vobis praesento Medicinae Doctorem Edinensem, Pathologiae Professorem Cantabrigiensem, CAROLUM SMART ROY.

UNIVERSITY OF OXFORD.

LECTURESHIP IN HUMAN ANATOMY.—The delegates of the Common University Fund will shortly proceed to the election of a lecturer in human anatomy. It will be the duty of the lecturer to lecture and give instruction as demonstrator, in conformity with the requirements of the Royal College of Surgeons, and of the Examining Board for England, and he will be subject to any regulations which may be made by the delegates. The lecturer will receive a salary of £300 a

¹ Lucan, *Pharsalia* ix., 582.

year, and will not be entitled to take fees. He will be appointed for a period of five years, and will be capable of re-appointment. He will not be allowed to engage in practice during his tenure of office. Candidates for the lectureship must hold the diploma of a College of Surgeons in Great Britain or Ireland. Preference will be given to candidates who have served in the office of demonstrator at an established medical school.

MILITARY AND NAVAL MEDICAL SERVICES.

CHANGES OF STATION.

THE following changes of station among the officers of the Medical Staff of the Army have been officially notified as having taken place during the past month:—

	From.	To.
Surgeon-General R. Gilborne	Aldershot	Aldershot.
" " J. Hendley, C.B.	"	Dublin.
Deputy Surgeon-General H. P. Hassard	Cape of Good Hope	Portsmouth.
" " E. M. Sinclair, M.D.	York	Cape of Good H.
" " O. Barnett, C.I.E.	Dublin	Cork.
" " J. G. Faught	Bengal	Cape of Good H.
Brigade Surgeon S. B. Roe, M.D., C.B.	Winchester	Cape of Good H.
" " W. O'Halloran	Egypt	Cape of Good H.
Surgeon-Major C. H. Y. Goodwin	Bombay	Cape of Good H.
" " B. J. Jazowski, M.B.	Aldershot	Cape of Good H.
" " W. J. Wilson, M.D.	Glasgow	Portsmouth.
" " C. A. Mannsall, M.D.	Glasgow	Norwich.
" " W. Jobson, M.D.	Gosport	Bengal.
" " J. Fleming, M.D.	Portsmouth	Cape of Good H.
" " J. W. Maxham, M.D.	Bombay	Winchester.
" " A. Minto	Colchester	Bengal.
" " R. Turner, M.D.	Norwich	Cape of Good H.
" " J. H. Hughes, M.D.	Plymouth	Winchester.
" " C. Healy	Shorncliffe	Bengal.
" " R. Keith, M.D.	Bombay	Cape of Good H.
" " T. O'Reilly	"	Woolwich.
" " G. C. Irving	Portsmouth	Winchester.
" " F. Lyons, M.D.	Bombay	Bengal.
" " G. Hare	Woolwich	Colchester.
" " J. Riddick	Bengal	Portsmouth.
" " D. Parke	African Service	Jamaica.
" " A. H. Stokes, M.B.	Netley	"
" " H. W. Joyn	Dublin	"
" " W. J. Charlton	Bengal	"
Surgeon R. G. Thomsett	Portsmouth	Gosport.
" " J. Ring, M.D.	Belfast	Malta.
" " J. E. V. Foss, M.D.	Cork	Fermoy.
" " H. G. Gardner, M.B.	Newport	Devonport.
" " J. Hoysted	Netley	Colchester.
" " H. J. Robbins, M.D.	Dublin	Cape of Good H.
" " J. J. Morris, M.D.	Dover	Cape of Good H.
" " P. H. Johnston, M.D.	Fermoy	"
" " I. B. Emerson	Dublin	Cape of Good H.
" " G. A. Hughes, M.B.	Dublin	Cape of Good H.
" " F. H. S. Murphy, M.D.	"	Cork.
" " M. T. Johnston, M.D.	Dublin	Cape of Good H.
" " W. C. Kirkpatrick, M.D.	Gosport	Cape of Good H.
" " W. A. Parker	Chatham	Hong Kong.
" " H. J. McLaughlin, M.B.	Woolwich	Netley.
" " W. L. Lane, M.B.	Madras	"
" " R. W. E. H. Nicholson	"	Cork.
" " S. A. Crick, M.B.	"	Preston.
" " A. B. Cottell	Hong Kong	Bermuda.
" " T. Archer, M.D.	Dublin	F. Brockhurst.
" " R. W. Ford	"	Cape of Good H.
" " W. W. Pope	Sheerness	Cape of Good H.
" " G. J. Coates, M.D.	Curragh	Egypt.
" " F. A. B. Daly, M.B.	Dublin	Cape of Good H.
" " T. J. O'Donnell	Glasgow	Portsmouth.
" " J. D. Davies	"	Cape of Good H.
" " G. E. Weston	Fort Rowner	Aldershot.
" " N. M. Reed	"	Netley.
" " H. S. McGill	African Service	Egypt.
" " G. F. Gubbin	Devonport	Egypt.
" " J. P. Myles	Shorncliffe	Egypt.
" " R. Lesby, M.B.	Shorncliffe	Egypt.
" " H. P. Birch	Shorncliffe	Egypt.
" " M. O. Braddell, M.B.	Fermoy	Egypt.
" " J. J. C. Donnett	Dover	Egypt.
" " H. M. Sloggett	Chatham	Egypt.
" " C. S. Robinson	Portsmouth	Egypt.
" " J. R. Mallins	Woolwich	Hounslow.
" " H. N. Thompson, M.B.	Portsmouth	Winchester.
" " H. Mitchell	Canterbury	Dover.
Quarter-Master R. Howell	Manchester	Cape of Good H.
" " S. Warren	Ceylon	"

ARMY MEDICAL SERVICE.

SURGEON-GENERAL R. GILBORNE has been placed on retired pay. Mr. Gilborne entered the service as an Assistant-Surgeon on October 2nd, 1846; became Surgeon, December 8th, 1854; Surgeon-Major, October 2nd, 1866; Deputy Surgeon-General, April 28th, 1876; and

Surgeon-General, October 23rd, 1881. He served with the 8th Hussars in Bulgaria from June 5th, 1854. He served with the 89th Regiment in the Crimea from December 14th, 1854, including the siege and fall of Sebastopol, and the assaults on June 18th and September 8th (medal with clasp, and Turkish medal). He served also in India during the suppression of the mutiny in 1857-59, and in pursuit of the rebels under Tantia Topee in Rajpootana and Central India (medal).

Deputy Surgeon-General A. G. Young has gone on retired pay with a step of honorary rank. He entered the service on May 5th, 1854; became Surgeon, June 20th, 1865; Surgeon-Major, March 1st, 1873; Brigade-Surgeon, November 27th, 1878; and Deputy Surgeon-General, August 23rd, 1882. Mr. Young served with the 2nd Battalion Rifle Brigade in the Crimea, and was present throughout the siege of Sebastopol (medal with clasp, and Turkish medal). He also served in medical charge of the 2nd Battalion 60th Rifles throughout the campaign of 1860 in China (medal with two clasps).

Surgeon-Major W. Jobson, M.D., has been granted retired pay with the rank of Brigade-Surgeon. He entered the service on March 31st, 1864; became Surgeon, March 1st, 1873; and Surgeon-Major, April 28th, 1876. Dr. Jobson has the medal for the New Zealand war in the years 1865-66, in which he served.

Surgeon-Major R. Turner, M.D., has also gone on retired pay with a step of honorary rank. Dr. Turner entered as Assistant-Surgeon, March 31st, 1864; became Surgeon, March 1st, 1873; and Surgeon-Major, April 28th, 1876. He does not appear to have been in any campaign.

Surgeon-Major John Murray, M.B., also has been granted retired pay with an honorary step. He entered the service on September 30th, 1864; became Surgeon, March 1st, 1863; and Surgeon-Major, September 30th, 1876. He also is not credited with any war service in the Army List.

Surgeon M. E. Fitzgerald, at present serving in the Madras Presidency, has been granted leave on medical certificate for three months.

Deputy Surgeon-General W. Grantt, M.B., died in London on the 15th ultimo. He entered the service June 9th, 1854; and retired, June 26th, 1879, with the rank of Deputy Surgeon-General. Mr. Grantt served in the Crimea from November 12th to December 28th, 1854, and from July 1st, 1855, including the siege and fall of Sebastopol, and attack of September 8th (medal with clasp, and Turkish medal). He also served throughout the campaign in the north of China in 1860, including the action of Sihho, and storming of Tangku (medal with clasp for the Taku Forts).

Surgeon F. S. Young, M.B., died on the 24th October last. He entered the service as a Surgeon on March 31st, 1874, and retired on half-pay January 12th, 1880.

Surgeon W. R. Browne, Resident Surgeon and Professor of Pathology at the Madras General Hospital, has been appointed medical officer at Utakamand.

INDIAN MEDICAL SERVICE.

SURGEON-MAJOR C. HATCHELL, Bengal Establishment, Civil Surgeon, has, on his return from furlough, been posted to the civil medical charge of Furruckabad.

Surgeon-Major W. Macrae, M.B., Madras Establishment, has been appointed Secretary and Statistical Officer to the Surgeon-General, H.M.S.'s Forces, Madras, *vice* Deputy Surgeon-General Bidie, M.B., C.I.E., who vacates the appointment on promotion.

The services of Surgeon-Major W. S. Fox, Madras Establishment, have been placed at the disposal of the Government of India for employment in the Military Accounts Department.

Surgeon A. J. O'Hara, Madras Establishment, who has been on sick-leave, is ordered to do general duty under the orders of the Deputy Surgeon-General, Hyderabad Subsidiary Force.

Surgeon H. Thomson, Madras Establishment, has passed the Lower Standard Test in Hindustani.

Surgeon S. C. Sarkies, Madras Establishment, Acting Civil Surgeon at Cannanore, has been granted privilege-leave for three months.

THE NAVY.

Mr. F. A. Saunders has been appointed Surgeon and Agent at Craie and Fifeness.

THE VOLUNTEERS.

THE Volunteer Medical Staff Corps is now formed, and at the first general parade, held on Saturday evening, December 6th, in Westminster Hall, nearly 300 officers and men, out of about 500 on the

books, appeared in uniform before Surgeon-General Hunter, and went through stretcher-drill. On this occasion, the parade state showed 13 officers, 18 sergeants, and 250 men, formed into six companies, thus: A Company, Charing Cross Hospital, with St. Mary's (attached); B, University College Hospital, with Middlesex (attached); C, London Hospital, with Guy's (attached); D, St. Bartholomew's Hospital; E, St. Thomas's Hospital; and F, Birkbeck, with the Polytechnic and Aldenham (attached). It is anticipated that the formation of this corps will be the means of furnishing a large trained reserve capable of affording efficient aid to the country in time of foreign war. It is notified in the orders of the corps, issued by the Adjutant, Surgeon J. Squire, M.D., that, besides the headquarters drills every week, there will be three special drills each year, at which every man of all ranks must be present, or obtain leave of absence in writing from the officer commanding his company.

INDIA AND THE COLONIES.

CHARGE-PAY TO MEDICAL OFFICERS IN INDIA.

SIR,—In the issue of the *BRITISH MEDICAL JOURNAL* for November 15th, reference is made to the withdrawal of charge-pay from the salary of surgeon-major in charge of station-hospitals in India. This is only a part of the price paid by medical officers for the unification scheme in that country. Formerly, every surgeon-major doing duty with a cavalry regiment there drew 90 rupees, and every surgeon in the same capacity 60 rupees per month as forage-allowance. The medical officers doing duty with artillery drew 60 and 30 rupees respectively. With the establishment of station-hospitals, this was altogether withdrawn in 1882; and the surgeon attached to the station-hospital of a mounted corps, for to all intents and purposes it remains still the regimental hospital, when ordered on parade or to march with the troops, had to mount himself, or trust his safety to the tender mercy of the most vicious trooper that the commanding officer chose to allow him.

It was hoped that the title "Medical Staff" would carry with it a grant of at least forage for one horse for all medical officers serving in India, where parade, prison, and sanitary duties require regular visits to considerable distances in a tropical climate. The recent decision of the India Office would seem to crush all such hopes; and the junior officers of the Medical Staff must content themselves with the pleasant duty of drilling the heterogeneous mass of low caste natives forming the Army Hospital Corps in India—a task which has been added to the many other exalted and onerous duties with which they have been saddled, on the splendid pay of 317 rupees a month, which is about 200 rupees less than a combatant officer of the same rank draws.—Yours faithfully,
MEDICAL STAFF IN INDIA.

SOUTH AFRICA.

MEDICINE IN REMOTE DISTRICTS.—The difficulty of providing skilled medical attendance in the sparsely populated parts of the Colonies is very great, and leads to the appearance of a large number of quite untrained persons, who travel through the country making use of all the arts of the quack to deceive the ignorant farmers.

In South Africa, there is a Medical Ordinance, a law which provides that none but the duly licensed shall practise as physicians in the Colony, under a penalty of £50. It would appear that the law is not quite in unison with public opinion in the Colony, for, according to the *Port Elizabeth Telegraph* and *Eastern Province Standard*, the Chief Justice, in the course of a recent trial, suggested that persons having "some medical skill" should be allowed to give their neighbours the benefit of such in "simple cases," and even make a charge for their services; this opinion, it is added, is pretty generally held. In the course of a well conceived criticism on this suggestion, our contemporary justly observes that, in the decision of what is, and what is not, a "simple case," medical skill of the highest kind is not unfrequently required. In cases of acute illness, prompt treatment is often of great importance, and much may be done by an intelligent application of remedies by an unskilled person; in districts where it is impossible speedily to obtain skilled medical assistance, it would be irrational and impracticable to endeavour to prevent a patient, suddenly seized with illness, from seeking the advice of some neighbour learned in simple remedies. Our contemporary seems to think that the existing law is too stringent to be effectual, and gives several instances tending to show that it operates rather to the advantage of the quack. It holds that unlicensed practice should be stringently suppressed, and that provision would be best made for residents in remote places by the issue, "under authority of Government, of plain simple instructions suitable for cases of accident or urgent illness, on much the same lines as the *Ship-Captains' Medical Guide*, published by the British Board of Trade. The book could be revised periodically, and anyone should be allowed to apply the advice it contains for the benefit of a sick neighbour, without fear of prosecution."

The comparison of the position of the isolated settler to that of the ship's captain appears to be quite sound, and helps towards a complete understanding of the matter. A law too stringent and indis-

criminating to be enforced is worse than none, because the knowledge that it exists gives to any pretender, bold enough to violate its provisions, an advantage in dealing with uneducated people, unable to discriminate for themselves between real and pretended skill.

OBITUARY.

DANIEL JOHN DUIGAN, C.B., M.D., M.R.C.P., F.R.C.S.I.

A CRIMEAN medical hero, Dr. Daniel John Duigan, C.B., Deputy Inspector-General of Hospitals and Fleets, on the retired list, died on December 2nd, being 63 years of age.

He belonged to an old and much respected family in Kilkenny, was educated in Dublin, and became F.R.C.S.I., M.D. of Aberdeen, and M.R.C.P.L. He entered the naval service in 1844, and was employed for a year at Haslar Hospital, after which he served for seven years in the Mediterranean in the *Hibernia* and *Queen* flagships of Admiral Sir William Parker, G.C.B. In December 1853 he was appointed to the *Royal George*, whence he was transferred, in April 1854, to the *Duke of Wellington*, and was engaged in the Baltic, in the operations at Bomarsund during the Russian war, being in all the most important boat-operations by night and day, as well as in the assaults on batteries, in which his conduct gained the approval of Sir H. Jones, the Commanding Engineer.

On returning to England, he was ordered to join the Naval Brigade before Sebastopol, and to take passage in the *Prince*. He escaped the dreadful fate of his fellow passengers, by his alacrity in proceeding ashore to his appointment immediately the *Prince* arrived at Balaklava on the eve of the total wreck and disappearance of the ship.

Through the terrible winter of 1854-55, he served in the camp of the Royal Naval Brigade as surgeon in charge of its second division hospital. On the return of spring, with the reopening of bombardments, he volunteered for service in the batteries and trenches, being the only officer of his rank on leaving England who was in that position, from that time until the fall of Sebastopol on September 8th, having been present in the batteries on the opening day of every one of the three great bombardments. On that of the fatal 10th of June, although suffering from a severe attack of camp-fever, he rose from his bed, and proceeded at dawn to his proper post in the Diamond battery under Sir William Peel's command, whose admiration he excited for his steady attention to the many sufferers during that eventful day, so far that his valuable services, being recorded by that most distinguished officer, were approved of by the commander of the Naval Brigade, Sir Stephen Lushington. His valour was equally conspicuous on the closing day of the siege; in fact, it may be said he was ever on the alert to be present at the point of danger, and was never behind time there. For these services, he obtained the Sebastopol medal with clasp, the fifth class of the order of the Medjidie, the Sardinian medal, and lastly, in 1881, the decoration of Companion of the Bath.

He subsequently served for two years in the *Vulture*, in the Mediterranean, from 1858 to 1860; in the *Mersey*, on the North American and West Indian Station, from 1860 to 1862; and at Jamaica naval hospital for five years (1862 to 1867).

He was employed with the Royal Marines at Deal from May 1867 to July 1870; and in the *Agincourt* from August 1872 to February 1874, when he was appointed to Devonport Dockyard, which appointment he held until he was placed on the retired list, with the honorary rank of Deputy Inspector-General, in April 1876.

Always exemplary for his kind, gentle, courteous demeanour to all around him, for his unswerving zeal and attention to his duties, and for his oft repeated acts of self-denial, he was esteemed by his nearest friends and companions in arms as a gentleman and officer in a classical sense truly "*factus ad unguem*."

He has left a widow, two sons, and a daughter, with family and friends, to lament his loss, who with one voice say of him, "*requiescat in pace*."

MEDICO-LEGAL AND MEDICO-ETHICAL.

CONSULTANTS AND FEES.

THE practitioner called in consultation by Mr. T.'s locum tenens in an urgent case says that he "refused to accept any fee from the patient, as he always made it a rule to pay the medical man whenever summoned to meet him at his own request, according to the *Code of Medical Ethics*. We have no knowledge of any code in which such a rule is laid down. The simple duty (as we view it) of the family medical attendant is to intimate, where necessary, to the patient or family what the consultant's fee is, and, as far as possible, to see that it is paid at the time; unless, for financial or other reasons, deferred payment be deemed expedient. As far as our own knowledge extends, there is no special profes-

sional obligation on the family medical man to do so out of his own pocket. In the case before us, the patient appears to have offered to pay the consultation-fee, which we consider he ought to have accepted.

COMMISSIONERS OF LUNACY.

A. C. R. The cost and length of time are very uncertain. The former will be slight if the property of the lunatic does not exceed £2,000. The latter altogether depends upon the convenience of the Masters in Lunacy. You had better consult your solicitor.

THE LAW OF MEDICAL PRACTICE.

H. R. Anyone who chooses can practise in this country, but he cannot recover fees unless registered. If an unregistered and unqualified person pretend to be, or takes or uses the name or title of Doctor, etc., or any name implying that he is registered, he is liable to a penalty. The General Council may, by special order, dispense with such of the provisions of the Medical Act as to them shall seem fit, in favour (among others) of persons who have held appointments as surgeons or assistant-surgeons of the East India Company. Accordingly, if such persons get a special order of this country in their favour, they may be registered in this country, although not qualified in the ordinary way; but, until they are registered, they are not qualified to sign certificates or hold medical appointments in this country. Mere length of private practice in India would not of itself be a qualification for registration.

PUBLIC HEALTH

AND

POOR-LAW MEDICAL SERVICES.

THE LAW AS RELATING TO THE ISSUE OF ORDERS FOR MIDWIFERY BY RELIEVING OFFICERS AND OVERSEERS, AND THE POWERS OF BOARDS OF GUARDIANS THEREON.

IN the JOURNAL of July 26th, 1884, we published a letter from Mr. Gorton Coombe, one of the district medical officers of the Maldon Union, who wrote, complaining that, having duly attended one Mrs. Crosby in labour, on the order of the assistant-overseer, he had sent in his claim in the usual way, but the guardians had refused payment of the fee, and asking for our advice on the subject. This we gave in a footnote to his letter.

We have recently received a further letter from Mr. Coombe, from which it appears that he attended the next meeting of the Board of Guardians, when the subject was discussed, and ultimately the clerk was directed to write to the Local Government Board on the point then raised. The subject is one of such importance to the interests of the sick poor, and their attendants, that we feel constrained to give the correspondence somewhat in detail. And first we would draw attention to some extracts from the clerk's letter to the Local Government Board, written at the request of the guardians.

"In accordance with the views expressed at the last Ipswich Conference, the guardians have for several months been striving to reduce, as much as possible, the medical relief; and one particular subject of attention has been that of midwifery-orders, which are now never granted but after full consideration by the whole Board.

"In this matter, however, the guardians have met with difficulty, because in the country districts the medical officers, who are generally the only medical men in the district, refuse to attend without an order; and then, at the last moment (and soon after, perhaps, the Board has refused an order), the relieving officer or overseers gives one."

The following case has recently occurred. James Crosby, aged 39, earns about 13s. a week; pays rent, £5 a year; furniture in cottage valued by the relieving officer at £10. His wife, aged 34, sometimes earns a little in fields; Alfred, aged 14, earns 6s.; James, aged 11, earns 3s.; William, aged 8, Ann, aged 7, Ellen, aged 4, Ada, aged 2, are all at school; fees, 2d. a week each.

On March 7th he applied for a midwifery order, and was refused by the board on the 18th.

On May 5th the assistant overseer for Tillingham gave the following order on loan:—

"Tillingham, May 8, 1884.—Sir.—Please attend Mrs. Crosby during her confinement. Edward North, Assistant Overseer. G. Coombe, Esq."

On May 13th the relieving officer reported the matter to the board, who refused to confirm the order.

In his quarterly account on June 24th, Mr. Coombe included his fee for 15s. for this confinement, and the board ordered the item to be struck out, and refused to pay it. The medical officer threatens to take proceedings against the board for the fee, and they (the board) are determined not to pay, unless compelled.

After this attempt to make this poor man, with four children absolutely dependent on him, pay for his wife's confinement out of his very limited resources, and the intimation that they would not pay unless compelled, this board proceeded as follows:—

"The guardians would be much obliged if you will give them your opinion on the following points:—1. In such cases as the above (we should hope there are not many such) are the guardians or their officers bound to give orders? The guardians object to pauperising a man by giving relief 'on loan,' if he is not legally entitled to it. Can relieving officers therefore safely refuse orders on these grounds? 2. Have the overseers or assistant overseers power to give orders for doctors in midwifery? 3. Generally to advise the guardians the best course for them to pursue to get rid of having to give such orders, when they consider they ought not to be granted."

In due course the following reply was sent.

"Local Government Board, Whitehall, October 4th, 1884. To A. C. Freeman, Esq., Clerk to the Maldon Union.—Sir,—I am directed by the Local Government Board to state that they have had under consideration the questions submitted in your letter of August 2nd last, as to the duties of the guardians of the Maldon Union as regards the granting of orders for medical relief in midwifery cases. With respect to your first question, I am to state that if, when the woman is ill, medical attendance is required, and cannot be procured without an order, the Board think that an order should be given by the relieving officer. It appears to the Board that the inability to obtain medical attendance shows that the case is one of destitution to this extent. This assumes that the husband has not money to pay the medical officer at once, or the means of immediately obtaining the money; if he has, the case would, of course, be different. If the relieving officer thinks the fee should be repaid, he can give the relief on loan if authorised to do so. As regards the duty of the guardians in the matter, the application for relief would be made to them, and come beforehand, and they may, as the Board think, very properly refuse the relief if they consider that the man can provide for the fee before the labour takes place, that is to say, the destitution will not exist, or ought not to do so, at the time of the labour. This, however, does not prevent its being incumbent on the relieving officer to deal with the case, according to the circumstances, when the time comes.

"With regard to the second question, the Board are of opinion that overseers can give a medical order in cases of sudden and urgent necessity. The Board need hardly remind the guardians that, when the relieving officers or the overseers give an order, in a case of sudden and urgent necessity, the order does not require confirmation by the guardians.

"As to the third question, the Board are not aware that they can give the guardians any further advice in reference to the matter.—I am, sir, yours obediently, S. B. PROVIS, Assistant Secretary."

The reply of the department, though couched in its usual ambiguous language, must, we should think, show the Maldon Board of Guardians that they misinterpreted the resolutions of the Ipswich Conference when, in their effort to stay pauperism by checking the abuse of medical relief, they commenced by refusing to give midwifery orders, and especially when they quote, in support of their views, their procedure in the case of the poor woman Crosby, who, on their own showing, was clearly entitled to assistance in her confinement.

There is, however, one point which has not been cleared up, and it is this. Has Mr. Gorton Coombe got his fee or not? and, if not, does he intend to take the case into the county court, where we have no hesitation in expressing our conviction that the guardians would be certainly cast in the debt and costs?

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 meetings of the Court of Examiners for that purpose on the 27th, 28th, and 29th ultimo, and the 1st instant, were reported to have acquitted themselves to the satisfaction of the Court, and, at a meeting of the Council on the 11th instant, were duly admitted Fellows of the College.

Messrs. E. T. Bishop, L.R.C.P. Ed., Manchester; A. R. Anderson, L.S.A., Bond Street, Holborn Square; W. H. H. Jessop, B.A. and M.B. Cantab., Harley Street, W.; G. L. Johnson, M.B. Cantab., Highfield Hill, Upper Norwood; H. B. Tait, L.R.C.P. Lond., Highbury Park; E. G. Colville, Eastbourne; J. L. Hewer, M.B. Lond., Highbury New Park; E. F. White, L.S.A., Deatry Road, Putney; T. H. Pounds, L.S.A., Snodland, near Rochester; J. Cahill, L.R.C.P. Lond., Albert Gate; W. C. Dendy, L.R.C.P. Lond., Forest Hill; A. Watson, M.D. Paris, Queensland; T. H. Morse, L.R.C.P. Ed., Norwich; W. C. Bull, Bromborough, Cheshire; R. J. B. Howard, L.R.C.P.

London, Montreal, Canada; and J. Wilson, M.D. Queen's University, Ireland, Monmouth, Derry.

Two other gentlemen passed, but their diplomas are retained until 25 years of age; and twelve candidates, having failed to acquit themselves to the satisfaction of the Court of Examiners, were referred to their professional studies for twelve months. Thirty candidates were examined, against seventeen the corresponding period last year. With this meeting, the examinations for the present session were brought to a close.

UNIVERSITY OF DURHAM.—The following were the successful candidates at the examinations in the Michaelmas Term, 1884.

Degree of Doctor in Medicine for Practitioners of Fifteen Years' Standing.—R. H. Coombs, L.R.C.P., M.R.C.S., L.S.A.; W. Y. Martin, F.R.C.S.
Degree of Doctor in Medicine (Thesis).—W. Robinson, M.B., M.S., M.R.C.S.; W. J. Sheppard, M.B.; T. C. Squire, M.B., M.S.
Second Examination for the Degree of Bachelor in Medicine.—F. M. Blackwood, M.R.C.S.; C. R. Davidson; S. A. Erulkar; A. Harper, M.R.C.S.; F. J. Malden; F. C. Meura, M.R.C.S., L.S.A.; G. P. Newbolt; R. Pollard; J. W. Richards; W. Slater; C. E. Tanner, M.R.C.S.; M. J. Wakefield; J. R. Watson, M.R.C.S.; W. H. Wigham.
Degree of Master in Surgery.—R. J. Irvine, M.B.

APOTHECARIES' HALL.—The following gentlemen passed their Examination in the Science and Practice of Medicine, and received certificates to practise, on Thursday, December 4th, 1884.

Barrett, William Amherst Henry, St. Thomas's Hospital.
Cory, Isaac Rising, St. Thomas's Hospital.
Gray, John Alfred, St. Bartholomew's Hospital.
Martin, Francis George Clifton, London Hospital.
Oldham, Montague Williams, Guy's Hospital.
Relton, Bernard, St. Thomas's Hospital.
Sydenham, George Francis, St. Bartholomew's Hospital.
Wade, Charles Henry, London Hospital.
Yeoman, Charles, St. Thomas's Hospital.

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

Constable, Samuel, Dublin and St. George's.
Soy, Edward, King's College.

MEDICAL VACANCIES.

The following vacancies are announced.

BIRMINGHAM AND MIDLAND EYE HOSPITAL.—House-Surgeon. Salary, £100 per annum. Applications to the Chairman of the Medical Committee, by January 5th.
BURY DISPENSARY HOSPITAL, Bury.—Junior House-Surgeon. Salary, £60 per annum. Applications to Mr. Henry Webb, Irwell Forge, Bury.
EAST RIDING ASYLUM, Beverley, Yorks.—Assistant Medical Officer. Salary £100 per annum. Application to M. D. Macleod, Medical Superintendent, by December 20th.
GLOUCESTERSHIRE.—County Analyst. Salary, £100 per annum. Applications to the Clerk of the Peace, Shire Hall, Gloucester, by December 13th.
HANTS COUNTY ASYLUM.—Medical Superintendent. Salary, £600 per annum. Applications by December 14th.
HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST.—Resident Clinical Assistant. Applications by December 13th.
LIVERPOOL DISPENSARIES.—Assistant House-Surgeon. Salary, £108 per annum. Applications by December 20th.
LONDON HOSPITAL. Surgical Registrar for 1885. Salary, £100 per annum. Applications by December 15th.
METROPOLITAN ASYLUMS BOARD.—Second Assistant Medical Officer. Salary, £120 per annum. Applications by December 13th.
MIDDLESEX HOSPITAL, W.—Additional Full Physician. Applications to the Secretary-Superintendent by December 20th.
NEWCASTLE-UPON-TYNE INFIRMARY.—House-Surgeon. Salary, £50 per annum. Applications to the Chairman of the House-Committee, by December 29th.
ORMSKIRK UNION.—Medical Officer of Health. Salary, £250 per annum. Applications by December 17th.
PORTLAND TOWN DISPENSARY, Henry Street, St. John's Wood, N.W.—House-Surgeon. Salary, £80 per annum. Applications to the Honorary Secretary, 10, Ormonde Terrace, Regent's Park, by December 13th.
PRESTON AND COUNTY OF LANCASTER ROYAL INFIRMARY.—Senior House-Surgeon. Salary, £100 per annum. Applications to R. F. Easterby, Secretary, Fishergate, Preston, by December 20th.
PRESTON AND COUNTY OF LANCASTER ROYAL INFIRMARY.—Junior House-Surgeon. Salary, £80 per annum. Applications to R. F. Easterby, Secretary, Fishergate, Preston, by December 20th.
QUEEN'S HOSPITAL, Birmingham.—Honorary Obstetric Officer. Applications by December 27th.
RADCLIFFE INFIRMARY, Oxford.—Honorary Physician. Applications by January 14th.
ROYAL ALEXANDRA HOSPITAL FOR SICK CHILDREN, Brighton.—House-Surgeon. Salary, £80 per annum. Applications by January 2nd.
SOUTH CHARITABLE INFIRMARY AND COUNTY HOSPITAL, Cork.—House-Surgeon and Apothecary. Salary, £100 per annum. Applications by December 13th.

ST. MARY'S HOSPITAL, Paddington, W.—Two Physicians. Applications by December 13th.

TORBAY HOSPITAL AND PROVIDENT DISPENSARY, Torquay.—Junior House-Surgeon and Dispenser. Salary, £90 per annum. Applications by December 22nd.

UNIVERSITY OF ADELAIDE, South Australia.—Elder Professor of Anatomy. Salary, £500 per annum. Applications to Sir Arthur Hlyth, K.C.M.G., Agent-General for South Australia, 8, Victoria Chambers, Westminster, S.W., by December 15th.

UNIVERSITY OF OXFORD.—Lecturer in Human Anatomy. Salary, £300. Applications to the Secretary of the Common University Fund, New College, Oxford, not later than February 1st, 1885.

VICTORIA HOSPITAL FOR CHILDREN, Queen's Road, Chelsea, S.W.—House-Surgeon. Salary, £50 per annum. Applications by December 13th.

MEDICAL APPOINTMENTS.

COSGRAVE, E. MacDowel, M.D., Ch.M., L.R.C.C.P., L.R.C.S.I., appointed to the Chair of Botany and Zoology in the Carmichael College of Medicine, Dublin.

FOX, W. Piercy, L.R.C.P., L.R.C.S.EI., appointed Resident Medical Officer to the Rochdale Infirmary, vice Herbert M. Gay, M.B., resigned.

FRANCIS, Lloyd, B.A., M.B.Oxon., M.R.C.S., appointed Assistant Medical Officer to the St. Andrew's Hospital for Mental Diseases, Northampton.

GILLIE, Leslie, M.D., appointed Physician to the Royal Academy of Music.

STRUGGELL, Walter T., M.R.C.S.Eng., L.S.A., appointed House-Surgeon to the Great Northern Central Hospital, Caledonian Road, vice F. A. Stokes, M.R.C.S., resigned.

BIRTHS, MARRIAGES, AND DEATHS.

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

BIRTHS.

CHEESEWRIGHT.—On December 4th, at Rawmarsh, Rotherham, the wife of Jno. F. Cheesewright, M.R.C.S.Eng., of a daughter.

HOWLETT.—On December 7th, at 4, Wright Street, Hull, the wife of E. H. Howlett, F.R.C.S., of a son.

PROTHERO.—On the 17th ult., at Enderley, Great Malvern, the wife of Dr. D. G. Prothero, of a daughter.

SELLERS.—On December 5th, at Brook House, Sileby, Loughborough, the wife of J. W. Sellers, L.R.C.S. and F., of a son.

MARRIAGE.

WILDE—MARTIN.—On December 6th, at St. John's, Crawley, Sussex, by the Rev. J. Barrett Lennard, M.A., Frederick Wilde, M.R.C.S., to Margaret Helen, second daughter of T. H. Martin, M.R.C.S., of Crawley.

DEATH.

LAY.—On the 4th inst., at Peasenhall, Suffolk, Joseph John Lay, M.D., M.R.C.S., L.S.A., aged 70 years.

HALF A TON OF SERUM FROM THE ABDOMINAL CAVITY.—Dr. D. Dickinson, Surgeon United States Navy, Mare Island, Cal., sends to the *New York Medical Record* the following note. "Nicholas G—, seaman, native of Greece, aged 23 years and 2 months, was admitted from the Naval Hospital, Yokohama, Japan, on August 15th, 1884, and discharged for transportation East, August 31st, 1884, as he was anxious to reach Greece before he should die. His hospital-ticket stated disease to be dilatatio cordis (et ascites). Within the past seventeen months, his abdomen has been aspirated sixty-nine times, withdrawing 944 pints (nearly half a ton) of serum."

MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

MONDAY.—Medical Society of London, 8.30 P.M. Sir Andrew Clark will read a paper on a Case of Relapsing Pneumonia in an Aged Man, with some Observations on the Nature of the Disease.—University of London, 5 P.M. The Brown Lectures, by Mr. Victor Horsley. The Thyroid Gland: its Relation to the Pathology of Myxodema and Cretinism; to the Surgical Treatment of Goitre, and to the General Nutrition of the Body.

TUESDAY.—Pathological Society of London, 8.30 P.M. Dr. Wilks: Intestinal Obstruction produced by Gall-Stones. Dr. Carrington: Thyroid from a Case of Exophthalmic Goitre. Mr. Rose and Mr. Salisbury: Gunshot Injury of the Brain. Dr. Hale White: The Sympathetic System from Four Cases of Diabetes: Patent Ductus Arteriosus (cardi). Abnormality of Lung (card). Mr. Godlee: Fracture of Skull in an Infant, followed by the Emission of Serous Fluid. Mr. Lane: Fracture of First Rib. Dr. Norman Moore: Haemorrhage into Substance of Liver. Mr. Peabert: A Case of Malignant Disease of the Spermatic Cord. Mr. D'Arcy Power (for Dr. Macdonald): A Pouched or Duplicate Bladder (card). Mr. G. R. Turner: A Drawing of Congenital Deformity of the Perineum (card).

WEDNESDAY.—Royal Meteorological Society, 7 P.M. Dr. Julius Hann: On the Reduction of Temperature-Means from Short Series of Observations to the Equivalents of Longer Periods. Mr. Charles Harding: The Diversity of Scales for Registering the Force of Wind. Rev. T. A. Preston: Report on the Phenological Observations for 1884.—University of London, 5 P.M. The Brown Lectures, by Mr. Victor Horsley. Simple Traumatic Fever.

FRIDAY.—University of London, 5 P.M. The Brown Lectures, by Mr. Victor Horsley. Urethral Fever.

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. 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.
- 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. S.; 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, Th., 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; Orthopedic, 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; Orthopedic, W., 2; Dental, Tu. S., 9; Th., 1.
- ST. MARY'S.**—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.
- ST. THOMAS'S.**—Medical and Surgical, daily, except Sat., 2; Obstetric, M. Th., 2; o.p., W., 1.30; Eye, M. Th., 2; o.p., daily, except Sat., 1.30; Ear, M., 12.30; Skin, W., 12.30; Throat, Tu. F., 1.30; 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., 10.30.
- WESTMINSTER.**—Medical and Surgical, daily, 1.30; Obstetric, Tu. F. S.; Eye, M. Th., 2.30; Ear, Tu. F., 9; Skin, Th., 1; Dental, W. S., 9.15.

OPERATION DAYS AT THE HOSPITALS.

- MONDAY**.....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 Orthopedic, 2 P.M.—Hospital for Women, 2 P.M.
- TUESDAY**.....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.—St. Thomas's (Ophthalmic Department), 4 P.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 Central, 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 Orthopedic, 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 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.
- 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.

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.

THE PREVENTION OF OPHTHALMIA NEONATORUM.

THE fatal effects of ophthalmia neonatorum on the eyes of infants can be seen in all our blind-asylums. Nearly half the inmates owe their condition to this disease. It becomes, therefore, the duty, not only of oculists, but of every practitioner of medicine, to do the utmost towards its prevention. Professor Crede has of late recommended simple measures, which tend with almost certainty to attain that end. The Crede method is as follows. Immediately after division of the umbilical cord, and carefully wiping off of the impurities of the skin, the infant is put in a bath. The eyes are cleanly washed with water, not of the bath, but in a separate vessel; the lids are scrupulously freed, by means of medicated cotton absorbent or borated—of blood, slime, or sneary substance. Before dressing, the eye-lids should be separated, and with a glass dropper a few drops of a 2 per cent. solution of nitrate of silver are instilled upon the cornea. Nothing else need be done in the next thirty-six hours. This is the prophylaxis practised first in the maternity of Leipzig, and now adopted in all the lying-in hospitals in the civilised world. It was found perfectly feasible in private practice, and is now almost universally adopted. Ophthalmia neonatorum has been reduced to a minimum, has, indeed, almost disappeared, in all public institutions, since the general acquiescence in the Crede plan of prevention.

TREATMENT OF CHOLERA.

SIR,—Mr. Meymott, in the JOURNAL of November 15th, speaks of "proof from facts" in treatment. Now, as the facts to which he refers are simply the observations of each practitioner in his own practice, I have the advantage of being able to refer to two distinct series of them: one relating to opium, and the other to chloral; whilst Mr. Meymott, it is evident, can appeal to one only, opium.

From 1877 to August, 1884, I treated all cases of choleric diarrhoea which came under my care either with opium or with morphia; and, during the summer of this year, in June or July (I forget the exact date), I reported a typical case of the disease treated successfully with morphia. On August 23rd of this year, I contrasted the treatment by morphia with that by chloral and belladonna, during an outbreak of choleric diarrhoea. Since that time, the facts which have been proved to my satisfaction in my own practice are, firstly, that chloral and belladonna do not cause any appreciable depression of the vascular system; secondly, that they relieve the vomiting much more rapidly and effectually than morphia; and, finally, that patients recover strength more rapidly under their administration than under that of morphia—no doubt, on account of the total absence of cardiac depression. That there is not the same danger attending their use, everyone must admit, because of the antidotal relation which one bears to the other.

With all deference to Mr. Meymott as an old and experienced practitioner, I would ask him if, behind the scepticism which has possessed him, there is not a consciousness of the duty of testing new remedies when grave dangers are averted to exist in the using of old ones; and of examining new theories when they bear upon everyday work; the more especially when both remedy and theory are backed by a little practice and fact?

In regard to the power of opium to allay irritation, I can only repeat that it is not as safe for that purpose as chloral. This Mr. Meymott makes no attempt at refuting, because he can as yet speak of opium only.

In conclusion, assured of the immense superiority of chloral over opium in the treatment of English cholera, I would urge Mr. Meymott to give it a trial. I am, sir, your obedient servant,
Clayton-le-Moors.

THE MEDICAL REGISTER.

SIR,—I am anxious to have an expression of opinion upon the following.

In July of this year, my attention was called to the fact that my name did not appear on the *Medical Register* for 1884. I wrote to the Branch Medical Registrar, without delay, for an explanation, and received in reply a statement to the effect that the omission or removal of my name could not be accounted for by him, and that he considered it must have been purely accidental. Enclosed along with this statement was a form, which I was directed to fill up and return to the Registrar, in order that my name might be restored, and appear on the *Register* for 1885. This was duly done by me, and I heard nothing further about the matter until a week ago, when it was intimated to me that authority was granted for the restoration of my name, and that a fee of 5s. was due on this account. I wrote in reply that my name having been removed, not from any fault of mine, but rather, as was admitted, through some negligence on the part of some official or officials concerned in making up the lists of names for the *Register*, and having been put to considerable trouble and inconvenience by its non-appearance on the *Register*, I demurred to pay a fee. In answer to this communication, I received a note stating that my case came under Section 14 of the Medical Acts, which directs that the sum of 5s. be payable for the restoration of a name to the *Register*, from whatever cause it may have been removed or omitted.

I enclose copies of letters received from the Registrar during the correspondence.—I am, yours truly,
Tillicoultry, N. B.

Our correspondent should lay the case before the Executive Committee of the Medical Council, and ask for a remission of the fee.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

THE following were the questions in Physiology and Anatomy submitted to the candidates at the recent half-yearly primary examination for the Fellowship.

- A. *Physiology*. (Three questions to be answered.) 1. Describe the development of the heart and blood-vessels. 2. Describe the nervous mechanism by which blood-pressure is regulated. Give the evidence on which your statements rest. 3. Give the histology of the macula lutea, and describe the blood-supply of the retina. 4. What are the average quantities of carbon and nitrogen eliminated by an adult in twenty-four hours? In what forms, and by what channels, are they excreted? What quantity of food would compensate this loss? Prove your statements by reference to the chemical composition of food, taking albumen as the type of proteins, stearine of the hydro-carbons, and starch of the carbohydrates.—B. *Anatomy*. (Three questions to be answered.) 1. The scalp and calvaria having been taken away, describe, in order, the parts which must be removed to expose the upper surface of the cerebellum. The portion of brain removed is to be described in detail. 2. Describe the dissection necessary to expose the surfaces of bone which enter into the formation of the temporal fossa. 3. Describe the vascular supply of the thyroid body, giving fully the course and relations of both arteries and veins. 4. Describe the ligaments which connect the vertebrae together. State what movements are permitted in each region of the spine, and the mechanism by which these movements are permitted in certain regions, and prevented or lessened in others.

INTERESTING-VERICAL FISTULA.

SIR.—The case of intestino-verical fistula described by "Quid Agam non Habeo," is a very serious one, and the chances are in the direction of a fatal termination, within twelve months, from dysentery, which will recur, and from catarrh of the bladder, which will become chronic, unless the patient be relieved by closing the abnormal opening. I have had two cases of the affection. Both were males, addicted to alcohol, and died inside a year. One, a retired valet, about 55 years of age, who consumed as much as a dozen of gin in a week, blamed the use of the catheter by a surgeon, for the relief of stricture, as the cause of the communication between the bowel and bladder. The other was an old gentleman, 80 years of age, who was confined to bed from chronic bronchitis for some months, in which he drank a bottle of sherry, and the fistula manifested itself.

In the former patient I endeavoured to stop the alcohol, and administered sulphur and senna confection every night, for the purpose of keeping the contents of the bowel semifluid, and saving the fistulous part from much distention. I had the rectum rinsed out after each stool with enemata of carbolic soap and tepid water, and had the catheter passed frequently, so as to keep the bladder from distending. Emollient drinks, Contréxville and purgative alkaline waters, and an enema of a drachm of hazeline with double quantity of water, to be retained after each stool, were used. The patient should be taught to perform all these functions. From this treatment an apparent cure resulted, which lasted three months. The urine became clear and healthy, and could be retained for six and eight hours, and ceased to pass through the rectum, and the feces did not enter the bladder until he returned to his old habit of gin-drinking, when I refused to look after him any longer. Thence he lived for about three months, when he died of catarrh of the bladder, having survived two attacks of dysentery, typical in the appearance and smell of the discharge.

In the second patient the bowels were kept moved by Hunyadi János water, and the dysentery, which occurred in this case also, was treated with ipécacuanha and morphia.

If the lady be not cured in a month, and do not continue well for a period of six months, the abdomen should be opened, the parts dissected and catgut ligatures applied. I would refer "Quid Agam non Habeo" to the treatment without operation of Fistula in Ano et Perinaeo, in the *Medical Press and Circular*, about July, 1883.—Yours truly,

JOHN ROCHIE, M.D., M.Ch., D.S.Sc., R.U.I.,
Ret. H. M.'s Indian Medical Service.

Mount Clarence, Kingstown.

QUANTITATIVE ESTIMATIONS OF UREA.

SIR.—I observe, in your issue of November 29th, an article on Dr. Squibb's instrument for estimating the quantity of urea. Some years ago my attention was directed to the subject, and I had an ureameter made, which is based on the same reaction named in the article, the evolution of nitrogen gas, the urea being estimated by this means. I have tested, since 1881, in the Glasgow Royal Infirmary, until I resigned the appointment, last spring, all the acute cases of pneumonia, rheumatism, nephritis, etc., by the ureameter. I intended to have published these, for the results were interesting. Unfortunately, owing to my illness, the nurses, thinking they were of no further use, destroyed the statistics bearing on these.

I have asked the instrument-maker, Mr. Motherwell, of Argyle Street, Glasgow, to forward you, with the necessary directions and re-agents, the ureameter of which I have spoken. I think you will find it quite as handy as Dr. Squibb's; and for its accuracy I have the high chemical authority of Professor Dittmar, of Anderson's College, Glasgow. Mention is made of this instrument in the last edition of my *Practice of Medicine*, and I understand from Mr. Motherwell, that he has sold a number to London men.—I am, yours faithfully,
M. D.

THE BLIND.

SIR.—Will any of your readers kindly tell me if they know of any home in which a blind man, formerly a cabdriver, may learn some trade, in order to obtain a living for himself, wife, and two children? He lost his eyesight after an operation. A few friends would be glad to pay something towards his maintenance if any suitable institution for grown-up people could be found.—I am, yours truly,

Kippax, Leeds.

J. ALLEN CARR.

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

Another L.K.Q.C.P.I.; Dr. George Henty, London; Mr. N. C. Collier, London; Dr. Albert Westland, London; Messrs. Hayward, Brothers, and Eckstein; Dr. W. Watson Campbell, Duns; Mr. A. J. Campbell, Newcastle-on-Tyne; Dr. Percy Frankland, London; Mr. C. Boyce, Maidstone; Dr. H. Campbell Pope, London; Mr. Edward East, London; Mr. H. A. Wickers, London; Dr. Morell Mackenzie, London; Mr. M. A. Datch, Crew; Dr. Mackey, Brighton; Mr. H. A. Fotherby, London; Mr. Timothy Holmes, London; Mr. G. F. Hodgson, Brighton; Dr. MacAlister, Cambridge; Mr. Simeon Snell, Sheffield; Mr. B. F. Stevens, London; Mr. Thomas Fletcher, Warrington; Dr. T. Cranston Charles, Streatham; Dr. H. Payne, Ashton-under-Lyne; Dr. J. A. Ross, Bournemouth; Mr. F. Treves, London; Messrs. J. Robinson and Son, Newcastle-on-Tyne; Dr. A. Tucker Wise, Maloja, Upper Engadine; Mr. Wright Wilson, Birmingham; Mr. A. G. Barford, Wokingham; Dr. B. Foster, Birmingham; Dr. Bedford Fenwick, London; Mr. C. Mackeson, London; Deputy Inspector-General Caddy, London; Mr. P. H. Kidd, York; Mr. W. A. Thomson, Amptill; Mr. F. H. Hodges, Leicester; Mr. W. P. Fox, Rochdale; Mr. J. Godfrey, Northampton; Dr. Eustace Firth, Norwich; Mr. George Thomson, Oldham; Our Birmingham Correspondent; Dr. Shuttleworth, Lancaster; Mr. Johnson Smith, Greenwich; Dr. A. Mantle, Stanley, Durham; Mr. W. Young, London; The Secretary of the Chelsea Hospital; Dr. Althaus, London; Dr. Walsham, London; Mr. E. Carnall, London; Dr. J. Murphy, Sunderland; Mr. H. W. Lawrence, Hadlow; Mr. D. C. Lloyd Owen, Birmingham; Dr. Neale, London; Dr. J. Thompson, London; Dr. Myers, London; Dr. F. P. Atkinson, Surbiton; Mr. L. Humphry, Cambridge; Mr. Lennox Browne, London; Mr. Sampson Camgee, Birmingham; Mr. de Vere Hunt, Bolton; Mr.

Wm. Gillibrand, Bolton-le-Moors; Mr. D. Bradley, Dudley; Dr. G. W. Crowe, Worcester; Our Aberdeen Correspondent; Mr. C. Boyce, Maidstone; Mr. H. Whiting, Haslemere; The Secretary of the Sanitary Assurance Association; Dr. A. Davidson, Liverpool; Mr. W. D. Buncombe, London; Mr. C. J. Bond, Leicester; Messrs. J. Marston and Co., Birmingham; Mr. C. H. Willey, Sheffield; Mr. J. W. Fry, Waterbury; Mr. D. G. Protheroe, Great Malvern; Mr. J. C. Nimmo, London; Dr. Collingridge, Greenwich; Mr. Wm. Lockhart, London; Dr. Dudfield, London; Dr. Roche, Kingstown; Mr. John Lane, Birkdale; Mr. W. T. Phillips, Andover; Dr. Charcot, Paris; Dr. Willoughby, London; Mr. A. Greenhalgh, London; Sir Andrew Clark, London; Mr. Albert Mare, London; Mr. A. W. Mayo Robson, Leeds; Mr. A. Thomson, Huntley; Dr. Samuel Wilks, London; Mr. C. Nairne, Lerwick, N.B.; Dr. John Malony, Dublin; Dr. B. W. Foster, Birmingham; Dr. Thomas Partridge, Stroud; Mr. W. Wheeler, Dublin; Dr. J. J. Kent, Fairclough; The Director-General of the Army Medical Department; Dr. Isambard Owen, London; Mr. William Rose, London; Dr. Lewis Shapter, Exeter; Mr. A. J. Richardson, London; Dr. J. J. Charles, Cork; Dr. Joseph Rogers, London; Dr. Saundby, Birmingham; Mr. H. W. Roberts, London; Our Berlin Correspondent; Our Edinburgh Correspondent; Dr. Styrap, Shrewsbury; Dr. B. S. Morison, London; Our Dublin Correspondent; Messrs. Griffin and Co., London; Mr. Ellam, Radcliffe-on-Trent; Dr. R. R. Gelston, Limerick; Mr. Reeves, London; Mr. Charles Sheather, London; Mr. Johnson Smith, Greenwich; The Lord Mayor, London; Dr. Flint, London; Mr. Headley Neale, Leicester; Mr. Priggin Teale, Leeds; Dr. C. B. Withesle, Saint Paul, Minnesota; Messrs. John Smith and Co., London; Dr. F. Tydd Heuston, Dublin; Miss M. S. Warner, London; Messrs. Davidson Brothers, London; Dr. G. E. Herman, London; Mr. W. T. Strugnell, London; Mr. J. C. R. Crewes, Truro; Mr. J. Martin, Bolton; Mr. C. J. Bond, Leicester; M.B., M.R.C.S.; Dr. E. Haughton, London; Mr. B. H. Dale, Devizes; Mr. Chesswright, Rotherham; The Secretary of the Hospitals Association; Mr. W. A. Thomson, Amptill; Mr. C. Dorington Batt, Witney; Mr. J. Godwin Shea, Chesterfield; Messrs. Newton and Co., London; Mr. J. W. Sellers, Loughborough; Dr. Cosgrave, Dublin; Our Correspondent at Wady Halfa; Mr. R. S. Bramwell, Carnforth; Mr. J. T. Hartill, Willenhall; Messrs. Willings, London; Mr. A. Hodges, London; Mr. W. F. Hearn, Sutton; Mr. Thomas Maben, Hawick; Mr. E. Lund, Manchester; Messrs. Hodson and Carr, London; Mr. W. J. Dodds, Montrose; Mr. H. F. Clarke, London; Mr. J. Hyde, Mossley; J. C. H.; Mr. Berry, Wigan; Mr. F. W. D. MacEachen, Bletchley; Our Manchester Correspondent; Our Glasgow Correspondent; Mr. C. H. Hough, Derby; Messrs. Stephens, Liverpool; Dr. T. Withers, Combe, co. Down; Our Belfast Correspondent; Dr. Ward Cousins, Southsea; Mr. John Wood, London; Mr. Charles Stewart, London, etc.

BOOKS, ETC., RECEIVED.

- A Wonder Book for Boys and Girls. By Nathaniel Hawthorne. London: J. C. Nimmo. 1884.
Children of All Nations; Their Homes, Their Schools, Their Playgrounds. London: Cassell and Co. 1884.
Stuff and Nonsense. By A. B. Frost. London: J. C. Nimmo. 1884.
Obstetrics. By P. Cazeaux. Re-arranged and Revised by S. Tarnier. Seventh Edition. Edited by R. J. Hess, M.D. London: H. K. Lewis. 1884.
Health Lectures. Manchester: J. Heywood. 1885.
Eye-Diseases of Children. By Surgeon G. C. Hall. Printed at Pioneer Press, Allahabad. London: H. K. Lewis. 1884.
The New Chemistry. By J. P. Cooke, LL.D. London: Kegan Paul and Co. 1884.
Harvelan Oration. By J. Russell Reynolds, M.D., F.R.S., F.R.C.P. London: J. and A. Churchill. 1884.
Transactions of the Pathological Society of London. Vol. XXXV. London: Smith, Elder and Co. 1884.

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