

tried for the consolidation of the corporations. He then spoke of the conjoined scheme, and asked if a conjunction of the two Colleges with the Apothecaries' Company would have added to the utility, the stability, or the dignity of that union. Mr. Marshall also thought the Council would be travelling out of its lines if they attempted to give what was really a legal opinion in a very difficult matter.—Dr. HUMPHRY said that, in the case of a body which had been recognised by law as giving a qualification in one branch of the profession only, it would be a very serious position for the Council to recognise the giving of another qualification by that same body. If it were done, it should be done under the responsibility of the law, and not of that Council.—Dr. QUAIN thought the best reply that could be sent would be to the effect that the licentiates of the Society of Apothecaries were competent to practise medicine, surgery, and midwifery.—Dr. STRUTHERS said he had no sympathy with the Apothecaries' Society. It had lost its opportunity of becoming the Pharmaceutical Society of the country, and that was its only chance of life. He should vote against Mr. Simon's amendment. After some further discussion, the amendment was put to the Council, and lost by fifteen votes to three.

Mr. MACNAMARA then moved, and Mr. COLLINS seconded, as an amendment to Dr. Watson's motion: "That this Council, in accordance with widely diffused public and professional feeling, having devoted its best attention to consolidating professional examinations, feel a difficulty in recommending the Local Government Board to accept as a complete qualification in medicine and surgery the licence of any single corporation not hitherto legally possessed of such right."

After a short discussion, the amendment was negatived.

Another amendment was then moved by Mr. TEALE, and seconded by Dr. STRUTHERS: "That, in answer to the letter from the Local Government Board, the Council beg leave to state that they have been informed that the Apothecaries' Society of London have added the subject of surgery to their examinations; but whether the Society can thereby render their licence a legal qualification is a legal question on which the Council is not competent to pronounce an opinion."—Mr. BRADFORD said, with reference to what had been stated about the examinations at the Society of Apothecaries, he might state that two very eminent members of the Royal College of Surgeons had been selected for the duty of examining for the qualification of surgery, and were carrying on that examination in a thoroughly efficient and proper manner.

Dr. STORRAR asked whether Mr. Teale would be willing to substitute for his amendment another, declaring that the Local Government Board be informed that the Society of Apothecaries' certificate has hitherto been considered by the Council to be a qualification in medicine only, and that the fresh point involves matter on which they must decline to pronounce an opinion, as they regard it as a purely legal question.

Mr. TEALE said he was quite willing to withdraw his amendment in favour of Dr. Storrar's. By leave of the Council, Dr. Storrar's amendment, seconded by Mr. Marshall, was then substituted, and, on being put to the Council, was agreed to. It was also put as a substantive motion, and agreed to.

Elementary Mechanics.—On the motion of Mr. MACNAMARA, seconded by Dr. HERON WATSON, it was resolved: "That the operation of Resolution 8, passed on October 15th, 1884, namely, 'Elementary mechanics to be passed before registration,' be referred to the several Branch Councils to inquire and report to the General Medical Council, at its next meeting, upon the feasibility of enforcing at the present time this regulation in the several divisions of the kingdom."

Erasure-Lists.—It was moved by Mr. COLLINS, and seconded by Mr. MARSHALL: "That names which, after erasure from the *Medical Register*, have at some subsequent time been by order of the Council restored to the *Register*, and also the names of those of whose death sufficient evidence has been obtained, be not in future included in the *Erasure-Lists* issued by the Council, and that the title of future *Erasure-Lists* be adapted to this intention."—Dr. WATSON asked by what means sufficient evidence as to death might be obtained.—The REGISTRAR said there was practically no method of ascertaining whether a person had died, and, for anything the Registrar knew, the first twenty in the list might be dead. The resolution was agreed to.

This concluded the Session of the Council.

DR. DUNCAN HILSTON, having been promoted to Deputy Inspector-General of Hospitals and Fleets, has been presented with a handsomely enamelled travelling-clock by the officers and staff of the Royal Hospital, Yarmouth, of which he had been in charge for eight years.

ASSOCIATION INTELLIGENCE.

NOTICE OF QUARTERLY MEETINGS FOR 1886. ELECTION OF MEMBERS.

ANY qualified medical practitioner, not disqualified by any by-law of the Association, who shall be recommended as eligible by any three members, may be elected a member by the Council or by any recognised Branch Council.

Meetings of the Council will be held on January 20th, April 14th, July 14th, and October 20th, 1886. Candidates for election by the Council of the Association must send in their forms of application to the General Secretary, not later than twenty-one days before each meeting, namely, December 30th, 1885, and March 25th, June 24th, and September 30th, 1886.

Candidates seeking election by a Branch Council should apply to the secretary of the Branch. No member can be elected by a Branch Council, unless his name has been inserted in the circular summoning the meeting at which he seeks election.

FRANCIS FOWKE, General Secretary.

COLLECTIVE INVESTIGATION OF DISEASE.

THE inquiry on CHOREA is now closed, the tabulation of the returns being completed.

Inquiries are in progress on the subjects of

DIPHTHERIA, ACUTE RHEUMATISM,
OLD AGE, CANCER OF THE BREAST.

Memoranda on the above, and forms for recording individual cases, may be had on application.

It is requested that returns on Acute Rheumatism be sent in as early a date as possible, as the printing of the Tables is in progress.

The greater part of the "Old Age" form may be filled in by a non-medical person, if necessary.

The Committee are also glad to receive reports of cases of the following conditions, memoranda and forms for which are prepared. PAROXYSMAL HEMOGLOBINURIA, ALBUMINURIA IN THE APPARENTLY HEALTHY, SLEEP-WALKING, ACUTE GOUT. Returns on ACUTE PNEUMONIA are still received.

The "Sleep-walking" form may be filled in by a non-medical person if necessary.

PUERPERAL PYREXIA.—The Committee will be glad to receive reports of cases illustrative of the points mentioned in the JOURNAL of January 31st, 1885 (p. 249). Separate copies of the article and questions alluded to will be forwarded on application.

THE CONNECTION OF DISEASE WITH HABITS OF INTEMPERANCE.—A schedule of inquiry upon this subject has been prepared by the Committee, and was issued with the JOURNAL of May 9th. Replies are requested on the schedule issued with the JOURNAL of May 9th. Additional copies of the schedule may be had at once on application.

THE ETIOLOGY OF PHTHISIS.—Continuation of inquiry. The Committee will be glad to receive the names of gentlemen willing to engage in joint investigation of any of the following points in relation to the origin of cases of Phthisis;—(a) The influence of residence and occupation; (b) the previous state of the patients' thoracic organs and general health; (c) heredity and communication. Full particulars will be sent on application.

Application for forms, memoranda, or further information, may be made to any of the Honorary Local Secretaries, or to the Secretary of the Collective Investigation Committee, 161a, Strand, W.C.

BRANCH MEETINGS TO BE HELD.

SOUTH-EASTERN BRANCH: WEST KENT DISTRICT.—A meeting of the above District will be held at St. Bartholomew's Hospital, Chatham, on Friday, December 18th, at 3 P.M. Gentlemen who propose to read papers, etc., are requested to signify their intention to the Honorary Secretary, A. W. Nankivell, Esq., St. Bartholomew's Hospital, Chatham, not later than November 24th.—A. W. NANKIVELL, Honorary Secretary, November 2nd, 1885.

SOUTH INDIAN BRANCH.—Meetings are held in the Medical College, Madras, on the first Friday in the month, at 4.30 P.M. Gentlemen desirous of reading papers or exhibiting specimens are requested to communicate with the Honorary Secretary.—J. MAITLAND, M.B., Honorary Secretary, Madras.

LANCASHIRE AND CHESHIRE BRANCH.—An intermediate meeting will be held in Ashton-under-Lyne, on Wednesday, December 16th. Gentlemen wishing to show cases, or read papers, will oblige by communicating with the Honorary Secretary, without delay.—CHARLES EDWARD GLASCOTT, M.D., Honorary Secretary, 23, St. John Street, Manchester.

STAFFORDSHIRE BRANCH: ANNUAL MEETING.

THE twelfth annual meeting of this Branch was held on Thursday, October 29th, at the Bell Medical Library, Wolverhampton. Dr. E. T. TYLECOTE introduced the President-elect, Mr. J. H. HARTILL, who took the chair. Twenty-one members were present. Dr. Sawyer, the President of the Birmingham and Midland Counties Branch; Mr. Harries, the President of the Shropshire and Mid Wales Branch; and Dr. Pike, the President of the Worcester Branch, were invited as guests.

Vote of Thanks.—Dr. LYCETT proposed: "That the best thanks be given to the retiring President, Dr. E. T. Tylecote, for his services during the past year." This was seconded by Mr. ACTON, and carried unanimously.

Report of Council.—Mr. VINCENT JACKSON read the annual report, as follows.

"Your Council have to report that three ordinary general meetings have been held during the past year. The meeting at Stoke was exceptionally interesting, not only on account of the great importance of the subject discussed, namely, 'The Radical Cure of Hernia,' but also because an opportunity was afforded of practically demonstrating the cure by the exhibition of numerous successful cases, in which the performance of the operation had restored to health and comfort individuals who would otherwise have been obliged to lead almost useless and certainly miserable lives, and whose existence would have been one prolonged effort to guard against the risks of acute strangulation, or the series of small ills which enormous herniæ always produce. The able paper of Mr. Spanton, and the speeches of Mr. Mitchell Banks, Mr. Folker, Mr. Vincent Jackson, Mr. Alcock, Mr. F. Marsh, and Dr. Eddowes, convincingly proved that the operative treatment for the radical cure of hernia is not only a justifiable, but an established and successful, surgical procedure.

"At the general meeting at Stafford, Dr. Reid read a valuable report upon the employment of Cascara Sagrada as a therapeutic agent, and Dr. Isambard Owen opened a discussion upon Chorea and Acute Rheumatism.

"At the general meeting at Wolverhampton, Mr. Folker read the notes of an instructive Case of Strangulated Umbilical Hernia, and Mr. Vose Solomon made a most valuable communication upon 'The Prevention of Blindness from Infantile Purulent Ophthalmia among the Indigent Poor.'

"The following members, in addition to the above mentioned, have, by their contributions at the meetings, earned the thanks of the Council: Dr. McAlldowie, Dr. Hatton, Dr. Davidson, Dr. Crutchley, Dr. W. G. Lowe, Mr. J. H. Hartill, Dr. C. Smith, Dr. Balthazar Foster, Mr. J. G. U. West, Dr. E. T. Tylecote, Dr. Totherick, Dr. Lycett, and Mr. Clendinnen.

"In the month of August, the President received many of the members at a garden party. The weather was propitious, and the enjoyment of the visit, as well as the kindness and hospitality of the host and hostess, will not soon be forgotten. Your Council desire cordially to thank Dr. E. T. Tylecote and Mrs. Tylecote for their pleasant and successful entertainment.

"The number of members is 120."

The adoption of the report was moved by Mr. CROCKETT, and seconded by Mr. PHILLIPS.

President's Address.—The PRESIDENT gave an address, the subject of which was, "Sixteen Years in General Practice: Thoughts on the Past, Suggestions for the Future." He referred more particularly to the progress made in the science of preserving health since the Public Health Act of 1872 became law; pointed out how recent Acts of Parliament had led to frequent underground systematic supervision of mines, and had thereby diminished the frequency and severity of accidents to colliers; showed how, by inadvertence, another Act, designed to abolish the part payment of wages by goods, had destroyed the organisation by which miners, when injured, received surgical aid, and had driven them to the workhouses and hospitals for help; spoke in broad outline on certain distinct features which had marked the progress of curative surgery and medicine; referred to the position which medical men ought to occupy and contend for with regard to the lunacy-laws; advocated the payment of medical men for the examination of every lunatic or supposed lunatic, whether sent to an asylum or not; summarised the results of the vaccination of 12,000 persons, and of the part he had taken in 1,800 confinements, including most of the difficult cases of 2,000 other confinements; and, lastly, expressed his views on the means to be adopted to encourage a reconstitution of medical examining boards and examinations for entrance into the profession. He suggested an extension of the laws relating to water-companies, so as to enforce constant pressure within the mains.

Sanitary authorities should not be allowed to pass plans for the erection of new houses in which water-closets were to be fixed until provision had been made for the waste-pipes to pass down the outside of the walls, and for the continuance of them to a point at least as high as the roof. Great care was required in the condemnation of meat supposed to be diseased, as thousands of sheep which suffered from fluke in the liver had been eaten without any injurious effects. Government should compel every retailer to put a label on tinned foods, showing how, to a great extent, purchasers could judge of the condition of the food purchased, as by bulging outwards of the top or bottom of the tin. The informant, on compulsion, of contagious disease should not be the medical man. The Education Act, by multiplying schools, had multiplied centres of infection; and it was desirable to keep infected persons from school for at least six weeks, as well as all children living in the infected house. Every town of importance should have its public mortuary. There was much need for an effective organisation to secure a certainty of speedy surgical assistance to miners. The establishment of private hospitals in Birmingham for the surgical treatment of a certain class of cases was a distinct gain to the community. Great advance had recently been made towards the radical cure of hernia. Medical men in the near future must insist on the lunacy-laws being altered, so that every certifying surgeon should be deemed to express his own opinion only, and neither civil nor criminal liability should be incurred by the expression of it. The closure of licensed houses from 10 P.M. to 10 A.M., and all Sunday, except for out-door trade, would, in most towns, be a boon to a large section of the people. Englishmen should, in England, be granted equal facilities with Scotchmen or Irishmen to obtain degrees in medicine. Some of the anomalous regulations of examining boards should be expunged. Medical men should press for "such alterations as would render the University of London more popular and more able to move with the times," whilst still desiring to maintain, in its most essential parts, "the standard and scientific character of its medical degrees;" and that, failing this, they should give all the assistance in their power to some other corporate body or bodies to organise into one harmonious whole the various educational institutions of London.—On the motion of Dr. TOTHERICK, seconded by Mr. SPANTON, an unanimous vote of thanks was given to Mr. J. Hartill for his address.

Financial Statement.—Mr. J. G. U. WEST read the statement of accounts for the past year, which showed a balance of £32 1s.

Next Annual Meeting.—Dr. C. SMITH proposed, and Mr. CLARE seconded, that the next annual meeting be held at Burton-on-Trent.

Officers and Council for 1885-86.—The following were elected: *President-Elect:* Dr. W. G. Lowe. *Vice-Presidents:* Dr. C. Orton; Dr. E. T. Tylecote. *General Secretary:* Mr. Vincent Jackson. *Financial Secretary:* Mr. J. G. U. West. *Auditor:* Mr. Folker. *Representative in the Council of the Association:* Mr. Vincent Jackson. *Representatives upon the Parliamentary Bills Committee of the Association:* Dr. C. Orton, Mr. W. D. Spanton. *Council:* Dr. Arldridge, Mr. Bolders, Dr. Reid, Mr. J. J. Ritchie, Mr. Gray, Mr. H. M. Morgan, Dr. McAlldowie, Dr. Totherick, Dr. Lycett, Dr. Elkington, Mr. J. W. Wolfenden, Dr. J. H. Wynne.

Votes of Thanks to the Auditor, Secretaries, Representative in the Council of the Association, and Representatives upon the Parliamentary Bills Committee of the Association, were proposed, seconded, and passed.

Dinner.—As guests, in addition to those previously mentioned, the Mayor of Wolverhampton (J. Annan, Esq.) and the Chairman of the Willenhall Local Board of Health (J. C. Tildesley, Esq.) were invited. A most agreeable evening was spent.

SOUTHERN BRANCH: ISLE OF WIGHT DISTRICT.

An ordinary meeting of this District was held at the Royal Isle of Wight Infirmary, on November 3rd; Dr. BEATON, President, in the chair. There were present eleven members and three visitors.

President-elect.—The Secretary read a letter from Mr. Lloyd, apologising for absence, and accepting the office of President-elect.

Next Meeting.—Ventnor was proposed as the next place of meeting. The Secretary reported that Dr. Isambard Owen, the Secretary of the Collective Investigation Committee, had promised to initiate a discussion on the Etiology of Phthisis at that meeting.

Death of Mr. Beckingsale.—The Secretary reported the death of a member, Mr. Beckingsale, of Newport. Mr. BARRÖW moved, and Dr. WATERWORTH seconded, a vote of condolence.

Case of Pleurisy.—Dr. BUCK read notes and showed a case of pleurisy, in which the heart was much displaced towards the right side. Drainage was carried out by means of Southey's cannula. The patient had made an excellent and rapid recovery.—A discussion ensued.

Treatment of Hectic Fever.—Dr. ROBERT ROBERTSON opened a discussion on this subject. He said that hectic fever was always found associated with progressive morbid action in some organ or tissue of the body, but explanations of the mode of causation of the increased body-temperature were so far only speculative. From its effects on the patient, and from its tendency to continue and to become aggravated, active treatment of the symptom was necessitated. Cases divided themselves sharply into two classes in this respect: 1, those in which local interference with the diseased structures was practicable; 2, those where local interference was impracticable or useless, and treatment of the general condition had to be relied on. The effect of operative treatment in the former class was aptly illustrated by charts of renal abscess and empyema shown, the pyrexia disappearing speedily after operation. In the latter class, the measures available were proper regulation of air-supply, of exercise, and of diet, aided by antipyretic medicinal remedies; and, of such, salicylate of soda in cases of moderate hectic range, and antipyrin for more severe cases, seemed at present commendable. The drawback of the salicylate treatment was the intolerance of the remedy by the stomach in certain cases, and of the antipyrin the necessity for increasing doses to maintain the effect, and the severe and irritable rash which sometimes followed its use.—A discussion followed the reading of the paper.

The members were afterwards invited to dine with Mr. Barrow at his residence, Southlands.

SPECIAL CORRESPONDENCE.

PARIS.

[FROM OUR OWN CORRESPONDENT.]

Alcoholism, and How to Control it.—*Prophylactic against Pulmonary Phthisis.*—*The Sanatorium at Argeles.*—*An Epidemic of Rabies in the Department of Var.*—*Bromhydrate of Pelletierine.*—*Lesions of Peripheral Nerves in Typhoid Fever.*—*Cranial Surgery.*

At the last meeting of the Académie de Médecine, M. Lancereaux read statistics on alcoholism which he had collected in hospitals in the interval from 1860 to 1875, a period of fifteen years. They show that the patients addicted to excessive drinking admitted into hospitals are mostly people from the provinces where pure brandy is largely consumed. M. Lancereaux divides alcoholic drinks under three headings: Cider and beer; wine and wine brandy; brandy extracted from cereals, potatoes, and liquors made from different extracted principles. Cider, according to M. Lancereaux, is a healthy drink. Even when it is indulged in to excess, it produces only transitory drunkenness, not followed by any pathological accidents. The consumption of beer also increases; and M. Lancereaux says that this is not to be regretted. Beer is not an unhealthy drink; it encourages obesity and slight disturbance of the digestive organs, but does not produce more serious troubles. Wine contains more alcohol, and produces various ill effects. There is rapid stimulation of the nervous system, and the excess absorbed determines organic lesions of nerve-centres and liver. Alcoholism resulting from over-indulgence in wine, according to M. Lancereaux, is favourable to the development of tuberculous meningitis. He has had several opportunities of observing this disease in very young children, to whom wine was habitually given. Children of vinous drunkards do not inherit the vice, but this misfortune overtakes those whose parents indulge in alcoholic drinks manufactured from cereals and potatoes. These drinks determine cerebral and vaso-motor disturbance, and impair the intellectual faculties. Succeeding generations degenerate, and acute diseases, under such circumstances, become intensified. Liquors manufactured with these alcohols and different essences determine similar conditions, and especially an exaggerated reflex excitability of the sole of the foot, and on each side of the body where the nerves emerge. The descendants of these drunkards have an unconquerable craving for alcohol; they are frequently idiots, and, after the second or third generations, they become shorter in stature. Rigorous investigations made in France and Switzerland, where these manufactured alcoholic drinks are most largely consumed, demonstrate the accuracy of these details. M. Lancereaux said that Government will be guilty of a grave fault if it do not legislate for the present state of things with regard to alcoholism. In a country where manhood suffrage exists, the enforcement of regulations to prevent alcoholism is always neglected. M. Lancereaux suggests that all drinks that are harmless, or only slightly dangerous, should be allowed to be sold without restraint, provided they are not falsified and are of good

quality. Under this class he includes cider, wine, and beer. He also suggests that the manufacture of cognac from cereals, beetroot, and potatoes, should be under strict superintendence; that rewards should be given for the discovery of means of improving these liquors either by removing from them injurious substances or by transforming them into others less dangerous, and thus rendering their effects similar to those of vinous alcohols. He also desires that brandy should be burdened by a heavy tax, according to the place where it is sold; that the sale of this drink should be limited; that the sellers should be liable to severe rules and penalties; and that only those who are well known for their good conduct should be granted a licence. All responsible drunkards, according to M. Lancereaux's code, should be punished; houses of refuge should be provided for those who cannot control their habits.

Ten years ago, Dr. Douillard pointed out that the valley of Argelès was remarkably well suited for a sanatorium, where children of parents who had succumbed to phthisis should be treated. A few years later, the town of Argelès offered a building-site for this purpose. The sanatorium now receives, yearly, twenty children, between the ages of 5 and 12, all orphans of phthisical parents, and presenting symptoms of the same disease; they all improve in condition. The sanatorium is situated at an altitude of 450 mètres, on the highest ground in Argelès. The temperature resembles that of Amélie-les-Bains, but it is less exposed to the east and west winds. The hygrometric condition is excellent. The climate is most suitable to the torpid forms of tuberculosis.

M. Leblanc read, before the Académie de Médecine, the report drawn up by the commission appointed to judge of Dr. Chassinat's book on an epidemic of rabies, which prevailed in the department of the Var, from October, 1884, to April, 1885. Fifty dogs were attacked with hydrophobia, and four people died from being bitten: one at Toulon, one at Roquebrune, two at Hyères. A young man was bitten in the hand, on the same day as his brother, and their servant was bitten on the face. They were treated in the same way; but the one bitten on the hand died, and the two others recovered. M. Leblanc recommends that the mayor and municipal agents should be obliged to enforce the law enacted July 21st, 1881. The prefect allowed six months to elapse before he took this step in an instance where it was necessary; in other departments the same dangerous negligence exists. In Paris, also, the prefect of police does not enforce the laws. Thousands of dogs wander about the streets of Paris, and constitute a source of danger to human life, and an element of contagion for the canine race. The report furnishes statistics on hydropobia, from January, 1880, until October, 1885. These show that it greatly increases at periods, when the prefectural laws are negligently applied. M. Leblanc drew attention to the fact that Berlin has been entirely free from hydrophobia during the last twelve months, and the Duchy of Baden since the last two years. These two instances prove that when the police regulations are strictly enforced, hydrophobia disappears.

M. Galezowski read a paper before the Académie de Médecine on the action of pelletierine on the motor nerves of the eye. His researches are based on the ocular disturbance which occurs in subjects who absorb pelletierine; they are affected with diplopia. The observance of this fact induced M. Galezowski to prescribe pelletierine when there is paralysis of the third and sixth pairs. Iodide of potassium and blisters have failed where pelletierine has cured; the preparation used is syrup of pelletierine, 1 gramme per 120 parts of syrup. From three to six doses were administered. Unfortunately, this substance is excessively dear. M. Galezowski hopes to meet this difficulty by administering pelletierine in subcutaneous injections.

MM. Vaillard and Pitres have on former occasions demonstrated that, in typhoid fever, peripheral nerves may present diffused lesions resembling parenchymatous neuritis, breaking up of the myelone, proliferation of the nuclei of the interannular segments, and more or less complete atrophy of the nerve-fibres. These alterations have been observed in three patients dead from typhoid fever; they all died without presenting any symptoms of nerve-lesions. At the necropsy of one, the brain-meninges, spinal cord, and the roots of the spinal nerves, were healthy. The musculo-cutaneous nerve, the internal brachial, and the terminal branches given off by the ulnar nerve, presented lesions somewhat limited in superficial area, but extending deeply into the substance of the nerve. At the necropsy of the two others, the nerves of those of the lower limbs, and some of one of the upper limbs, presented serious and extended lesions. In a fourth subject, the superficial nerves were attacked with parenchymatous neuritis.

At the Surgical Society, M. Gillette mentioned the case of a patient who, subsequently to erysipelas and repeated abscesses of the scalp,

The 2 fatal cases of diphtheria showed a considerable decline from recent weekly numbers. The death-rate from diseases of the respiratory organs in these Scotch towns was equal to 5.2 per 1,000, against 5.0 in London. As many as 69, or 14.3 per cent., of the 480 deaths registered during the week in these Scotch towns, were uncertified.

During the week ending Saturday, November 14th, 800 births and 500 deaths were registered in the eight principal Scotch towns, having an estimated population of 1,289,170 persons. The annual rate of mortality, which had been 21.2 and 19.7 per 1,000 in the two preceding weeks, rose again to 20.5, and exceeded by 1.5 per 1,000 the average rate for the same period in the twenty-eight large English towns. Among these Scotch towns, the rate was equal to 10.0 in Perth, 11.4 in Leith, 16.3 in Dundee, 17.0 in Edinburgh, 18.4 in Aberdeen, 23.3 in Greenock, 24.3 in Glasgow, and 29.0 in Paisley. The 500 deaths registered during the week included 44 which were referred to the principal zymotic diseases, against 55 and 61 in the two preceding weeks; of these, 18 resulted from diarrhoea, 12 from scarlet fever, 10 from whooping-cough, 6 from diphtheria, 2 from measles, 1 from "fever," and not 1 from small-pox. These 44 deaths were equal to an annual rate of 1.8 per 1,000, which corresponded with the average zymotic death-rate during the same period in the twenty-eight large English towns. The highest zymotic death-rates were recorded in Greenock, Glasgow, and Paisley. The 13 deaths from diarrhoea showed a decline of 4 from the number in the preceding week, and were considerably below the number returned in the corresponding period of last year. The fatal cases of scarlet fever, which had risen from 7 to 17 in the three previous weeks, declined to 12, of which 9 occurred in Glasgow. The 10 deaths from whooping-cough corresponded with the number in the preceding week, and included 9 in Glasgow. The fatal cases of diphtheria, which had been 9 and 2 in the two previous weeks, rose to 6 during the week, of which 2 occurred in Glasgow, and 2 in Edinburgh. Of the 2 deaths from measles, 1 was returned in Paisley, and 1 in Glasgow. The mortality from diseases of the respiratory organs in these Scotch towns was equal to 5.4 per 1,000, against 5.2 in London. As many as 71, or 14.2 per cent., of the 500 deaths registered during the week in these Scotch towns were uncertified.

HEALTH OF IRISH TOWNS.

In the week ending October 31st, the number of deaths registered in the sixteen principal town-districts of Ireland was 342. The average annual death-rate represented by the deaths registered was 20.7 per 1,000. The deaths registered in the several towns, alphabetically arranged, corresponded to the following annual rates per 1,000: Armagh, 5.2; Belfast, 13.8; Cork, 16.9; Drogheda, 25.4; Dublin, 24.8; Dundalk, 13.1; Galway, 6.7; Kilkenny, 29.6; Limerick, 20.2; Lisburn, 14.5; Londonderry, 14.3; Lurgan, 20.5; Newry, 10.5; Sligo, 14.4; Waterford, 25.5; Wexford, 21.4. The deaths from the principal zymotic diseases in the sixteen districts were equal to an annual rate of 2.4 per 1,000, the rates varying from 0.0 in nine of the districts to 10.3 in Lurgan; the 4 deaths from all causes registered in that district comprising 1 from scarlatina and 1 from whooping-cough. Among the 77 deaths from all causes in Belfast were 2 from measles, 7 from scarlatina, 1 from whooping-cough, and 6 from diarrhoea; and the 26 deaths in Cork comprised 1 from measles, 2 from scarlatina, 1 from whooping-cough, and 2 from diarrhoea; in the Dublin Registration District, the deaths registered during the week amounted to 173. There were only fourteen deaths from zymotic diseases registered in Dublin; they consisted of 4 from scarlet fever, 4 from whooping-cough, 4 from enteric fever, and 2 from erysipelas. Thirty-two deaths from diseases of the respiratory system were registered in Dublin; they comprised 6 from bronchitis and 9 from pneumonia or inflammation of the lungs. The deaths of 12 children under five years of age (including 9 infants under one year old) were ascribed to convulsions. Five deaths were caused by apoplexy, 4 by epilepsy, 12 by other diseases of the brain and nervous system (exclusive of convulsions), and 6 by diseases of the circulatory system. Phthisis caused 27 deaths, mesenteric disease 6, and cancer 4. Two accidental deaths and one case of suicide were registered. In thirty instances there was "no medical attendant" during the last illness.

MEDICAL NEWS.

SOCIETY OF APOTHECARIES OF LONDON.—The following gentlemen passed the Examination in the Science and Practice of Medicine, Surgery, and Midwifery, and received certificates to practise, on Thursday, November 19th, 1885.

Freeman, Charles Delamark, 218, Marylebone Road, N.W.
Rendall, Percy John, 20, Ladbroke Square, W.

The following gentleman passed his examination in the Science and Practice of Medicine, and received his certificate to practise.

Bradbury, John Augustus, Claude Villa, Lone Walk, Denmark Hill.

KING AND QUEEN'S COLLEGE OF PHYSICIANS IN IRELAND.—At the usual monthly examinations for the Licences of the College, held on Monday, November 9th, 1885, and following days, the under-mentioned candidates were successful.

For the Licences to practise Medicine and Midwifery.—A. Brown, Hornick, Lancashire; C. H. Graham, Cheltenham; J. H. Halpin, Wicklow; S. H. N. Harrington, Liverpool; M. C. Kennedy, Dublin; R. Stopford, Wigan, Lancashire; E. H. Tweedy, Dublin; C. J. Urruhart, Grange, Edinburgh.

For the Licence to practise Medicine only.—J. P. Cavenagh, Dublin; W. Frazer, M.D. Univ. Dub., Bournemouth; G. W. Hambleton, Forest Hill; C. G. Hutchinsonson, Osmastron Rectory, by Derby; W. A. Mahon, Clonskeagh, Dublin; J. L'E. McGrane, Banagher, King's County; G. P. L'E. Nugent, M.B. Univ. Dub., Dublin; H. Pollen, M.B. Univ. Dub., Gisborne, New Zealand; J. N. Robson, Edinburgh; R. J. Sheperd, Dublin; H. Whelan, Limerick.

For the Licence to practise Midwifery only.—R. Thomson, M.D.R.U.I., Bangor, co. Down.

At a special examination for the Licence to practise Midwifery, held

on Wednesday, November 4th, the following candidate was successful.
T. W. Dwyer, M.D.R.U.I., The Ovens, co. Cork.

UNIVERSITY OF EDINBURGH.—The following is the official list of candidates who passed the first professional examination for the degrees of M.B. and C.M. in October last.

R. C. Adamson, M.A., R. D. R. Allison, R. Andrew, E. F. Armour, M.A., R. Arthur, M.A., C. Ayres, B.A., J. H. Aytoun, L. E. Barnett, J. H. Battersby, J. C. H. Beaumont, F. Beecroft, W. E. Begbie, M.A., A. Bentham, W. A. Betts, A. S. Bowes, F. D. Boyd, F. P. Bremner, J. W. W. Bridges, J. Brunton, G. C. Cameron, D. Campbell, T. V. Campbell, M.A., S. W. Carruthers, W. J. Cattain, W. R. Chew, J. M. Crawford, H. G. Creelman, A. Dott, T. Duff, E. E. Dyer, H. A. Eaton, T. W. Eden (with distinction), R. Edie, P. A. Elkins, A. Elliot, M.A., W. E. L. Elliott, C. S. Facey, W. F. Farquharson (with distinction), R. H. J. Fetherston, R. A. Fleming, M.A., C. M. Flide, W. Fordyce, M.A., A. W. George, R. J. George, D. Gibb, C. G. Gibson, D. H. M. Graves, A. Gray, R. Griffith-Owen, P. J. B. Haig, A. C. Hall, A. C. Harkness, J. Harvey, J. B. Hawthorn, L. W. Hignett, A. G. Huie, T. A. Hynes, S. Jamieson, C. A. Johnston, T. L. Kennish, E. J. Keogh, A. L. Kerr, W. Kinneir, M.A., D. J. Kuys, J. H. W. Laing, M.A. (with distinction), H. C. Lampert, S. M. Laurence, C. B. Lawson, J. Liddell, M.A., F. W. Lyle, A. J. M'Closky, J. M'Donald, P. S. L. MacDougall, A. J. MacGregor, J. R. M'Intosh, B.A., A. M. Mackay, D. J. Mackay, C. C. Macknight, C. C. MacLeod, M.A., W. B. MacTier, F. W. Marshall, R. B. Martin, E. F. Maynard, A. K. Melville, T. Messenger, A. Miles, J. Montgomery (with distinction), T. H. Morgan, R. Muir, M.A., H. T. Mursell, J. G. Nasmith, J. van Niekerk, W. M. Parham, C. P. Parry, T. C. Paterson, B. L. Paton, W. Polson, S. Poole, H. Prain, J. Randle, J. R. Ratcliffe, E. W. Rayment, A. G. Reid, P. M. Reid, F. W. Reitz, W. J. Richardson, A. B. Ritchie, J. Ritchie, M.A. (with distinction), R. I. Robertson, J. B. Robinson, R. Rosie, H. C. N. Sakir, W. G. W. Sanders, C. B. Savory, J. F. Scott, J. A. Scott, W. A. Scott, M.A., J. H. Smith, W. Smith, J. Smuts, W. Smyth, J. Somerville, H. A. Stalkart, J. D. Stanley, J. W. Steven, A. N. J. Story, G. T. Tate, J. M. Thom, J. C. Thomson, M.A., J. M. Thomson, W. T. Thomson, A. L. Turner, G. G. Watson, W. Weir, B.Sc. (with distinction), E. N. K. Wells, L. S. Wells, A. Whyte, M.A., B.Sc., A. W. Wilcox, A. M. Williamson, J. D. Williams, G. R. Wilson, J. Wilson, M.A., J. H. Wilson, C. N. C. Wimberley.

VICTORIA UNIVERSITY, MANCHESTER.—The following degrees were conferred by the Vice-Chancellor of the University, in the Owens College, on Thursday, November 5th.

J. M. Clarke, E. Gordon.

These are the first candidates who, having pursued prescribed courses of study and passed the required examinations, have been admitted to this degree.

MEDICAL VACANCIES.

The following vacancies are announced.

BRISTOL GENERAL HOSPITAL.—House-Surgeon. Salary, £120 per annum. Applications by December 2nd.

CHELSEA HOSPITAL FOR WOMEN, Fulham Road, S.W.—Assistant-Physician. Applications by November 30th.

CHILDREN'S HOSPITAL, Birmingham.—Assistant Resident Medical Officer. Salary, £40 per annum. Applications by December 1st.

CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST, Victoria Park, E.—Assistant-Physician. Applications by December 7th.

DENTAL HOSPITAL OF LONDON, Leicester Square.—Two Assistant-Anaesthetists. Applications by December 14th.

OWENS COLLEGE, Manchester.—Lecturer on Medical Jurisprudence. Applications by November 30th.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—Examiners in Anatomy and Physiology. Applications by November 28th.

ST. MARY'S HOSPITAL MEDICAL SCHOOL.—Demonstrator of Chemistry. Salary, £100 per annum. Applications to G. P. Field, Dean.

ST. MARYLEBONE GENERAL DISPENSARY.—Resident Medical Officer. Salary, £106 per annum. Applications by November 30th.

TORBAY HOSPITAL AND PROVIDENT DISPENSARY, Torquay.—Junior House-Surgeon and Dispenser. Salary, £90 per annum. Applications by January 1st, 1886.

VICTORIA HOSPITAL FOR CHILDREN, Queen's Road, Chelsea, S.W.—Registrar. Salary, £63 per annum. Applications by December 7th.

VICTORIA HOSPITAL FOR CHILDREN, Queen's Road, Chelsea, S.W.—House-Surgeon. Salary, £50 per annum. Applications by December 7th.

WANDSWORTH AND CLAPHAM UNION.—Assistant Medical Officer for the Infirmary and Workhouse. Salary, £120 per annum. Applications by November 30th.

WESTERN GENERAL DISPENSARY, Marylebone Road.—Ophthalmic Surgeon. Applications by December 7th.

WHITECHAPEL UNION.—Assistant Medical Officer of the Infirmary. Salary, £150 per annum. Applications by December 7th.

MEDICAL APPOINTMENTS.

BROCKHATT, A. A., L.R.C.P., M.R.C.S., appointed Clinical Assistant in the Skin Department of St. Thomas's Hospital.

CALDECOTT, Charles, M.R.C.S. Eng., L.S.A. Lond., appointed Resident Medical Officer to the Eastern Counties Asylum for Idiots, Colchester, *vice* Dr. Coombes, resigned.

CROWDY, F. D., M.B. Oxon., M.R.C.S., L.S.A., appointed Assistant House-Physician to St. Thomas's Hospital.

GERAGHTY, James, M.D., M.Ch., appointed Medical Officer to the Bullaun Dispensary District, Loughrea Union.

GODFREY, A. E., L.R.C.P., M.R.C.S., appointed Clinical Assistant in the Ear Department of St. Thomas's Hospital.

HAIG, F. M., M.R.C.S., L.S.A., appointed Non-resident Physician to St. Thomas's Hospital.

HUTTON, J. S., L.R.C.P., M.R.C.S., L.S.A., appointed Resident House-Physician to St. Thomas's Hospital.

JOHNSTON, G. D., L.R.C.P., M.R.C.S., appointed Ophthalmic Clinical Assistant to St. Thomas's Hospital.

KIDD, Cameron, L.R.C.P., M.R.C.S., appointed Assistant House-Surgeon to St. Thomas's Hospital.

LANKESTER, H. H., M.B. Lond., M.R.C.S., L.S.A., appointed Resident Accoucheur to St. Thomas's Hospital.

LAWSON, R., M.R.C.S., L.S.A., appointed House-Surgeon to St. Thomas's Hospital.

LOWMAN, S., L.R.C.P., M.R.C.S., L.S.A., appointed Clinical Assistant in the Throat Department of St. Thomas's Hospital.

RITCHIE, E. D., M.R.C.S., L.S.A., appointed Resident House-Physician to St. Thomas's Hospital.

RELTON, B., M.R.C.S., L.S.A., appointed House-Surgeon to St. Thomas's Hospital.

ROBERTS, W. LAKE, M.R.C.S.E., appointed Honorary Surgeon to the Bradford Infirmary, vice Herbert Spencer, M.R.C.S.E., resigned.

ROBERTSON, Robert, M.D., appointed Assistant-Physician to the Royal National Hospital for Consumption and Diseases of the Chest at Ventnor, Isle of Wight.

SAUNDY, Robert, M.D. Edin., M.R.C.P. Lond., appointed Consulting Physician to the Birmingham and Midland Counties Eye Hospital, and Consulting Physician to the Birmingham Dental Hospital.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 5s. 6d., which should be forwarded in stamps with the announcements.

BIRTH.

POCOCK.—On the 19th instant, at Broadlands, Effra Road, S.W., the wife of Walter Pocock, M.R.C.S.E., L.S.A., of a daughter.

DEATH.

LYDDON.—On November 16th, at his residence, 37, Exchange Street, Norwich, John Henry Lyddon, L.R.C.S.I., L.S.A. Lond., aged 41 years, deeply regretted by all who knew him.

PRESENTATION.—At the anniversary dinner of the Loyal Flower of Lambeth Lodge, No. 225, Independent Order of Odd Fellows, Manchester Unity, held at Anderson's Hotel, Fleet Street, E.C., on November 14th, an illuminated address, together with a set of surgical instruments, were presented to the Lodge-Surgeon, Mr. F. Blackman, who has held this office for the last twenty-four years. The proceedings were of a pleasant character.

MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

MONDAY.—Medical Society of London, 8.30 P.M. Dr. Stephen Mackenzie: On Ulcer of the Stomach. Mr. A. Boyce Barrow: On the Treatment of Varicose Veins.

TUESDAY.—Pathological Society of London, 8.30 P.M. Dr. Gulliver: Stricture of Small Intestine and Hemorrhage into Adrenals. Mr. D'Arcy Power: Two Cases of Osteitis Deformans. Dr. Norman Moore: New Growths in the Heart and Viscera. Dr. Carrington: Malignant Disease of Thyroid Body. Mr. Arbuthnot Lane: Pressure-Changes in the Joints and Extremities. Mr. Hutchinson, jun.: Subperitoneal Lipoma. Mr. Stonham: Two Specimens of Lipoma of the Spermatheca. Dr. Haig: Aneurysm in Wall of Left Ventricle. Dr. Hadden: Two Cases of Joint-Affection in Locomotor Ataxia. Dr. Silcock: Syphilitic Ulcerative Tracheitis. Mr. Shattock: Perforation of the Palate by Hypertrophied Upper Incisor in the Rat (card). Mr. Fenwick: Ulceration of the Bladder after Fracture of the Spine (card). Mr. Battle: Portion of Thumb, with Vessel and Nerve, amputated by String (card). Mr. Battle (for Mr. Croft): Bullet flattened by Frontal Bone. Mr. Bruce Clarke: Early Puberty (living).

WEDNESDAY.—Obstetrical Society of London, 8 P.M. Specimens will be shown by Dr. Lewers and others. Dr. Arnold W. Thomson: A Case of Protracted Pregnancy. Drs. Matthews Duncan and Thin: On the Inflammation and the Histology of Lupus of the Puerperium. Dr. H. Roxburgh Fuller: A Case of Spurious Labour.

THURSDAY.—Harveian Society of London, 8.30 P.M. Harveian Lectures, by Dr. T. Buzzard, on Some Varieties of Paralysis dependent upon Peripheral Neuritis.

FRIDAY.—West London Medico-Chirurgical Society, 8 P.M. Mr. H. Percy Dunn: Sac and Adjacent Parts of a Large Omental Hernia; Pendulous Growths from Mucous Membrane of Stomach; Tubercular Disease of Testis; Tubercular Disease of Kidney. Mr. C. B. Keetley: Osteotomy of Hip; Case of Complete Obliteration of One Nostril by Syphilis (congenital); Case of Removal of Whole of Lower Lip for Epithelioma; Mr. Leonard Mark: Drawing of the above case before removal. Mr. J. R. Lunn: Drawing of Case of Epithelioma of Lip. Mr. Dunn, for Surgeon Harold Hendley, L.M.S.: Some Cases of Interest from the late War in the Sudan. Mr. C. B. Keetley: Antiseptic Surgery at the West London Hospital. Dr. Sinclair Thomson: Suez as a Health-Resort, with Notes by the Way.

OPERATION DAYS AT THE LONDON 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 Orthopaedic, 2 P.M.—Hospital for Women, 2 P.M.—Chelsea 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, 2.30 P.M.—St. Mark's, 2 P.M.—St. Thomas's (Ophthalmic Department), 4 P.M.—Cancer Hospital, Brompton, 2.30 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, 2.30 P.M.—National Orthopaedic, 10 A.M.—King's College, 3 to 4 P.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, 2.30 P.M.

FRIDAY.....King's College, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—Royal London Ophthalmic, 11 A.M.—Central London Ophthalmic, 2 P.M.—Royal South London Ophthalmic, 2 P.M.—Guy's, 1.30 P.M.—St. Thomas's (Ophthalmic Department), 2 P.M.—West London, 2.30 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.—Cancer Hospital, Brompton, 2.30 P.M.

HOURS OF ATTENDANCE AT THE LONDON HOSPITALS.

CHARING CROSS.—Medical and Surgical, daily, 1; Obstetric, Tu. F., 1.30; Skin, M. Th., 1.30; Dental, M. W. F., 9.

GUY'S.—Medical and Surgical, daily, 1.30; Obstetric, M. Tu. F., 1.30; Eye, M. Tu. Th. F., 1.30; Ear, Tu. F., 12.30; Skin, Tu. F., 12.30; Dental, Tu. Th. F., 12.

KING'S COLLEGE.—Medical, daily, 2; Surgical, daily, 1.30; Obstetric, Tu. Th. S., 2; o.p., M. W. F., 12.30; Eye, M. Th., 1; Ophthalmic Department, W., 1; Ear, Th., 2; Skin, Th.; Throat, Th. 3; Dental, Tu. F., 10.

LONDON.—Medical, daily, exc. S., 2; Surgical, daily, 1.30 and 2; Obstetric, M. Th., 1.30; o.p. W. S., 1.30; Eye, W. S., 9; Ear, S., 9.30; Skin, Th., 9; Dental, Tu., 6.

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. Th. S., 2.30; Ear, Tu. F., 2; Skin, F., 1.30; Larynx, F., 2.30; Orthopaedic, M., 2.30; 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, W., 2; Throat, Th., 2; Orthopaedic, W., 2; Dental, Tu. S., 9; Th., 1.

ST. MARY'S.—Medical and Surgical, daily, 1.45; Obstetric, Tu. F., 9.30; o.p., 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., 3; Eye, M. Th., 2.30; Ear, Tu. F., 9; Skin, Th., 1; Dental, W. S., 9.15.

LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

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

In order to avoid delay, it is particularly requested that all letters on the editorial business of the JOURNAL 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.

BABY-FARMING.

THE Australasian Medical Gazette of September, 1885, gives details of a case which has brought to light an establishment carried on by a midwife named Mary Anne Baker, at Lane Cove, near Sydney, for the care of children, principally illegitimate, whose parents find their charge inconvenient. One having died, an inquest was held, and it was discovered that Mrs. Baker was in the habit of leaving her establishment to the charge of a deputy. So complete was the state of isolation in which the Lane Cove Branch was kept by the direction of Mrs. Baker, that it appears in the evidence that Charlotte Wells, the deputy, was, with the children in her charge, two days and two nights without fire, she having had no matches, and having been told by her employer on no account to go near her neighbours on any excuse whatever. The cause of the death of the child appears to have been natural, and to such effect was the verdict of the jury, who added a rider stating that the jury recommended that the said baby-farm be suppressed, and attention was also drawn to a former recommendation to the same effect. At the same time, it became known that another child, two months old, the offspring of Charlotte Wells, had died without having been attended to by a medical man. It was buried as still-born, under the authority of the following certificate from Mrs. Baker: "I certify that I delivered Mrs. Wells, of Crown Street, of a male child, *primævi*, M. A. Baker, June 15th, 1885." This certificate, by no means unique in New South Wales, did not even certify that the child was dead, much less give any cause for the death, yet it was received and acted on by the cemetery-authorities with the utmost simplicity and faith.

A SMALL INFANT.

SIR,—In the Obstetric Memoranda of the JOURNAL of November 14th, Dr. S. Jebb Scott has reported a case of a living female child weighing only 2 lbs. 8 oz. at birth; and, as he is anxious to know "whether there be any evidence of so small a child on record, excepting the children of dwarfs," I send the following case which occurred in my own practice.

On the morning of the 12th April last, I was summoned to attend a lady who was at the end of the seventh month of her third pregnancy. On my arrival, I found that she had, without any warning, been suddenly delivered of the smallest living child I had ever seen. The child was a female, and so small was it, that I thought it quite impossible for it to live; however, after it had been washed, I wrapped it carefully in cotton-wool (as it was too small to be dressed), and placed it in bed with its mother, until the arrival of the nurse.

Owing to some superstitious notion, the child was not weighed at its birth, but I feel confident that its weight could not have been more than 2 lbs. At the end of the first month, the child was carefully weighed, when its weight was only 3 lbs. 4 oz. At the end of the second month, it was again weighed, and its weight was then 6½ lbs. The child has again been weighed to-day, November 18th, and now weighs exactly 13 lbs. She is now between seven and eight months old, and has just cut her first tooth.

The treatment of the child was as follows. For the first week, it was kept in cotton-wool, either before the fire or in its mother's arms. I also ordered the child to have three drops of brandy in a teaspoonful of milk, two or three times a day. After the third day, it began to suck the breast, the mother being a healthy woman, with a good supply of milk. It is now a perfectly healthy child.

I may add that the nurse, without my orders, rubbed the child with brandy whenever she found it cold or looking blue. The small doses of brandy and milk were given internally for the first six weeks, in addition to its natural food, and then discontinued. The parents are young, healthy, and of average height.—I am, etc.,

T. J. BURROUGHS, M.D. BRUX.
Orondall, Hants.

LEPROSY.

SIR,—Brigade-Surgeon Dr. Carter's memorandum, recently published by the Bombay authorities, must be as interesting as it is important to all residents in countries where this horrible and loathsome disease is prevalent. India, unhappily, is not our only colony where it exists. In the West Indies and Guiana, its ravages are fearful. It is to me a matter of surprise that Government measures of an eutrotic nature are not initiated wherever the disease exists. Dr. Carter says, "so far from leprosy in Norway showing a natural tendency to subside, there is ample evidence of a present activity equal to that displayed by the disease twenty-five years ago." Believing, too, as he does, that "the leper is himself the source of ill to others," how can he reconcile his third protective (?) measure with such a view of the contagious nature of the disease? I think it is an accepted doctrine among the practitioners of British Guiana that, until these leper-colonies are fairly established, under far more rigorous rules and regulations than the local government has ever thought fit to adopt, there is no chance of eradicating the disease, or diminishing it to a far greater extent than at present. Its unhappy victims are the most loathsome and pitiable objects of human affliction it has been my lot to witness.—Your obedient servant,

R. J. W. O.

MEM. BRIT. MED. ASSOCIATION.—Please submit your statement to the other side, in order that we may not have to give an opinion upon an *ex parte* statement. Both sides should be agreed as to the facts.

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

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