

tached to it a room for the storage of pathological specimens not designed for the museum. The classes in pathological histology will be held in a large well-lighted room on the first floor, where the practical classes in physiological histology are also to be given. In this way the main laboratory will be kept free for individual original work. From the laboratory a passage runs for some little distance, to the *post mortem* theatre, in which the necropsies of the hospital are made, and the organs removed are demonstrated to the students by the lecturers on pathology. In connection with the *post mortem* room is a mortuary, and a second store-room for specimens. At a higher level than the large laboratory, and approached by a winding staircase, is a room designed specially as a bacteriological laboratory. Considerable care has been taken to isolate this room as much as possible from all other parts of the school-premises, so as to ensure freedom from outside infection. The plans have also been arranged so that the *post mortem* and preparation rooms, while still in connection with the laboratories, are so far removed that they cannot taint the air of the chief work-rooms.

At the MIDDLESEX HOSPITAL Medical School, no important structural alterations have yet been made. Plans and estimates have been accepted for a very important addition to be made on ground which has just come into possession of the school. These buildings will forthwith be erected and completed for next session. Operations will also be at once commenced on the new residential college already mentioned in these columns.

In the Anatomical Department of UNIVERSITY COLLEGE, LONDON, extensive alterations and improvements have been made. The internal structure of the theatre has been entirely remodelled. The lighting has been improved by the construction of additional skylights in the roof. The old seats, which left much to be desired in the way of comfort, have been replaced by others more conveniently arranged. And five commodious and well lighted work-rooms have been constructed for the use of professors and their assistants, fitted with all conveniences for the preparation of lecture-demonstrations and for research. In the large dissecting-room, also, several improvements have been carried out, with a view to increasing the comfort of students and facilitating work. The chief of them are: the introduction of hot-water coils, to furnish a part of the necessary heating in cold weather; the substitution for the sun-lights of thirty six-light gaseliers, so that each table may have its own illumination; and the provision of a number of covered tanks, in which parts undergoing dissection may be kept in spirit, when not being worked upon.

The WESTMINSTER HOSPITAL Medical School, which was only erected last year, has not required to be altered. The out-patient department of the Hospital, however, has been completely rebuilt on the site of the old school premises; a small theatre has been constructed at the hospital for clinical lectures, and a room provided for urinary examination.

At UNIVERSITY COLLEGE, LIVERPOOL, structural alterations of great importance have been carried out since last year. The New Chemical Laboratories, fitted up at a cost of about £20,000, were opened in April last; and the old chemical department has been converted into physiological laboratories. Last year, the anatomical department was almost entirely rebuilt, so that the school-buildings are now thoroughly well adapted to their purpose.

PRESENTATION.—On Monday, September 6th, Mr. Edward Garraway, an old and much respected medical practitioner in Faversham, was presented with a testimonial at a large meeting, presided over by the Right Hon. Earl Sondes. The testimonial consisted of a silver salver, a book containing an address and the names of the subscribers, and a cheque for three hundred and sixty-five guineas. The salver was beautifully chased, and altogether a very handsome piece of plate. It bore the following inscription, surmounted by the recipient's crest: "Presented to Edward Garraway, Esq., M.R.C.S. Eng., J.P.; etc., of Faversham, with a purse of three hundred and sixty-five guineas; by 280 of his friends, in token of their respect and esteem, and in remembrance of a long and arduous professional career, during which his great ability and zeal have been no less conspicuous than his many acts of considerate kindness to his poorer patients. September 6th, 1886." The book containing the address and names of the subscribers was handsomely bound in morocco, each page being beautifully illuminated. The presentation was made by Earl Sondes, and was appropriately acknowledged by Mr. Garraway. A vote of thanks to his lordship concluded the proceedings.

BACTERIOLOGY.—Mr. Crookshank's *Practical Bacteriology* has been published in French by M. Carré. An appendix has been added upon photomicrography, illustrated with permanent autotypes, which are printed in special colours.

ASSOCIATION INTELLIGENCE.

COUNCIL.

NOTICE OF MEETING.

A MEETING of the Council will be held in the Council Room, Exeter Hall, Strand, London, on Wednesday, the 20th day of October next, at 2 o'clock in the afternoon.

FRANCIS FOWKE, *General Secretary.*

161A, Strand, September 29th, 1886.

NOTICE OF QUARTERLY MEETING 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.

A meeting of the Council will be held on 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 the meeting, namely, 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.

INQUIRIES are in progress on the subjects of

DIPHTHERIA, CANCER OF THE BREAST,
OLD AGE, THE VALUE OF HAMAMELIS,
THE VALUE OF PURE TEREBENE.

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

The general inquiries into THE THERAPEUTIC VALUE OF HAMAMELIS AND PURE TEREBENE will be continued for another year, and a full report presented to the Section of Therapeutics in the Annual Meeting of 1887.

Returns are still received on THE CONNECTION OF DISEASE WITH HABITS OF INTEMPERANCE, and schedules will be forwarded 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.

METROPOLITAN COUNTIES BRANCH: EAST LONDON AND SOUTH ESSEX DISTRICT.—The opening meeting of the session will take place at the Hackney Town Hall on Thursday, October 21st, when an address will be given by Dr. Playfair. The chair will be taken at 8.30 p.m. by the President of the Branch, J. Syer Bristowe, M.D., F.R.S. All medical men will be welcome, whether members of the Association or not.—J. W. HUNT, Honorary Secretary, 101, Queen's Road, Dalston.

SOUTH-EASTERN BRANCH: WEST KENT DISTRICT.—A meeting of the above District will take place at the West Kent Hospital, Maidstone, on October 29th. Gentlemen who wish to read papers, exhibit specimens, etc., are requested to inform the Honorary District Secretary, A. W. Nankivell, F.R.C.S., St. Bartholomew's Hospital, Chatham, not later than October 9th. Further particulars will be duly announced.—A. W. NANKIVELL, St. Bartholomew's Hospital, Chatham, September 11th, 1886.

SOUTH-EASTERN BRANCH: EAST SURREY DISTRICT.—A meeting will be held at the White Hart Hotel, Reigate, on Thursday, October 17th, at 4 p.m., Charles E. Oldman, M.D., of Bletchingley, in the chair. Dinner at 6 p.m., charge 7s., exclusive of wine. The following papers, etc., have been promised. Dr. Galabin: Modern Improvements in Cesarean Section. Dr. Sammel West: On some Points connected with the Diagnosis and Treatment of Empyema. Dr. Oldman: A Case of Wound of the Orbit. Dr. Duncan, Mr. T. A. Richardson, Mr. A. Matthey: Pathological Specimens. Members desirous of exhibiting or reading notes of cases are invited to communicate with the Honorary Secretary, Dr. P. T. DUNCAN, Park House, Croydon, September 28th, 1886.

SOUTH MIDLAND BRANCH.—The autumnal meeting will be held at the George Hotel, Kimbolton, on Thursday, October 14th, at 2 o'clock P.M. By the kind permission of the Duke of Manchester, the members will have the opportunity of visiting Kimbolton Castle. Gentlemen wishing to bring forward communications, etc., at the meeting, are requested to send the titles of the same as soon as possible to the Honorary Secretary. Papers, etc.—Dr. T. J. Walker: An Apparatus for Irrigation of the Bladder. Mr. R. A. Milligan: Case of Popliteal Aneurysm cured by Ligature after failure of Pressure. Two large Calculi removed from Children by Lateral Lithotomy.—C. J. EVANS, Honorary Secretary.

MIDLAND BRANCH.—There will be a meeting of this Branch on Thursday, October 21st, at 2 P.M., at the Infirmary, Stamford, when it is hoped there will be a discussion on the Duration of Infectiousness in Scarlatina, Small-pox, Measles, Mumps, and Diphtheria. Members desirous of reading papers or exhibiting cases are requested to communicate with me before the 4th October next.—W. A. CARLINE, Honorary Secretary.

WEST SOMERSET BRANCH.—The annual meeting of this Branch, which was appointed to be held at Minehead on July 30th, was put off in consequence of its being ascertained that probably only three or four members could have attended on that day. The Council have now fixed that the postponed meeting shall be held at the Railway Hotel, Taunton, on Thursday, October 14th, at 4 P.M. The business will be the same as that stated in the circular of July 6th, and the dinner will be at 5.30 P.M.—W. M. KELLY, M.D., Honorary Secretary.

STAFFORDSHIRE BRANCH.—The thirteenth annual general meeting of this Branch will be held at Burton-on-Trent on Thursday, October 23th. An address will be delivered by the President-elect, Dr. W. G. Lowe.—VINCENT JACKSON, General Secretary, Wolverhampton, September 22nd, 1886.

BORDER COUNTIES BRANCH.—The autumn meeting of this Branch will be held at the Keswick Hotel, Keswick, on Friday, October 22nd, 1886. The chair will be taken by the President, Dr. Eaton, Cleator Moor, at 1 P.M. Dinner at the hotel at 4 P.M. The Secretary will be glad to receive intimations of papers for reading, and specimens, or patients for exhibition, without delay.—H. A. LEDIARD, Honorary Secretary, 41, Lowther Street, Carlisle.

NORTH OF ENGLAND BRANCH.

THE twenty-second annual meeting of the Branch was held at the Town Hall, South Shields, on Thursday, July 29th. The retiring President, Dr. STAINTHORPE, took the chair, and there was a good attendance of members. After some introductory remarks, Dr. Stainthorpe vacated the chair in favour of Dr. GOWANS, the new President. Dr. Gowans then delivered his Presidential Address, in which he dealt in an interesting, able, and eloquent manner, with the advances made in pathology during the past few years, making special reference to the germ-origin of disease.—A vote of thanks to the President was then proposed by Dr. Philipson, and carried by acclamation.—Votes of thanks to the retiring President, to the Council, and to other officers, were also proposed and carried.

Places of Meeting for 1886-1887.—It was resolved that the annual meeting, 1887, be held at Stockton-on-Tees; the autumnal meeting, 1886, at Newcastle-on-Tyne; and the spring meeting at Sunderland.

Election of Officers.—The following officers were then chosen: *President-elect*: Dr. R. W. Foss. *Council of Management*: Drs. Barron, Blandford, Broadbent, David Drummond, Middlemiss, Morison, Murphy, Oliver, and Philipson. *Honorary Secretary and Treasurer*: G. E. Williamson, F.R.C.S. *Representatives of the Branch on the Council of the Association*: Dr. Drummond and Mr. Williamson. *Representative on the Parliamentary Bills Committee*: Dr. Philipson.

The President, Dr. Gowans, proposed a vote of thanks to Dr. Drummond (who was retiring from the office of Secretary), which was unanimously carried.

Dinner.—The members and their friends dined together after the meeting at the Royal Hotel, South Shields. Among the guests were the Mayor, the Town Clerk, and the Vicar of South Shields. The President occupied the chair, and Dr. Drummond the vice-chair.

SOUTH-EASTERN BRANCH: EAST KENT DISTRICT.

A MEETING of the above District was held on Thursday, September 28th, at the National Art Treasures Exhibition, Folkestone. Twenty-eight members were present. The chair was taken by Dr. THOMAS EASTES.

Election of Chairman.—Mr. JAMES REID was elected Chairman of the next meeting, to be held at Canterbury in November.

Papers.—The following were read.

Dr. C. E. FITZGERALD (Folkestone) read an interesting paper on Some Practical Points in the Treatment of Ulceration of the Os Uteri.—Mr. Rigden and Dr. Ormsby took part in the debate.

Dr. GOGARTY read a paper on a Case of Ascites, in a boy, aged 11. There was no apparent cause for the accumulation of fluid. No fever, pain, nor organic lesions were detected. Recovery was rapid. Digitalis and iron were given. This was the second case which had been described. The other was in a girl, aged 7, who made a good recovery

under iron and good feeding. Reference was made to the literature on the subject of ascites in children. Recorded cases were adduced, and Trousseau's remarks were quoted.—Dr. Tyson suggested that some of these cases were of a tuberculous origin, and quoted two cases in support of this view.—Dr. Bowles thought that simple ascites might exist in the same way as simple hydrothorax; he also referred to the great value of giving a large quantity of sour milk in many cases of dropsy, due to various causes.—Dr. Gogarty replied.

Dr. THOMAS EASTES read a paper on Three Cases of Visceral Abscess.—Dr. England, Dr. Bowles, and Mr. Ashby Osborn took part in the subsequent discussion.

Dr. BOWLES, at the close of the meeting, showed some small calculi, removed from the tonsil.

Previous to the afternoon meeting, the members and their friends were entertained at luncheon, in the Exhibition, by Dr. T. Eastes.

The members dined together, at 5.30, in the Exhibition; Dr. T. Eastes in the chair.

SPECIAL CORRESPONDENCE.

PARIS.

[FROM OUR OWN CORRESPONDENT.]

Hysterical Apoplexy.—Disappearance of Ascites in Hepatic Cirrhosis.—Puncturing the Uterus in Acute Hydramnios.—Rectal Injections of Medicated Gases.

HYSTERICAL apoplexy is a complaint which has hitherto apparently been overlooked. Nevertheless, cases are by no means of rare occurrence. At a recent meeting of the Société Médicale des Hôpitaux, M. Debove communicated the following facts. On July 10th, a healthy man, aged 31, suddenly became insensible as he was leaving the dinner table; he remained in a comatose condition for twelve hours. On recovery, he presented motor paralysis of the left side; there was an absence of convulsions. The following morning, when he appeared at the hospital, there was motor paralysis on the left side, accompanied by hemi-anæsthesia. All the symptoms of the case established the diagnosis of ordinary apoplexy. M. Debove believed it to be hysterical. The patient was certainly strong and robust, and not of hysterical aspect. Nevertheless, on the left side, the skin, mucous membranes, ear and muscles were insensible. The pupil was contracted; the patient was unable to detect violet, and had monocular polyopia. On applying a magnet, anæsthesia shifted from the left side to the right. On repeating the experiment, the left side became anæsthetised, and the right side presented its normal sensibility. When there was absence of organic lesion, motor paralysis was generally co-existent with sensor paralysis of the region attacked. Professor Charcot admitted two varieties of anæsthesia,—one hysterical, the other organic; the latter was rare. M. Debove's view was supported by a paper by M. Vulpian, which had appeared in a medical journal. The patient referred to in it presented hemi-anæsthesia, preceded by sudden loss of consciousness; these and other symptoms had led M. Vulpian to localise the cerebral lesion. At the necropsy, the two cerebral hemispheres were completely normal. M. Debove, in consideration of certain phenomena exhibited by his patient, affirmed that the case was nervous apoplexy. Notwithstanding the ætiological objection to the word hysteria, the disease might be called hysterical apoplexy, as it was a term under which was included a certain class of symptoms similar in kind. Hysterical apoplexy with anæsthesia was not astonishing. M. Debove reminded the meeting that, quite recently, in some cases of anæsthesia from alcoholic intoxication, or saturnine, or mercurial poisoning, the anæsthetic condition was connected with hysteria, and the anæsthesia was rather symptomatic than toxic.

M. Dujardin-Beaumetz has noted in his wards a very interesting case. A patient, aged 38, was suffering from cirrhosis, accompanied with considerable ascites, when he entered the Cochin Hospital. Five litres of fluid were removed by means of a puncture. Atrophying cirrhosis was diagnosed. The cachectic condition gradually disappeared, the patient became stronger, and the general condition improved. Ascites did not reappear; the patient appeared to be cured, and was allowed to leave the hospital. He immediately afterwards resumed his habit of getting drunk, was found insensible on one of the boulevards, and was removed to the hospital, where he died of pneumonia. The necropsy revealed the presence of pulmonary lesions and hepatic cirrhosis. Microscopic examination confirmed the accuracy of the previous diagnosis. M. Dujardin-Beaumetz, in treating the case, remembered that cirrhosis was most often cured after an acute complica-

fever and diphtheria were almost absent, but one case of the latter disease proved fatal. Zymotic diseases caused only six deaths, which is less than one-third the average number of deaths in former years.

WORKINGTON.—The death-rate for 1885 was 18.7 per 1,000, while, in 1884, it was but 16.2. Dr. Lowe, however, significantly points out that, had it not been for the deaths of forty-eight children caused by an epidemic of measles, within a few weeks, he could have shown the low death-rate of 16.4 per 1,000. The epidemic was instructive as showing the value of school-closing as a preventive measure. Dr. Lowe's recommendations on the subject were not adopted until the most serious consequences had resulted; but when at last the schools were closed on December 4th, the epidemic speedily declined, and disappeared, as far as could be ascertained, about twelve days after. There was not only the opposition of the ratepayers to contend with, but also an adverse feeling on the part of a large proportion of the public. It was said that the closure of the schools meant a loss to the town of £300 or £400. The predominance of monetary considerations in questions of life-saving is as absurd as it is deplorable. Dr. Lowe says that had the forty-eight children "been suddenly killed by an explosion of dynamite, there would have been a tremendous sensation, and precautions to prevent future disasters would have been adopted forthwith." A brief account is given of the sanitary condition of the district, and also of the water-supply, which is stated to be materially improved.

CARLTON.—The high rate of infantile mortality in this district has for years been notorious, and Mr. J. T. Knight does not record any abatement in this respect for 1885. No less than 42 deaths of children under one year of age occurred out of a total of 88 deaths. The general death-rate shows great improvement, 15.17, against 18.96 per 1,000 in 1884. There were a few scattered cases of measles and scarlet fever, each of which caused one death. Typhoid fever was slightly more prevalent than in late years. Some four or five cases occurred in a row of houses where the well was not protected from surface water, and the drain was not provided with a stench-trap. Mr. Knight is convinced that the old wells in the district are a source of danger, since they are for the most part loosely constructed, and contain water "not above suspicion." There was a satisfactory diminution in the mortality from diarrhoea and from zymotic diseases generally. In the previous year, no less than 29 deaths occurred from such causes, more than double the number for 1885, when there were only twelve deaths. The general trade of the district has for some years been depressed, and as a sign of the times, Mr. Knight mentions that half as many more out-door paupers were attended by the district medical officer as in any previous year.

INDIA AND THE COLONIES.

INDIA.

MEDICAL AID FOR WOMEN.—It has been decided to establish at Dhoolia a branch of Lady Reay's "National Association for Imparting Medical Aid and Instruction to Women." It is satisfactory to know that this good work, which was first undertaken by Lady Dufferin, at the suggestion of Her Majesty the Queen, continues to grow. The fact that few women in India know English makes it the more necessary that they should have female doctors with whom they can converse in their own language. A Managing Committee has already been formed for carrying out this object.

HOSPITAL AND DISPENSARY MANAGEMENT.

THE ROYAL ALBERT ASYLUM.

THE annual report of the Royal Albert Asylum for idiots and imbeciles of the northern counties, Lancaster, states the present number of inmates of the asylum to be 537—365 males, 172 females. Of these, 251 were from Lancashire, 174 from Yorkshire, 33 from Cheshire, 33 from Durham, 21 from Cumberland, 15 from Northumberland, 7 from Westmoreland, and 3 from other counties. The general health of the inmates had compared favourably with that of former years, and the institution had been free from epidemic disease. The new Idiots Act would afford additional facilities for the care, education, and training of imbecile children. The report was adopted, and the usual resolutions of thanks to the committee and officers were passed. The total amount received from all sources was £28,382, being £19,170 for the Maintenance Fund; £8,191 (legacies, etc.) for the Sustentation or Endowment

Fund; and £1,020 for the Recreation Hall Fund. The contributions from the Associated Counties to the Maintenance and Sustentation Funds has been £13,868. The annual subscriptions had increased in Lancashire and Cheshire, and declined slightly in Yorkshire.

MEDICAL NEWS.

UNIVERSITY OF DURHAM FACULTY OF MEDICINE.—At the recent examination for Degrees in Medicine and Surgery, the following candidates satisfied the examiners.

First Examination for the Degree of Bachelor in Medicine (Old Regulations).—F. J. McArdle, University College, Liverpool; J. W. B. Pogson, Queen's College, Birmingham.

Examination for Certificate of Proficiency in Sanitary Science.—T. McInerney, L.R.C.S.I., L.K.Q.C.P.I.; J. V. Salvage, M.D., L.R.C.P., M.R.C.S.; J. Wilding, M.B., L.R.C.P., M.R.C.S.

Second Examination for the Degree of Bachelor in Medicine (New Regulations).—*First Class Honours.*—E. R. White, King's College.

Second Class Honours.—O. E. Higgins, St. Mary's Hospital.

Pass-list in Alphabetical Order.—S. J. Alden, College of Medicine, Newcastle-upon-Tyne; O. W. Andrews, St. George's Hospital; E. Bowker, The Owens College; N. Faichnie, University College; H. Fowler, The Owens College; R. H. French, London Hospital; G. Gantby, College of Medicine, Newcastle-upon-Tyne; D. G. Halsted, London Hospital; W. Molesworth, Bristol Medical School; W. J. Stephens, College of Medicine, Newcastle-upon-Tyne; J. S. Walton, College of Medicine, Newcastle-upon-Tyne.

First Examination for the Degree of Bachelor in Medicine. (New Regulations).—The following satisfied the examiners.

H. B. Angus, College of Medicine, Newcastle-upon-Tyne; A. P. Arnold, College of Medicine, Newcastle-upon-Tyne; W. A. Atkinson, College of Medicine, Newcastle-upon-Tyne; F. Bulman, College of Medicine, Newcastle-upon-Tyne; B. Cox, College of Medicine, Newcastle-upon-Tyne; R. F. Craggs, College of Medicine, Newcastle-upon-Tyne; A. Crick, St. Thomas's Hospital; G. B. S. Darter, St. Thomas's Hospital; A. E. Davis, College of Medicine, Newcastle-upon-Tyne; G. W. Davis, L.R.C.P., M.R.C.S., St. Thomas's Hospital; C. M. Hardy, College of Medicine, Newcastle-upon-Tyne; T. Hartley, The Owens College; W. A. Hatton, London Hospital; O. E. Higgins, St. Mary's Hospital; E. Jepson, M.R.C.S., L.S.A., St. Bartholomew's Hospital; A. M. Jones, M.R.C.S., L.S.A., Guy's Hospital; I. N. Paris, University College; E. Rye, The Owens College; R. H. Shaw, College of Medicine, Newcastle-upon-Tyne; E. E. Shires, Yorkshire College, Leeds; F. Trevelyan, St. Thomas's Hospital; T. Watts, The Owens College; E. R. White, King's College; A. M. Wilson, St. Thomas's Hospital.

The following passed in Anatomy and Physiology.

W. F. Fisher, London Hospital; W. S. E. Raines, College of Medicine, Newcastle-upon-Tyne; R. A. Welsh, College of Medicine, Newcastle-upon-Tyne.

The following passed in Chemistry with Chemical Physics, and Botany with Medical Botany.

A. C. Baca, St. Bartholomew's Hospital; G. H. Francis, London Hospital; W. E. Peacock, College of Medicine, Newcastle-upon-Tyne.

ROYAL COLLEGES OF PHYSICIANS AND SURGEONS, EDINBURGH.—THE DOUBLE QUALIFICATION.—At special sittings of the examiners, which commenced on September 16th, the following gentlemen passed the second professional examination, and were admitted L.R.C.P. Edinburgh and L.R.C.S. Edinburgh.

P. H. S. Mellish, Kent; W. H. Shand, Kircudbright; F. J. B. Bateman, Norwich; J. Smith, Coleraine; G. E. Claxton, India; S. Herriot, Cheshire; R. S. Smith, Edinburgh; C. A. Edwards, Wiveliscombe; J. U. Downing, Birkenhead; R. W. Long, Cork; S. H. Craig, co. Kerry; T. E. Moore, co. Kerry; T. Godley, co. Kerry; A. O'Reilly Blackwood, co. Down; A. D. Dunn, Canterbury; W. Chalmers, Cornwall; W. M'Coull, Ovington; W. H. Chamberlain, Leicester; R. J. Beacon, co. Tyrone; B. O'Regan, co. Mayo; W. C. Graham, co. Antrim; H. J. Augustine, Bengal; F. W. Gibbon, co. Durham; F. Evans, Cork.

SOCIETY OF APOTHECARIES OF LONDON.—The following gentlemen passed their Examination in the Science and Practice of Medicine, Surgery, and Midwifery, and received certificates to practise, on Thursday, September 23rd, 1886.

Evans, William Edward, St. Mary Church, Torquay.

Gedge, Arthur Johnson, Methwold, Brandon, Norfolk.

McIlroy, John Black, Derwent Villa, Shooter's Hill.

Rutherford, Vickerman Hensell, Elswick Road, Newcastle-on-Tyne.

Stelfox, Harold, 36, Rotherhithe New Road.

Woodhouse, Robert Hall, 1, Hanover Square, W.

MEDICAL VACANCIES.

The following vacancies are announced.

BRIGHTON AND HOVE LYING-IN INSTITUTION.—House-Surgeon. Applications by October 30th to the Secretary.

CHILDREN'S HOSPITAL, Birmingham.—Resident Medical Officer. Salary, £80 per annum, with board and lodging. Applications by October 6th to the Secretary.

CHILDREN'S HOSPITAL, Birmingham.—Assistant Resident Medical Officer. Salary, £40 per annum, with board and lodging. Applications by October 6th to the Secretary.

CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST, Victoria Park, E.—Resident Clinical Assistant. Applications by October 11th to the Secretary, 24, Finsbury Circus, E.C.

GREAT NORTHERN CENTRAL HOSPITAL.—Caledonian Road, N.—Clinical Assistant. Applications to Dr. Burnett, 94, Wimpole Street, W.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton.—Resident Clinical Assistant. Applications by October 10th, to the Secretary.

MIDDLESEX HOSPITAL, W.—Second Chloroformist. Applications by October 8th to the Secretary.

MILLER HOSPITAL AND ROYAL KENT DISPENSARY, Greenwich Road, S.E.—Senior Resident Medical Officer. Salary, £60 per annum, with board and lodging. Applications by October 8th to W. Bristow, Esq.

MILLER HOSPITAL AND ROYAL KENT DISPENSARY, Greenwich Road, S.E.—Junior Resident Medical Officer. Salary, £30 per annum, with board and lodging. Applications by October 8th to W. Bristow, Esq.

NOTTINGHAM GENERAL HOSPITAL.—Resident Surgical Assistant.—Applications by October 11th to the Honorary Secretary of the Medical Board.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—Examiner in Medicine. Applications by October 6th to the Secretary.

ROYAL COLLEGES OF PHYSICIANS AND SURGEONS.—Two Examiners in Midwifery. Applications by October 6th to the Secretary.

ROYAL LONDON OPHTHALMIC HOSPITAL, Moorfields, E.C.—Junior House-Surgeon. Salary, £50 per annum, with board and residence. Applications by October 5th to the Secretary.

ROYAL SURREY COUNTY ASYLUM, Guildford.—House-Surgeon. Salary, £80 per annum, with board and lodging. Applications by October 4th to Thomas Taunton.

SUNDERLAND AND BISHOPWEARMOUTH INFIRMARY.—Honorary Physician. Applications by October 4th to T. Robinson, Esq.

THE KILBURN, MALDA VALE, AND ST. JOHN'S WOOD GENERAL DISPENSARY.—Two Honorary Vacancies on Medical Staff. Applications by October 19th to T. W. Dobson, Esq., The Dispensary, 13, Kilburn Park Road, N.W.

VICTORIA HOSPITAL FOR CHILDREN, Chelsea.—House-Surgeon. Honorarium, £50 per annum, with board and lodging. Applications by October 4th to Commander Blount, R.N., Secretary.

WEST BROMWICH DISPENSARY HOSPITAL.—House-Surgeon. Salary, £80 per annum, with board, etc. Applications by October 2nd to W. Bache, Esq., Churchill House, West Bromwich.

WIRRELL CHILDREN'S HOSPITAL, Birkenhead.—Resident House-Surgeon. Salary, £40 per annum, with board and lodging. Applications by October 6th to the Honorary Secretary.

WORCESTER GENERAL INFIRMARY.—Surgeon. Applications by October 10th to W. Stallard, Esq., Worcester Chambers, Pierpoint Street, Worcester.

MEDICAL APPOINTMENTS.

COLLIER, Joseph, M.B., B.S. Lond., F.R.C.S. Eng., re-elected Resident Surgical Officer to the Manchester Royal Infirmary.

WEBB, Malcolm, M.D. Lond., re-elected Resident Medical Officer to the Manchester Royal Infirmary.

MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

WEDNESDAY.—Obstetrical Society of London, 8 P.M. Specimens will be shown by Dr. Lewers and Dr. John Phillips. Papers: Dr. Swayne and Dr. Cox: Cases of Rupture of the Uterus. Mr. Alban Doran: Papilloma of Fallopian Tube. Dr. Champneys: On the Obstetrics of the Kyphotic Pelvis.

FRIDAY.—Clinical Society, 8.30 P.M. Dr. Charles Wood Turner: A Case of Congenital Malformation of the Heart, with Systolic and Pre-diastolic Basic Murmurs, with observations on the causation of *bruits* preceding the cardiac sounds. Mr. Pearce Gould: A Case of Undeveloped Sexual Organs associated with Congenital Defect of the Tonsils. Mr. H. Treves: A Case of Pulsating Tumour of the Head with Raynaud's Disease. Mr. Butlin: Further Notes of a case of Renal Lithotomy, published in the *Transactions of the Society*, Vol. xv, p. 113, 1882. Living Specimen: Mr. Treves' case of Pulsating Tumour of the Head.

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.

MEREDITH.—On September 26th, at 6, Queen Anne Street, Cavendish Square, W., the wife of W. A. Meredith, M.B., C.M., of a daughter.

MARRIAGES.

BURDWOOD-WARING.—September 28rd, at Holy Trinity Church, Colchester, Essex, by the Rev. J. B. Early, Dr. James Watson Burdwood, Medical Officer of Health, of West Cottage, Bourne, Lincolnshire, to Caroline Raymond (Mrs. Henry Waring), of Lessenden Villa, Lexden Road, Colchester, Essex. No cards.

COLDSTREAM-FRASER.—At Queen's Road Presbyterian Church, Brighton, on September 28th, by the Rev. Donald Fraser, D.D., London, uncle of the bride, assisted by the Rev. A. Hamilton, D.D., Brighton, Alexander Robert Coldstream, M.D., F.R.C.S.E., Florence, to Jane Speirs Playfair, eldest daughter of the Rev. William Fraser, M.A., Brighton.

CORRIE-CAMPBELL.—On September 22nd, in the parish church, St. Peter's, Port, by the Rev. G. E. Lee, M.A., rector, assisted by the Rev. F. E. Lowe, M.A., vicar of St. Stephen's, and the Rev. E. Hoskins, M.A., rector of St. Mary Magdalene, London, Edward Kinnersly Corrie, sole surviving son of Miss Jessie Corrie, F.R.C.S., to Mary Louise, eldest daughter of J. H. Campbell, The Hermitage, Guernsey.

LONDON-HOSKING.—At St. Alban's Road, Edinburgh, on September 23rd, by the Rev. Pearson Macadam, M.A., John A. London, M.B., C.M., of Leyton, Essex, to Jessie Fanny Louise, eldest daughter of John Hosking, Esq.

OPERATION DAYS AT THE LONDON HOSPITALS.

MONDAY......10.30 A.M.: Royal London Ophthalmic.—1.30 P.M.: Guy's (Ophthalmic Department); and Royal Westminster Ophthalmic.—2 P.M.: Metropolitan Free; St. Mark's; Central London Ophthalmic; Royal Orthopaedic; and Hospital for Women.—2.30 P.M.: Chelsea Hospital for Women.

TUESDAY9 A.M.: St. Mary's (Ophthalmic Department).—10.30 A.M.: Royal London Ophthalmic.—1.30 P.M.: Guy's; St. Bartholomew's (Ophthalmic Department); Royal Westminster Ophthalmic.—2 P.M.: Westminster; St. Mark's; Central London Ophthalmic.—2.30 P.M.: West London; Cancer Hospital, Brompton.—4 P.M.: St. Thomas's (Ophthalmic Department).

WEDNESDAY ..10 A.M.: National Orthopaedic.—10.30 A.M.: Royal London Ophthalmic.—1 P.M.: Middlesex.—1.30 P.M.: St. Bartholomew's; St. Mary's; St. Thomas's; Royal Westminster Ophthalmic.—2 P.M.: London; University College; Westminster; Great Northern Central; Central London Ophthalmic.—2.30 P.M.: Samaritan Free Hospital for Women and Children; St. Peter's.—3 to 4 P.M.: King's College.

THURSDAY10.30 A.M.: Royal London Ophthalmic.—1 P.M.: St. George's.—1.30 P.M.: St. Bartholomew's (Ophthalmic Department); Guy's (Ophthalmic Department); Royal Westminster Ophthalmic.—2 P.M.: Charing Cross; London; Central London Ophthalmic; Hospital for Diseases of the Throat; Hospital for Women.—2.30 P.M.: North-west London; Chelsea Hospital for Women.

FRIDAY9 A.M.: St. Mary's (Ophthalmic Department).—10.30 A.M.: Royal London Ophthalmic.—1.15 P.M.: St. George's (Ophthalmic Department).—1.30 P.M.: Guy's; Royal Westminster Ophthalmic.—2 P.M.: King's College; St. Thomas's (Ophthalmic Department); Central London Ophthalmic; Royal South London Ophthalmic; East London Hospital for Children.—2.30 P.M.: West London.

SATURDAY9 A.M.: Royal Free.—10.30 A.M.: Royal London Ophthalmic.—1 P.M.: King's College.—1.30 P.M.: St. Bartholomew's; St. Thomas's; Royal Westminster Ophthalmic.—2 P.M.: Charing Cross; London; Middlesex; Royal Free; Central London Ophthalmic.—2.30 P.M.: Cancer Hospital, Brompton.

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. Th. 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. F., 1; Ophthalmic Department, W., 1; Ear, Th., 2; Skin, Th., 2; Throat, Th., 2; 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. 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; Obstetrics, M. Tu. Th. F., 1.30; Eye, M. Tu. Th. F., 2; Ear, S., 1.30; Skin, W., 1.45; G., 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. Communications 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, send one or two Duplicate Copies to the Editor, 161A, Strand, W.C., London. We cannot undertake to return manuscripts not used.

INSTRUCTION IN HOSPITALS.

In the list of hospitals where instruction is given, published in the *BRITISH MEDICAL JOURNAL*, page 556, *et seq.*, the name of the Throat Hospital, Golden Square, London, was omitted.

We are informed that Mr. Startin has ceased to be a member of the staff of St. John's Hospital for Diseases of the Skin.

THE EVOLUTION OF PATHOGENIC ORGANISMS.

MR. WILLIAM SYKES, M.R.C.S. (Moxborough) writes: There are two rival theories of the origin of zymotic disease: one, that they have their birth in unsanitary conditions to which their victims are exposed—the *de novo* theory—now little accepted; the other, that each case has its birth in the infective material left by previous outbreaks, expressed in the formula "*omnis typhoidis ē typhoide*." Does not the bacterial theory of origin of this class of diseases provide an explanation of the apparently anomalous cases which occur which cannot be explained by the above formula? If the infective material in each case is a microzyme, one can imagine that it has a possibility of external life unconnected with the human frame; that it was originally, in fact, a harmless creation or development which, accidentally conveyed into the circulation, found there a suitable soil for growth and development, and, by the theory of natural selection, of increased vigour. But that other microzymes of the same species remained (and remain) as scanty growths sparsely scattered under less favourable conditions, which may occasionally find accidental entry into the human economy, as, in the first instance, must have been the case with the original *matrices morbi*. We find, then, that there is no specificity in zymotic disease; that the low forms of life causing it exist partly in, partly out of, the body; that the body provides a soil of superior fertility, and that, therefore, the microzymes in it flourish more, increase more rapidly, and are more numerous, than those outside it; that, therefore, most outbreaks of zymotic disease originate in the numerous and vigorous microzymes thrown off in the secretions of previously diseased persons; but that a small number of cases are produced by the accidental introduction of the weaker and less numerous external microzymes, and are examples of the anomalous *de novo* origination of disease.

More numerous observations must be made on the life-history of microzymes, their behaviour under a series of cultivations in unfavourable natural media, for example, earth or water. Careful search must be made among media not infected by the bacteria of disease for growths resembling these microzymes attenuated by cultivation in unfavourable environments.

PROTRACTED PREGNANCY.

MR. S. W. WOOLLETT (Southwold) writes: The following case is, I think, of interest medico-legally, and I should be very glad to have the opinion of any gentleman of the medical profession on it.

A girl, aged 16, is stated to have repeatedly had connection with a man, the last occasion being on the night of June 12th, 1885. Her menstruation had ceased on June 10th, and since that date has not recurred. I was called to visit her on the night of March 19th, 1886, having previously been engaged to attend her in her confinement. I found the labour-pains strong and regular, and the patient was greatly troubled with vomiting. On examination *per vaginam*, I discovered the os dilated to the size of a shilling, and I felt the membranous bag tense and presenting. I saw her again on the next day. The os was then dilated to the size of a florin, but the pains were feeble, and the vomiting had ceased. On March 21st, the pains were entirely absent. On March 22nd, milk had appeared in both breasts. For the next ten days or so, I attended the patient daily. She suffered from intense frontal headache, frequent vomiting, hæmorrhage from the bowels, and abnormal temperature. On the evening of April 23rd, she was confined naturally of a well developed female child, unfortunately not weighed at the time. From June 12th, 1885 (the date of the last admitted connection), to March 19th, 1886 (the date of the first symptoms of labour), an interval of 280 days took place. From June 12th, 1885, to April 23rd, 1886 (the date of confinement), an interval of 315 days took place. Judging from the absence of menstruation, the attempt at labour on March 19th (the normal date), the appearance of lactation three days later, and the excessive disturbance of the patient's system for the next month, is it possible for a sexual connection taking place on June 12th, 1885, to result in the birth of a child on April 23rd, 1886?

Simpson has recorded cases of protraction, in which pregnancy extended 336, 332, 319, and 324 days after the cessation of the last menstrual period. Dr. Meadows has mentioned a case that extended over ten months. Numerous other instances have been recorded by well known obstetricians. Dr. Playfair has, in his work on *Midwifery*, described two cases very similar to mine.

I think it is time that steps should be taken, not to fix the duration of pregnancy, but to relieve the mind of the unprofessional public of the absurd notion that protraction beyond a rigid period of time is impossible. Is the human race so distinct from all other species of living beings that separate laws should be created for it? It is a well admitted fact that cows and mares are subject to protracted pregnancies; why not women?

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

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BOOKS, ETC., RECEIVED.

- Clinical Manual for the Study of Medical Cases. Edited by James Finlayson, M.D. London: Smith, Elder and Co. 1886.
- The Science and Practice of Midwifery. By Dr. W. S. Playfair. Vols. I and II. London: Smith, Elder and Co. 1886.
- South Africa as a Health-Resort. By Arthur Fuller, M.B., C.M. London: W. B. Whittingham and Co. 1886.
- The Normal and Pathological Histology of the Human Eye and Eyelids. By C. F. Pollock, M.D., F.R.C.S., F.R.S. London: J. and A. Churchill. 1886.
- A Manual of Diseases of the Nervous System. By W. R. Gowers, M.D. Vol. I. London: J. and A. Churchill.
- Ambulance Work, Illustrated. Lectures by R. Lawton Roberts, M.D. Second Edition. London: H. K. Lewis. 1886.
- The Diagnosis and Treatment of Syphilis. By Tom Robinson, M.D. London: J. and A. Churchill. 1886.

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