

ASSOCIATION INTELLIGENCE.

WARD COUSINS'S PRIZE.

THE Council of the British Medical Association offer the sum of £20 as a prize for the best essay on "The Pathology and Treatment of Abortion." The competition is open to all general practitioners who are members of the British Medical Association. Each essay must be sent, under a mark or motto, with a sealed letter containing the name and address of the writer, addressed to the General Secretary, on or before June 30th, 1887. The prize will be presented at the Annual Meeting of 1887.

November 9th, 1886.

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.—A Special General Meeting of the Branch will be held at the School of Mines, on Friday, December 3rd, at 8 p.m., when certain resolutions, relating to the increase of Members of the Council of the Branch, and to the work of the District Branches, will be submitted by the Council for approval. This special general meeting is also summoned in compliance with the terms of a requisition to the President of the Branch, signed by twenty Members, to consider (1) the relation of the Apothecaries' Society to the Conjoint Examining Board of England and Wales; (2) the proposed representation of Licentiate of the Royal College of Physicians, and of Members of the Royal College of Surgeons, upon the Councils of their respective Colleges; (3) the preparation of a petition to the Colleges, requesting them to receive deputations from the meeting; (4) the publication of the resolutions that may be passed at the meeting, and requests to other Branches for their co-operation in these various matters; (5) the appointment of a special committee to carry out the above resolutions. The Council of the Branch, while complying with the by-law which enjoins the holding of a general meeting of the Branch, if a requisition to that effect, from twenty Members of the Branch, is laid before it, desires it to be understood that the Council, in thus obeying the by-laws, does not express any opinion upon the objects for which the meeting is hereby summoned.—W. CHAPMAN GRIGG, M.D., and GEORGE EASTER, M.B., Honorary Secretaries.

METROPOLITAN COUNTIES BRANCH: EAST LONDON AND SOUTH ESSEX DISTRICT.—The next meeting will, by the kind invitation of Dr. Adams, take place at Brooke House, Upper Clapton, on Thursday, December 16th, at 8.30 p.m. The chair will be taken by C. T. Aveling, Esq., M.D. A Demonstration of interesting cases of Nervous Diseases will be given by W. B. Hadden, Esq., M.D.—JOSEPH W. HUNT, Honorary Secretary, 101, Queen's Road, Dalston.

SOUTH WALES AND MONMOUTHSHIRE BRANCH.

THE autumn meeting of this Branch was held at Merthyr on November 11th; H. N. DAVIES, Esq. (Cymmer), occupied the chair, and thirty-five members of the Branch were present.

New Member.—Mr. David Davies, of Builth, was elected a member of the Association and Branch.

Papers, etc.—Mr. J. FARRANT FRY (Swansea) read notes of an interesting case of suprapubic cystotomy. The stone was a small one; no rectal bag was used; the patient recovered.—Messrs. Talford Jones, Edwards, the President, Evan Jones, Cresswell, S. H. Steel, Sheen, T. W. Parry, Taylor, and Devonald, joined in the discussion which followed.

Dr. S. H. STEEL (Abergavenny): Case of Strangulated Umbilical Hernia, with excision of six inches of the ileum; death four days after the operation.—The President, and Messrs. Edwards, Sheen, Parry, and Brown, joined in the discussion on this paper.

The PRESIDENT mentioned a case of Abdominal Hydatids which he had brought before the Section of Obstetric Medicine at the Cardiff meeting. Mr. Jacobson operated on the case at Guy's Hospital, making a large abdominal section. The patient survived the operation forty hours.

Dr. TAYLOR (Cardiff) showed an ingenious double truss for inguinal hernia, of American invention, made of steel and vulcanite.

Dr. TALFOURD JONES (Brecon) showed specimens of hypodermic solutions, made more than twelve months ago, which remained perfectly clear.

Dr. EDWARDS (Cardiff) urged the pre-eminent qualifications of Sir Walter Foster and Mr. Wheelhouse for seats in the Medical Council as direct representatives of the medical profession.

Dinner.—The members and visitors present afterwards dined at the Castle Hotel, Merthyr.

ABERDEEN, BANFF AND KINCARDINE BRANCH.

THE November meeting of this Branch was held at 198 Union Street, Aberdeen, on Wednesday, the 17th November; the President, Dr. URQUHART, being the chair.

Nomination of Members.—Three new members were nominated for election as ordinary members of the Branch at its next meeting.

A communication from the General Manager respecting the Transatlantic Steamships Medical Service was read, and referred to the President and Secretaries.

Obituary Notices.—Dr. URQUHART called the attention of the meeting to the great loss the Branch had sustained by the sudden death of two of its most valued members, Professor Dyce Davidson and Dr. Mackie, of Inch, one of its late presidents.

Case of Cystic Bronchocoele.—Dr. EDMOND showed a woman aged 60, suffering from an enormous goitre, which had lasted for thirty years, and had latterly become cystic. Apart from its weight, the tumour had not inconvenienced her in any way, and she had always refused any operative interference.

Microscopical Demonstration.—Dr. ANGUS FRASER exhibited a number of beautiful microscopical preparations, including sections of lung and liver stained by various methods, showing the organisms of pig fever; specimens of sputum with tubercle bacilli; and sections showing the micrococci in septic infection of the kidney. Dr. Fraser explained the Gibbs and Ehrlich-Weigert methods of staining, and the results got by them. He also exhibited Reichart's and the Cambridge rocking microtomes, and described their mechanism and uses.

Diagnosis of Esophageal Stricture.—Professor OGSTON contributed a paper on the Diagnosis of Esophageal Stricture. After remarking on the relative value of the sensations, the use of the probang, and the character of the sounds produced at the site of the stricture, Dr. Ogston related some experiments he had made on the rapidity of the passage of food down the gullet as a means of diagnosis. In the cases of stricture tested, deglutition took from 14 to 16 seconds, while in health an average of 4 seconds sufficed.

Case of Atropine Poisoning.—Dr. JOHN GORDON gave the details of a case of poisoning by atropine, which had been successfully treated. Half a grain of the alkaloid was swallowed, and the patient was seen two hours afterwards. He became quite comatose, the respirations were from eight to ten per minute, and the pulse could scarcely be counted. Apomorphine was administered hypodermically, and this was immediately followed by vomiting. The patient was then made to swallow whisky to the extent of two gills, and slowly recovered.

PRESENTATION.—Mr. Walter Berry, upon leaving Upwell, has been presented with a keyless gold watch, jewelled with rubies, and an address, signed by sixty subscribers.

Dr. JOHN GRIGOR, of Nairn, bequeathed £1,000 each to the Universities of Edinburgh and Aberdeen, for the establishment of two "Grigor" Medical Bursaries.

The Egmont Local Board recently re-appointed Dr. Calderwood, Medical Officer of Health for three years; but the Local Government Board have refused their sanction for more than one year, on account of his being a Poor-Law District Medical Officer.

THE TRAINED NURSES' ANNUITY FUND.—At a meeting of the Committee of the Trained Nurses' Annuity Fund held on November 23rd, Mrs. Bell was elected from fourteen candidates to the Albany Annuity, specially founded in memory of the late Duke of Albany, who was President of the Society.

a clear understanding and right judgment of the grave question submitted for our consideration, renders us unable to do more than give this simple admonition; namely, that it seriously behoves the medical attendant, in such and like cases, not only for his own sake, but for the traditional honour of the profession at large, to take especial care not to lend himself to any clandestine transaction; and further, that, in the instance herein alluded to, the practitioner in question would have acted wisely in his own behalf, and, not improbably, on that of the husband also, had he at once communicated to the latter the fact of the existence of the newly attested will.

The relation of kinship, moreover, of the son and daughter to the "second wife and her second husband" (a somewhat material factor in the case), is not clearly defined in the letter of A. B. C. Be it, however, what it may, we need scarcely remark that, in the contingency of underhand, surreptitious dealing being attempted or suspected in any such matter, the duty of the trusted family attendant is clear and distinct; and should he wittingly fail therein, he might render himself amenable to the charge of collusion.

RUPTURED SPLEEN.

J. A., railway policeman, was admitted into the Newcastle-on-Tyne Infirmary, under the care of Dr. Armstrong, on March 17th, 1886, having been knocked down by a train. He had sustained severe compound fractures of the left leg and thigh, and a fracture of the skull; he died soon after admission. At the post mortem examination there was no bruising of the abdominal wall. The spleen, which weighed 13 ounces, was surrounded by a large quantity of effused blood. It was torn across its middle; it was densely adherent all round—probably the predisposing cause of its rupture, taken with its weight. It will be noticed that there was no bruising of the abdominal walls, and, while perfectly conscious, he never complained of pain in the abdomen, though he did of pain elsewhere.

F. P. MAYNARD, M.B., House-Surgeon.

RIGHTS OF THE LICENTIATES OF THE ROYAL COLLEGE OF SURGEONS OF IRELAND.

INQUIRER writes:—I beg most respectfully to offer a word in supplement of your reply to "E. W. O.," in the JOURNAL of November 20th. Let me briefly point out. 1. The Apothecaries' Act, in England, is inoperative against any one holding a Scotch or Irish qualification: *ergo*, they are legally recognised as having certain rights as apothecaries. See *Glenn's Abstract of the Law Relating to Medical Men*. This is, I believe, admitted by the Society of Apothecaries. Again, holders of Scotch surgical diplomas, according to the same authority, and the literal translation of the Latin in which they are framed, are empowered to practise surgery and pharmaceuticals, or, as *Glenn* renders it "Pharmacy." All we want is an exact definition of that word; meanwhile it is consoling to find that our rights to compound and dispense medicines and supply them, rest on a solid legal basis, as in justice it ought.

QUERY.—On the facts stated, the attendance was given at the master's request and he is therefore liable to pay.

OBITUARY.

BISHOP McDOUGALL, F.R.C.S.

DR. McDOUGALL, whose death occurred somewhat suddenly on November 16th, was one of the few medical men who, having entered the Church, have attained to the episcopal dignity. The deceased prelate was educated at King's College, London, where he was demonstrator of anatomy. He afterwards went to Oxford, and became a clergyman. In 1855 he was appointed Bishop of Labuan and Sarawak, where, when he landed, he found, as he afterwards stated in public in Oxford, that the report of his being to able cure the sick speedily brought numbers to him, and that by constantly ministering to their sufferings, he not only learned to speak their language, but to enter into their feelings better than he could have done by any other kind of intercourse. A successful operation in a case of total blindness from double cataract, and some other striking cases, gave him a good vantage ground and an influence which he believed no amount of mere teaching and preaching could have done. After several years spent in his colonial diocese, the deceased prelate returned to this country, when he was appointed to the living of Mottistone, Isle of Wight. He was also Canon of Winchester and Archdeacon of the Isle of Wight.

SIR JOHN HUMPHREYS, J.P., D.L.

By the death of Sir John Humphreys, which occurred on Saturday last, the coronership for the Eastern Division of Middlesex is rendered vacant, and the county has lost in him one who, for nearly twenty-eight years, conducted the duties of his responsible office with great ability, dignity, and circumspection. On the death of the late Mr. Sergeant Payne, Sir John was elected to be President of the Coroners' Society for England and Wales, and he was consulted by the late Government on the Bill dealing with the office and duties of coroners brought in by them. In our opinion, a medical man, rather than a lawyer, is better adapted for the duties of a coroner, but in Sir John Humphreys we recognise a rare exception. His eminently judicial mind, coupled with an excellent knowledge of surgery (a fact not generally known), peculiarly qualified him for the post; and to these must be added his strong practical sense, and his untiring industry.

Besides the duties of his office as coroner, Sir John at one time took a great interest in Liberal politics, and many Members of Parliament owed their seat in the House to the organising powers and energy he displayed in the conduct of elections. He was more than once invited to seek Parliamentary honours himself, but he always declined. He was of a sound constitution, and enjoyed vigorous health till within the last two years of his life. In the spring of 1885, he had a severe attack of pleurisy and pneumonia, and at one time his life was despaired of, but he pulled through after a long illness, and was able to resume his duties last summer. Some weeks before his death he had a return of his complaint, and was tapped in the chest at Braemar, where he was staying for the benefit of his health. He soon after returned to 20, Devonshire Street, his town residence, and remained under the care of Dr. F. Spurgin until his decease. He was in his seventy-third year, and he leaves a widow and a son and daughter to mourn their loss. He was a J.P. and D.L. of the Tower Hamlets, and in the autumn of 1881, received from Her Majesty the honour of Knighthood.

INDIA AND THE COLONIES.

INDIA.

A FEVER-STRICKEN DISTRICT.—Reference is made in the report recently issued by Major Anderson, the Superintendent of the Revenue Survey, to the Indian fevers which, for the past three or four years, have ravaged North Canara and the adjacent districts to such an extent that it is said that every inhabitant has had, not one, but a dozen attacks during the period. The fever is not severe, but the repeated attacks wear out persons who have little stamina. Many have succumbed, and although the epidemic has somewhat abated, the general health of the inhabitants is said to have sensibly deteriorated. The causes of this outbreak in a hitherto healthy district have not been satisfactorily determined. Major Anderson points out that the moist climate and dense vegetation which are by some supposed to be the cause of the outbreak, are conditions which have always existed, and Canara has never been known to suffer from fever until within the last three or four years. He also alludes to the virtues claimed for Koomree cultivation in allaying malaria.

QUININE v. CINCHONA.—An attempt which was made last year by Government to promote the use of cinchona in the Central Provinces by offering it for sale in small quantities at cost price, has, says an Indian contemporary, proved a failure. People were willing to use cinchona if they could obtain it gratis, but they would not purchase it even at cost price. Quinine, on the other hand, was eagerly purchased, and the authorities have, therefore, given orders that it shall be sold in smaller quantities than hitherto.

SURGERY IN BURMAH.—The repugnance with which certain Oriental races regard surgical operations is well known; the extent to which it prevails in some parts of Burmah will be seen from the statement of a Bhamo correspondent of the *Pioneer*. From this it would appear that the majority of the natives prefer to die, or to live in a horribly maimed and disfigured condition, rather than submit to the knife; and many suffering from severe gunshot-wounds, or fractures of their limbs necessitating amputation, have told the surgeons they preferred death to mutilation. This is not from any religious scruple, but purely from distrust and aversion to the knife. At the same time, they will scar their bodies all over with the actual cautery, or wear holes into their flesh by the continual application of blistering-fluids or mineral caustics. The result of these continual cauterisations, which are much used by the Suans as preventive and not remedial agents, are the formation on numbers of them of huge sores, ulcers, and warts of perfectly phenomenal dimensions. With English medicines, the correspondent observes, they become familiarised comparatively soon, and after they have seen the beneficial effects of self-evident remedies, such as febrifuges and aperients, they run to the other extreme, and demand medicines to cure burns, scars, lame legs, and missing toes and fingers. Surgical science has not proved, from a Burman's point of view, sufficiently practical in its results to convince him of its efficacy. It is related that the first surgical case which Dr. MacGregor, then civil surgeon, had in Bhamo was one of a gunshot-wound through the knee. It being found impossible to save the leg, it was amputated, and healed most successfully. On recovery, the patient was provided with a wooden leg, and stumped about the bazaars paying visits to his friends, who, of course, had long ago given him up as a dead man. The sight, however, was not encouraging to

the Burmans, who said they had never seen a man with only one leg. They thought that, perhaps, it was better the man's life had been saved, but at the same time, unless the English medical man could make a new leg grow in place of the missing one, he was not justified in cutting it off. A short time since, the civil surgeon had some more amputation cases in four wounded elephant-drivers. They had been wounded, and were almost dead. Three of the men, the correspondent believes, died, and one made a marvellous recovery. Though snatched from the very jaws of death, all the merit of saving the man was destroyed in the eyes of the Burmans because he appeared minus a limb.

PUBLIC HEALTH

AND

POOR-LAW MEDICAL SERVICES.

THE REGISTRAR-GENERAL'S QUARTERLY RETURN.

THE Registrar-General has just issued his quarterly return relating to the births and deaths registered in England and Wales during the third or summer quarter of this year, and to the marriages in the three months ending June last. The marriage-rate was considerably below the mean rate in the corresponding quarters of the ten preceding years, and, with two exceptions, was lower than the rate recorded in the corresponding quarter of any year since the establishment of civil registration in 1837. The birth-rate and the death-rate were both below their respective averages. The mean temperature during the quarter was considerably above the average, and the weather generally was favourable to the public health.

The births of 224,029 children were registered in England and Wales during the three months ending September last, equal to an annual rate of 31.9 per 1,000 of the population, estimated by the Registrar-General to be nearly twenty-eight millions of persons. This birth-rate was 1.6 per 1,000 below the mean rate in the corresponding quarters of the ten preceding years 1876-85, but slightly exceeded the exceptionally low rate that prevailed in the third quarter of last year. The birth rate in the quarter under notice ranged in the several counties from 25.8 in Rutlandshire, 26.0 in Herefordshire, and 26.9 in Sussex, to 35.7 in Essex and in Monmouthshire, 35.8 in Northumberland, and 36.0 in Durham. In the twenty-eight large towns for which the Registrar-General publishes weekly returns, the birth-rate last quarter averaged 32.8 per 1,000, ranging from 26.3 in Brighton and 27.2 in Huddersfield, to 40.9 in Preston, and 42.4 in Cardiff. The births registered in England and Wales during the quarter under notice exceeded the deaths by 98,777; this represents the natural increase of the population during that period. From the Board of Trade returns, it appears that 106,791 emigrants sailed from the various ports of the United Kingdom at which emigration officers are stationed; of these 51,405 were English, 8,507 Scotch, and 16,978 Irish. The proportion of British emigrants to a million of the respective populations of the three divisions of the United Kingdom were 1,844 from England, 2,154 from Scotland, and 3,474 from Ireland.

During the third quarter of 1886, the deaths of 125,252 persons were registered in England and Wales, equal to an annual rate of 17.8 per 1,000 of the estimated population; this death-rate was slightly below the average rate in the corresponding quarter of the preceding ten years, although it was 1.3 per 1,000 above the low rate in the corresponding quarter of 1885. Among the urban population of the country, estimated at nearly seventeen millions of persons, the rate of mortality during the quarter under notice was equal to 19.4 per 1,000; in the remaining or chiefly rural population of nearly eleven millions of persons, the rate was 15.4. These urban and rural rates were below their respective averages for the ten preceding corresponding quarters. The rate of mortality last quarter among infants under one year of age was 14.6 above the average; that among children and adults aged between one and sixty years was 9.2 per cent. below the average; and that among persons aged upwards of sixty years showed an excess of 0.9 per cent.

The 125,252 deaths registered in England and Wales during the three months ending September last, included 15,936 which were referred to diarrhoea, 1,995 to measles, 1,957 to whooping-cough, 1,480 to fever (including typhus, typhoid, and simple fever), 1,371 to scarlet fever, 775 to diphtheria, and 21 to small-pox; in all, 23,535 resulted from these principal zymotic diseases, equal to an annual rate of 3.35 per 1,000, which was slightly below the mean rate in the corresponding periods of the ten preceding years. The mortality from diarrhoea showed an excess, and that of measles and of diphtheria corresponded

with the average; while that of each of the other zymotic diseases was considerably below the average. Only 21 deaths resulted from small-pox in the whole of England and Wales during the quarter under notice, a smaller number than in any quarter on record.

THE AVERAGE LONGEVITY IN SWEDEN.

PROFESSOR CURT WALLIS has collected some interesting particulars of the average longevity of the Swedes during the period 1755-1880. He finds that it has been as follows:—

		Men.		Women.
1755-1775	...	34 years	...	37 years
1776-1795	...	35 "	...	38 "
1816-1840	...	40 "	...	44 "
1846-1855	...	41 "	...	45 "
1856-1870	...	42 "	...	46 "
1871-1880	...	45 "	...	49 "

These figures show that, in 1880, men in Sweden enjoyed an average of 11 years longer life, and women of 12 years, than a century ago. The death-rate—which, in 1750, was 28 per mille, and had, in 1800, risen to 30 per mille—was, in 1880, only 18.1 per mille. Professor Wallis ascribes this wonderful improvement to the decrease of the most common epidemic diseases, as, for instance, small-pox, typhoid fever, etc., brought about by sanitary reforms introduced among all classes in Sweden, chiefly during the last quarter of a century. It is also remarkable that old people in Sweden nearly always die from some specific disease, and it is very rarely that anyone suffers a physiological death, succumbing to old age. On the other hand, it appears that two of the most common causes of death among the wealthier classes are paralysis and syncope. This is probably attributable to the excessive consumption of alcoholic liquors prevailing in Scandinavia.

In this respect there is, however, a great improvement in recent years, particularly in Norway. Formerly, it was the custom to say, as an excuse, "that the cold climate necessitated stimulants," but this is now considered an exploded theory. As an example, it may be mentioned that mail-carriers and railway servants, who move about outside the trains while in motion, scout the idea of hot spirits creating bodily warmth in cold weather; they drink hot milk or cocoa instead. Professor Wallis finds that the average longevity among the richer classes in Sweden is about 45 years, whereas among the agricultural and labouring population it is only 35. Swedish journals, in commenting upon these figures, express the opinion that the sanitary and social state of the country, though greatly improved during recent years, still leaves much to be desired.

SOCIETY FOR THE PREVENTION OF HYDROPHOBIA AND REFORM OF THE DOG LAWS.

THE general committee of this Society held its fourth meeting on Friday, November 5th, at the offices, 50, Leicester Square, London, to consider a programme which had been drafted by a subcommittee, and circulated among members and supporters. Mr. Victor Horsley, F.R.S., secretary to the commission on hydrophobia, attended this meeting by invitation, and was unanimously elected a member of the committee. Many letters were read expressing approval of the programme, and regretting that the writers were unable to attend; among them were letters from Professor Axe, Dr. Drysdale, Mr. Hugh Dalziel, Professor Fleming, Dr. Gowers, Mr. W. W. Hunting, Dr. Norman Kerr, Professor E. Ray Lankester, Mr. A. Nicols, Mr. T. S. Price, and Professor Pritchard. The honorary secretary having made a financial statement of a satisfactory nature, the chairman, Colonel R. H. Rosser, briefly explained the care and time given by the subcommittee to the programme, which was then discussed in detail, and ordered to be printed with some additions and alterations. Any persons interested in the question of hydrophobia, can obtain information by writing to Mr. Frank Kerslake, 50, Leicester Square, W.C.

THE HEALTH OF SALFORD.

DR. J. TATHAM's last quarterly health bulletin shows that scarlet fever has been excessively prevalent in Salford during the third quarter of this year, the notified cases numbering no fewer than 550. In no quarter since the passing of the Notification Act in 1882 has the number of scarlet fever attacks in the town approached this figure. Relatively to population, this disease showed the greatest proportional prevalence last quarter in Regent Road, where the attacks were equal to an annual rate of 14.7 per 1,000 living; in Greengate the sickness rate was equal to 12.4, and in Broughton to 11.4; whilst in Pendleton the rate did not exceed 4.5 per 1,000. The 63 registered deaths from scarlet fever are equal to an annual rate of 1.23 per 1,000 of the

Stockholm, and Christiania—the death-rate averaged only 19.8, and ranged from 17.5 in Stockholm to 21.5 in Copenhagen; diphtheria and croup caused 10 deaths in Christiania, 4 in Copenhagen, and 2 in Stockholm; 6 fatal cases of whooping-cough were reported in Copenhagen, and 3 of scarlet fever in Christiania. In Paris, the death-rate was equal to 22.3, showing a further slight increase upon the rates in recent weeks, and exceeding the rate during the same week in London by 4.9; the deaths included 21 from typhoid fever, 19 from diphtheria and croup, and 3 from small-pox. The 155 deaths in Brussels, of which 4 resulted from croup, and 3 from "fever," was equal to a rate of 18.5. The rate in Geneva was 20.2, and the deaths included 2 fatal cases of measles. In the three principal Dutch cities—Amsterdam, Rotterdam, and the Hague—the mean death-rate was 22.8, the several rates being 18.9 in Amsterdam, 23.1 in Rotterdam, and 32.6 in the Hague; the 87 deaths in the last-mentioned city included 9 from measles, and 4 from croup; whooping-cough caused 4 and diphtheria 3 deaths in Amsterdam; and in Rotterdam 2 fatal cases of scarlet fever and 2 of measles were returned. The Registrar-General's table includes nine German and Austrian cities, in which the death-rate averaged 26.9, and ranged from 21.2 in Berlin, and 23.1 in Dresden, to 39.5 in Buda-Pesth, and 40.3 in Trieste. Small-pox caused 73 deaths in Buda-Pesth, 3 in Hamburg, 1 in Vienna, and 1 in Prague; 34 deaths from cholera were reported in Trieste and 10 in Buda-Pesth; diphtheria mortality showed the largest excess in Hamburg, Dresden, Prague, and Berlin; and scarlet fever caused 13 deaths in Buda-Pesth. The death-rate was equal to 22.6 in Rome and to 22.9 in Venice; small-pox caused 8 deaths in Rome and 2 in Venice; and typhoid fever 6 in Rome and 2 in Venice. The death-rate was 45.2 in Cairo and 41.5 in Alexandria; diarrhoeal diseases caused 137 deaths in Cairo and 44 in Alexandria; 15 deaths from typhoid fever occurred in Cairo, and 7 from diphtheria in Alexandria. In four of the largest American cities, the recorded death-rate averaged 22.1, and ranged from 18.5 in Baltimore, to 24.3 in New York. Diphtheria and croup caused 25 deaths in Brooklyn, 36 in Philadelphia, and 12 in Baltimore; 17 fatal cases of typhoid fever were reported in New York, 5 in Brooklyn, and 16 in Philadelphia.

REPORTS OF MEDICAL OFFICERS OF HEALTH.

WIMBORING.—Dr. Raiton devotes a considerable portion of his excellent report to statistics. He carefully classifies the mortality according to disease, age, and locality, and, in each case, compares the returns with those of the five preceding years. The death-rate for the whole district, during 1885, was 13.9 per 1,000, a slight increase upon the average. The deaths of children under five were 67 in number, or 3.7 per 1,000 of the population. Of these, 48 were deaths of infants under one year. This being such an important factor in the general death-rate, Dr. Raiton considers the causes of these deaths, with a view to determine how far they are preventable. He thinks that many of the deaths ascribed to pulmonary, infectious, and diet diseases might have been avoided. The public ignore the serious nature of these complaints when attacking the very young, and a little more care on the part of parents would considerably lessen the mortality. The total number of deaths from zymotic diseases was 18, giving a rate of 1.0 per 1,000, and, of these, 7 were from measles and 8 from whooping-cough. Neither of these diseases is required by the sanitary authority to be followed by any precautions for preventing the spread; and there is no doubt that they prevail to a great extent. The district was comparatively free from fevers. The cases of scarlet fever reported from time to time were in no way epidemic, and were of a very mild character. One case of small-pox had to be dealt with, the origin of which could not be traced. The greatest precautions were taken, and there was no spread.

BRAINTREE RURAL DISTRICT.—The number of deaths during the year 1885, including those of persons outside the district, was 365, being at the rate of 17.82 per 1,000. There were 20 deaths from zymotic diseases (as compared with 41 in the previous year), eight of which were from diphtheria. There were five outbreaks of scarlet fever, the number of fatal cases being four. The usual precautions, including isolation and disinfection, were taken. Mr. Abbott advocates isolation as the best means of limiting the spread of infectious disease; and suggests, as being less costly, the provision of one of Decker's portable houses, in preference to securing a cottage, which must always be kept in readiness.

SOUTH CROSLAND.—Mr. T. Smailes has to report a higher death-rate for 1885 than has been returned for several years. The total number of deaths was 69, yielding a rate of 22.62 per 1,000, against 66 births. It is noteworthy, in examining the causes of this high rate, that infant-mortality was much below the average, and there was not a single death from zymotic diseases. Comparing the returns for a series of years, Mr. Smailes is able to show that the death-rate for the five years 1881-85 was much below that for the years 1876-80. Thirty-three of the deaths occurred in adults over fifty years of age, and a large proportion was due to diseases of the heart and lungs. Of these, 10 were caused by consumption, and Mr. Smailes expresses the hope that this most insidious and fatal disease may be brought under control, so as to lessen still further the gradually reducing death-rate of the country. As a means to this end, much time and attention were devoted to the dwellings of the poorer classes, and their sanitary surroundings. The drainage of the town is being improved, and much good will result, though it may not be at once perceptible.

HOSPITAL AND DISPENSARY MANAGEMENT.

ABINGDON COTTAGE HOSPITAL.

ABINGDON, a town of 7,000 inhabitants, has at last, thanks to the energy and munificence of its late member, J. C. Clarke, Esq., supplied a long felt want, by the erection of a Cottage Hospital. The Hospital contains eight beds in two wards of three beds each, and two single-bedded wards for serious cases; two bath-rooms, convalescent, operating, and out-patient rooms. It will be worked by the four medical men of the town, and there will be a resident matron who will also act as dispenser. The land on which the building stands was generously given by the governors of Christ's Hospital, Abingdon, and the entire cost of the building has been defrayed by Mr. Clarke. A sum of £2,000 has already been collected in the town and neighbourhood, and will be invested as a nucleus of capital, the interest on which will go to meet the annual expenditure. Sums of £100 and £50 per annum have been promised by local charities. It is proposed to make a small charge, according to a scale to be fixed by the Committee of Management in the case of in-patients who can afford to pay.

EARLSWOOD IDIOT ASYLUM.

THE report read at the half-yearly meeting of the Earlswood Idiot Asylum was of a satisfactory character. It was stated that the year's receipts were £32,971, the expenditure amounting to £26,862. There were 148 candidates for the benefits of the charity, and the vacancies at the disposal of the authorities permitted of their receiving thirty-five new inmates into the asylum, of whom five would be taken from the part-payment list, composed of cases in which the friends of the applicants guaranteed from £15 to £36. They attributed their prosperous financial condition mainly to the extraordinary zeal of the friends of unsuccessful cases, which brought increased support to the charity. The institution shelters under its roof 566 inmates, of whom only 258 are able to engage in any industrial occupations.

MEDICAL NEWS.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—The following gentlemen passed the First Professional Examination in Anatomy and Physiology for the Diploma of Fellow at a meeting of the Board of Examiners on November 22nd.

G. W. Ridley, student of Newcastle-on-Tyne Infirmary; T. H. R. Crowle, of St. Mary's Hospital; T. Wholey, of London and Newcastle; E. A. Sadler, of Queen's College, Birmingham; E. Evans, of Cambridge and St. Mary's Hospital; W. P. Stocks, of Owens College, Manchester; and H. E. Whitehead and A. Lucas, of St. Bartholomew's Hospital.

Passed on the 23rd.

W. H. Dolamore, of St. Mary's Hospital; G. G. Borrett, of London Hospital; E. H. Douty, of King's College and Cambridge University; F. Lacey, of Bristol Medical School; F. F. Blackman and T. J. Dyall, of St. Bartholomew's Hospital; W. W. Hall, of Edinburgh and St. Mary's; and E. J. P. Olive, of Cambridge University.

UNIVERSITY OF LONDON.—The following is a list of the candidates who have passed the recent M.B. examination.

Pass-list.—First Division.—E. F. Bright, University College; F. F. Burghard, Guy's Hospital; A. Carless, King's College; L. C. T. Dobson, St. Bartholomew's Hospital; L. M. Gabriel, St. Bartholomew's Hospital; E. Goodall, Guy's Hospital; W. J. Gow, St. Bartholomew's Hospital; G. E. Halstead, B.A., B.Sc., Guy's Hospital; R. Johnson, University College; O. J. Kaufmann, Manchester, Owens College, and St. Mary's Hospital; W. Fernewan, University College; W. G. Spencer, St. Bartholomew's Hospital; E. F. Trevelyan, St. Bartholomew's Hospital; A. F. Voelcker, University College; J. W. Washbourn, Guy's Hospital; R. B. Wild, Manchester and Owens College; C. W. F. Young, St. Bartholomew's Hospital.

Second Division.—S. R. Alexander, Guy's Hospital; K. N. Bahadurji, University College; A. W. Burrell, London Hospital; G. A. Carpenter, St. Thomas's Hospital; E. R. St. C. Corbin, University College; F. A. Cox, St. Mary's Hospital; E. L. De Chazal, University College; H. W. Gardner, St. Bartholomew's Hospital; W. T. Gardner, St. Bartholomew's Hospital; F. C. Hart-Smith, University College; W. H. Horrocks, University College; J. S. Hutton, St. Thomas's Hospital; S. C. Jones, University College; C. D. Muspratt, Guy's Hospital; S. E. Prall, Guy's Hospital; W. H. R. Rivers, St. Bartholomew's Hospital; J. A. Smith, St. Bartholomew's Hospital; A. E. Taylor, Guy's Hospital; F. S. Toogood, University College.

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, November 18th, 1886.

England, George Fuller Ashbridge, M.R.C.S., Winchester.
Lewis, David Thomas, Brunswick House, Stoke Newington Road, N.
Walsh, Robert William, M.R.C.S., The Priory, Lincoln.
Walters, Walter Scott, M.R.C.S., 10, Chepstow Villas, Bayswater.

MEDICAL VACANCIES.

The following vacancies are announced.

- BALLYMENA UNION.**—Medical Officer, Ahogill Dispensary. Salary, £75 per annum, and fees. Applications to Mr. William Miller, Honorary Secretary, Election on December 6th.
- BIRMINGHAM BORO' ASYLUM.**—Resident Clinical Assistant. Applications to E. B. Whitcome, Esq.
- GLAMORGANSHIRE AND MONMOUTHSHIRE INFIRMARY AND DISPENSARY.** Cardiff.—Honorary Ophthalmic Surgeon. Applications by December 4th to the Secretary.
- GLASGOW HOSPITAL FOR SICK CHILDREN.**—Resident House-Surgeon. Salary, £60 per annum, with board, etc. Applications by November 30th to the Secretary.
- HOSPITAL FOR CONSUMPTION,** Brompton.—Resident Clinical Assistants. Applications by December 18th to the Secretary.
- HOSPITAL FOR WOMEN,** Soho Square, W.—Clinical Assistants. Applications to the Dean.
- HULL ROYAL INFIRMARY.**—Junior Assistant House-Surgeon. Salary, £50 per annum, with board and apartments. Applications by November 30th to the Chairman of the House Committee.
- KENSINGTON DISPENSARY.**—Resident Medical Officer. Salary, £125 per annum, with apartments, etc. Applications by December 4th to Frederick Leach, Esq., 7, Stanford Road, Kensington Square, W.
- METROPOLITAN LUNATIC ASYLUM.**—Assistant Medical Officer. Salary, £120 per annum, with board, etc. Applications to M. D. Parker Dixon, Esq., 13, Gray's Inn Square, W.C.
- MORPETH DISPENSARY.**—Resident Medical Officer. Salary £120 per annum, with apartments. Applications by November 30th to G. O. Wright, Esq.
- MOULSFORD LUNATIC ASYLUM,** Berks.—Medical Superintendent. Salary, £500 per annum. Applications by December 3rd to J. T. Morland, Esq., Clerk to the Visitors, Abingdon.
- NORTH-EASTERN HOSPITAL FOR CHILDREN,** Hackney Road, E.—Junior House-Surgeon. Salary, £70 per annum. Applications by December 4th to A. Nixon, Esq., 27, Clement's Lane, E.C.
- NORTH LONDON HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST.**—Two Physicians.—Applications by December 4th to the Secretary, 216, Tottenham Court Road, W.C.
- ROYAL MATERNITY CHARITY.**—Physician. Salary, £60 per annum. Applications by December 8th to J. W. Long, Esq., 31, Finsbury Square, E.C.
- SALOP INFIRMARY,** Shrewsbury.—House-Surgeon. Salary, £100 per annum, with board and residence. Applications by December 4th to the Board of Directors.
- SCARBOROUGH UNION.**—Medical Officer and Public Vaccinator. Salary, £80 per annum, and fees. Applications by December 1st to W. O. Woodall, Esq.
- UNIVERSITY COLLEGE,** Bristol.—Medical Tutor. Stipend, £100 per annum. Applications by December 4th to E. Markham Skerritt, M.D.
- VICTORIA HOSPITAL FOR CHILDREN,** Chelsea, S.W.—Resident Medical Officer. Applications by December 6th to the Secretary.
- WALLASEY DISPENSARY.**—House-Surgeon. Salary, £120 per annum. Applications by November 29th to Mr. W. Heap, Elm Mount, Liscard, near Birkenhead.
- WEST LONDON HOSPITAL.**—House-Surgeon. Applications by December 9th to the Secretary.
- WHITECHAPEL UNION.**—Medical Superintendent. Salary, £250 per annum, with apartments, etc. Applications by November 29th to William Vallance, Esq.
- WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL.**—Resident Assistant.—Applications by December 13th to the Chairman of the Medical Committee.

MEDICAL APPOINTMENTS.

- BLAKENEY,** J. H. M.R.C.S.Eng., L.R.C.P., appointed Resident Medical Officer to the Ramsgate and St. Lawrence Royal Dispensary, and Seamen's Infirmary, vice F. R. Anness, M.R.C.S., L.R.C.P., resigned.
- BURRELL,** A. W., M.B.Lond., M.R.C.S., L.R.C.P., appointed House-Surgeon to the London Hospital.
- CARLYON,** T. B., M.R.C.S., L.S.A., appointed Medical Officer to the Redruth Union Workhouse.
- EDMOND,** G. M., M.D., appointed Physician to the Aberdeen Hospital for Incurables, vice A. Dyce Davidson, M.D., deceased.
- EVANS,** C. S., M.R.C.S., L.S.A., appointed Resident House-Physician to St. Thomas's Hospital.
- GODFREY,** A. E., L.R.C.P., M.R.C.S., appointed Resident Accoucheur to St. Thomas's Hospital.
- HAYLES,** Clements, M.D.Edin., appointed Medical Officer to the Redland Branch of the Clifton Dispensary.
- JONES,** S. H., M.R.C.S., L.S.A., appointed Assistant House-Surgeon to St. Thomas's Hospital.
- LICHFIELD,** J. W., L.R.C.P.Lond., L.S.A., appointed Junior Assistant Medical Officer to the Hants County Asylum, vice G. F. Collins, M.R.C.S.Eng., resigned.
- MAKINS,** G. H., F.R.C.S.Eng., appointed Assistant Surgeon to St. Thomas's Hospital, vice A. O. MacKellar, Esq., F.R.C.S.Eng., resigned.
- MITCHELL,** Adam, L.R.C.S.I., L.K.Q.C.P.I., appointed Medical Officer to the Roscrea Union.
- MONTAGUE,** A. J. H., L.R.C.P., M.R.C.S., L.S.A., appointed non-Resident House-Physician to St. Thomas's Hospital.
- MOXON,** Henry J., L.D.S., appointed Dental Surgeon to the Westminster Union Schools.
- NAIRN,** R., L.R.C.P., M.R.C.S., appointed Ophthalmic Clinical Assistant to St. Thomas's Hospital.

- NICHOL,** F. E., L.R.C.P., M.R.C.S., appointed House-Surgeon to St. Thomas's Hospital.
- PRATT,** Reginald, M.D., M.R.C.S., L.S.A., appointed Assistant Surgeon to the Leicester Infirmary.
- RITCHIE,** E. D., M.B., C.B.Cantab., M.R.C.S., L.S.A., appointed House-Surgeon to St. Thomas's Hospital.
- SMYTH,** H. J., L.R.C.P., M.R.C.S., appointed Clinical Assistant in the Skin Department to St. Thomas's Hospital.
- SOLLY,** E., M.R.C.S., L.S.A., appointed Clinical Assistant in the Ear Department, to St. Thomas's Hospital.
- STABB,** E. C., L.R.C.P., M.R.C.S., L.S.A., appointed Clinical Assistant in the Throat Department, to St. Thomas's Hospital.
- STAVELEY,** W. H. C., L.R.C.P., M.R.C.S., appointed Assistant House-Physician to St. Thomas's Hospital.
- SUMPTER,** Walter John Ernely, M.R.C.S.Eng., appointed Surgeon and Agent to the Admiralty, at Sherringham, Norfolk.
- TOTSUKA,** K., L.R.C.P., M.R.C.S., appointed Assistant House-Surgeon to St. Thomas's Hospital.
- WHEATON,** S. W., L.R.C.P., M.R.C.S., appointed Resident House-Physician to St. Thomas's Hospital.

PRICE OF CUCAINE.—The prescribers of cucaine have noted with much satisfaction the great reduction in the price of the drug which has in recent months occurred. Whereas, two years ago, the retail price was two shillings a grain, and even more, the same quantity is now sold for twopence, or even less. The lessened price has been caused by the large production of the drug that its sudden notoriety called forth.

ILLEGAL PRACTICE IN NEW YORK.—The report of the Board of Censors of the Medical Society of New York stated that over two hundred cases of alleged illegal practice had been investigated, and that in every case where the law had been violated the offender had been convicted and punished. This vigorous action might serve as an example for certain Censors nearer home.

THE NEW YORK ACADEMY OF MEDICINE.—The New York Academy of Medicine has received the munificent gift of 25,000 dollars from Mrs. Worreishoffer, in memory of her late husband. The gift is intended to assist the Academy, which has been in existence for forty years, to erect a building better adapted to meet its extended needs than the house it at present occupies. The fund now available for this purpose amounts to 200,000 dollars.

A CHEMIST'S WIDOW.—An action was recently taken by the Pharmaceutical Society against the widow of a qualified chemist at Warwick for alleged infractions of the Act. It was stated that the defendant took no part in the business, which was conducted by a duly qualified registered person, and that she merely received the profits for the benefit of her family. The Society contended that an executrix was not entitled to continue permanently a chemist's business. The Judge gave a verdict for the defendant, but granted a case for a superior court.

MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

- MONDAY.**—Medical Society of London. Clinical Evening. Mr. Herbert Allingham: Lateral Displacement of Patella; Pes Gigas with congenital malformation. Mr. Edmund Owen: Children after Knee-joint Abscess. Dr. Stephen Mackenzie: Paralysis of Extensors of one Forearm. Mr. Bruce Clarke: Case of very obstinate Cystitis treated by constant current, and other cases.
- WEDNESDAY.**—Obstetrical Society of London, 8 p.m. Specimens will be shown by Mr. Doran and others. Papers.—Dr. Dakin: Mercurialism in Lying-in Women. Dr. Pedley: Midwifery among the Burmese. Dr. Gibbons: Case of Galactorrhœa.
- THURSDAY.**—Harveian Society of London, 8.30 p.m. Third Harveian Lecture by Dr. John Williams: On Cancer of the Uterus.
- FRIDAY.**—West London Medico-Chirurgical, 8 p.m. Pathological Specimens by Mr. H. Percy Dunn. Dr. Savill: Icthyosis Sebacea; Melanoderma; Tubercular Syphilide. Mr. Edwards: A case of Excision of the Rectum. Papers.—Mr. Whitmore: Stricture of the Rectum, with cases. Dr. Venn: A case of Inversion of the Uterus, during parturition, treated as a polypus and ligatured. Mr. H. A. Reeves: Cases with remarks in Gynecological and Orthopædic Surgery.

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.

BIRTH.

TINKER.—On November 22nd, at Brookland House, Hyde, Cheshire, the wife of Frederick Howard Tinker, L.R.C.P., M.R.C.S., of a son.

MARRIAGE.

BOLTON-HAY.—On November 18th, at Nottingham, Joseph S. Bolton, M.D., M.R.C.S., of Nottingham, to Jeanie, daughter of the Rev. J. Hay.

DEATH.

BALDING.—On November 23rd, at St. Alban's, Mortimer Balding, B.A., M.D.Cantab., M.R.C.S.Eng., aged 36, youngest son of the late James Balding, M.R.C.S., of Barkway, Herts.

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.

TUESDAY ----9 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.

THURSDAY ---10.30 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.

FRIDAY ----9 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.

SATURDAY ---9 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., 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., 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., 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; 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.

MANUSCRIPTS FORWARDED TO THE OFFICE OF THIS JOURNAL CANNOT, UNDER ANY CIRCUMSTANCES, BE RETURNED.

QUERIES.

CHARLIER HORSESHOE.

DR. F. R. LEE STRATHY (Harborne, Staffs.) will be glad if a correspondent who some years ago recommended the "Charlier Tip," in the BRITISH MEDICAL JOURNAL, will kindly communicate the results of his further experience of the invention.

TEMPERANCE LECTURES.

A YOUNG MEMBER asks for information as to experiments, statistics, and other material, useful to a medical man in illustrating a temperance lecture.

HOME FOR TROUBLESOME INVALID BOY.

M.D. desires to be informed of a home where a boy, aged 13, could be admitted, who has a phthisical tendency, and is a confirmed masturbator. The expenses, which must be reasonable, would be defrayed by friends.

AMERICAN DEGREES.

J. G. R. being anxious to obtain an American degree of M.D., would be glad to learn if there is any American University that would take the diplomas of L.R.C.P. and L.R.C.S. Edin., into consideration, and exempt him from a portion of the examination; also, what subjects he would be examined in; at what periods of the year the examination usually takes place, and what are the fees for the degree.

ACTION OF REAGENTS ON SPERMATOZOA.

DUBLIN asks where he can get information as to the action of various reagents on spermatozoa.

LEONARD WILLIAMS, M.B., M.R.C.S. (Wheatley, Oxon), writes:—In Dr. Charlier's lecture the following sentence occurs: "It is distinctly known that in some cases of pneumonia a depressant antimonial treatment is advisable." If pneumonia is a general disease, allied to the specific fevers, not a local disease, the use of antimony would appear to be contraindicated. The point is a most important one. It would be of great interest if those who have had large experience in the treatment of pneumonia would give their opinion on the matter.

ANSWERS.

DR. BERNARD O'CONNOR.—The facts were as we stated them.

TREATMENT ON NEURASTHENIA.

IN answer to several correspondents who have asked where the treatment recommended by Dr. Playfair may be read, we may state that it was fully discussed in Dr. Playfair's former paper in the BRITISH MEDICAL JOURNAL, vol. ii, p. 309, 1882, and in *The Systematic Treatment of Nerve Prostration and Hysteria*, by W. S. Playfair, M.D. (London: Smith, Elder and Co.).

WORKS ON SPINAL CURVATURE.

MR. GEORGE PEARSON.—Busch on Orthopaedics, Vol. v of von Ziemssen's *Handbook of General Therapeutics*, translated and edited by Mr. Noble Smith, and published this year by Smith, Elder and Co., is an excellent work. Mr. W. Adams published a Second Edition of his book in 1882. M. S. Bawdry published in Paris, in 1883, a volume giving a good epitome of various opinions, and we understand that a Second Edition of Mr. Noble Smith's work, *Curvatures of the Spine*, is now in the press.

MR. W. A. DAY.—We are unable to understand the purport of our correspondent's communication. We considered—and with the full report before us, we still consider—that the judge overstepped the limits of both propriety and common sense. Counsel found it necessary to protest openly against the "contumely and insult" with which his witnesses were treated. Our desire for further information was merely an intimation that we could find nothing in the evidence to warrant such conduct.

PARLOUR GYMNASTICS.

J. E. TILTON.—"The patent 'Excelsior' Health Exercising Apparatus," to which our correspondent probably refers, is made by the Chailborn and Coldwell Manufacturing Company, 223, Upper Thames Street, London.

SUMMER MOUNTAIN HEALTH-RESORTS.

FRANCIS PARSONS, M.D. (The Hurst, West Worthing) writes:—In reply to the query of "Couch," as to a suitable mountain resort for a case of congested liver and relaxed throat with debility, I would direct attention to Tarasp-Schuls in the Lower Engadine.

On this Alpine plateau, at an elevation of 4,000 feet, the air is rarefied, pure and invigorating, and owing to the shelter of mountains 10,000 feet high, it is not subject to the extremes of temperature experienced at many Alpine stations. I have found the saline springs at Tarasp very valuable in hepatic congestion, whilst the effervescing iron waters at Schuls are available for tonic treatment. Though no longer a frequenter of this beautiful region, I shall be pleased to give information to any of my *confreres* who may wish to send patients there.

THE M.D. BRUSSELS.

M.D., L.R.C.P., M.R.C.S., L.S.A., writes:—I should be glad if you could find space for a few lines in answer to a portion of Mr. Carpenter's letter of October 30th, wherein he refers in the most prejudicial terms to the Brussels M.D. degree.

No one who has any idea of the extent and stringency of the examinations for this degree could refer to it in the manner he does. After saying that Dr. Glover advocates the punishment of medical men assuming the title of Doctor, without an M.D. degree, which proves not to be correct, he mentions that to be consistent, he (Dr. Glover) would "indignantly" address the holders of the M.D. Brus. degree as "Doctor." Surely, to all right-minded men it would not be in any way "indignous" to address any M.D., whether registrable or not, as "Doctor," particularly when the holder of such degree must, before being admitted as a candidate, give proof of his already holding at least two British diplomas, a fact which Mr. Carpenter is evidently unaware of.

Then, again, the percentage of failures of doubly-qualified English medical men being about 55, is a considerable proof that the examinations are anything but trifling, or the doubly qualified Englishman is very much below the standard. Unfortunately for many, they have under-rated the examination,

MANY DOCTORS: NO DEATHS.

IN the parish of Eastwood, County of Renfrew, during two weeks of October, namely, from October 11th to October 25th, there were no deaths recorded at the registrar's office. This is noteworthy, as it is the first time it has occurred since the Registration Act came into force. The parish embraces a population of 15,000, and includes the Burgh of Pollokshaws. The usual death-rate is from 15 to 17 per 1,000. Another coincidence in connection with the above is, that for years past the medical wants of the inhabitants have been attended to by four medical men, but during the last year no fewer than three other gentlemen have started practice, thus making seven where previously there were only four. Is this a coincidence, or a cause?

MEDICAL TITLES FOR ENGLISH STUDENTS.

M.R.C.P. writes:—Were anything wanting to emphasise the urgent need of the medical titles' question being settled once and for all, perhaps the following personal experience (I fear a very common one) may be of use.

On leaving a London hospital, to commence private practice in a town of about 60,000 inhabitants, I was given an introduction, by an eminent surgeon attached to the said hospital, to one of the leading men there. Following his example, as also the example of, I believe I am correct in saying, every other man in the place, holding the qualification of M.R.C.P. or L.R.C.P., I used the title Doctor.

Some years after, I had occasion to leave this town, and to settle in a larger and more fashionable one, where I now have a good and select practice. In this latter town I find that those who hold the M.R.C.P., use the title Doctor, and a few of those holding the L.R.C.P., but that it causes those who do so to be looked upon with a certain amount of suspicion by some of their medical brethren, and to the ill-natured it gives an opportunity of disparaging them to the public, or even to their own patients, by asserting that you are not a Doctor, but forgetting to state that you are a Physician; a distinction which the public, at any rate, might fail to understand. This is not an enviable position, or one which any but the ignorant would choose.

The title Physician, as now understood, used upon the door-plate, is impossible, as it is supposed to entail a guinea fee.

The title Surgeon is misleading, and inappropriate, for all those who, like myself, hold that it is next to impossible to carry on both branches of the profession with success, and choosing medicine, have long since ceased to take any but the most trivial surgical cases.

ERRATA.—Mr. H. T. Butlin's name appears in error, as having been present at the meeting at the Apothecaries' Hall, on Tuesday, November 16th.—Surgeon-Major J. W. L. Hodder requests us to state that, in his Surgical Memorandum, published in the BRITISH MEDICAL JOURNAL of November 20th, p. 971, under the title of "Retention of Urine: Aspiration with the Guarded Needle," the size of the needle is wrongly given as equal to a No. 4 catheter, instead of a No. 4 aspirating needle.

COMMUNICATIONS, LETTERS etc., have been received from:

Mr. Vesey Fitzgerald, Birmingham; Mr. Carlyon, Redruth; Mr. J. Hutchinson, London; Dr. Stevenson, London; Mr. Timothy Holmes, London; Mr. C. Bellamy, London; Sir Joseph Fayrer, London; Mr. James Berwick, Sunderland; Mr. Pearce Gould, London; Dr. Whipple, London; Mr. W. P. Kiall, Bristol; Dr. Danford Thomas, London; Dr. Fancourt Barnes, London; Messrs. Street and Co., London; Mr. J. E. Tilton, Stonehouse; Mr. Henry Taylor, Guildford; Dr. J. E. Fishbourne, London; Mr. Richard Bevan, Lydd, Kent; Dr. Hack Tuke, London; Mr. R. Hampden Clement, York; Mr. H. H. Chetton, London; Mr. F. T. Berryman, London; Mr. W. Adams Frost, London; Mr. W. J. Sumpter, Sherringham; Dr. Aveling, London; Messrs. Raphael Tuck and Sons, London; Mr. James Erskine, Glasgow; The Secretary of the Royal Meteorological Society; Mr. E. W. Hardwicke, Cambridge; Mr. W. E. Lambert, Liverpool; Dr. Mickle, London; Mr. W. Morrant Baker, London; Mr. J. D. Poice, Aberdeen; Dr. H. O'Neill, Belfast; Dr. Horrocks, London; Mr. A. P. Luff, London; Dr. S. Coupland, London; The Secretary of the Midland Medical Society, Birmingham; Dr. P. Snyers, Liege; Mr. C. Roberts, London; Mr. G. Black, Keswick; Dr. A. H. Carter, Birmingham; Dr. A. H. Benson, Dublin; Mr. Henry T. Butlin, London; Mr. F. Fussell, Brighton; Mr. T. Findley Richardson, Wakefield; Dr. G. Hare Phillips, Newcastle-upon-Tyne; Mr. Hugh Owen Thomas, Liverpool; Dr. Ward Cousins, Southsea; Mr. Rushton Parker, Liverpool; Dr. George Henty, London; Mr. C. E. Bell, Exeter; Mr. H. L. Hoops, Eccles; Surgeon-Major Hodder, Bath; Mr. Lawson Tait, Birmingham; Surgeon-Major R. H. Quill, Woolwich; Dr. Willoughby, London; Surgeon-Major Waghorn, H.M.S. *Crocodile*; Mr. John E. Erichsen, London; Mr. W. L. Wizen, Maidstone; Dr. J. W. Hunt, Dalston; Dr. James Anderson, London; Dr. Byrom Bramwell, Edinburgh; Mr. Cottenham Farmer, Hexham; Mr. William Kirkland, Glasgow; Mr. A. A. Bowlby, London; Dr. Thomas More Madden, Dublin; Dr. C. Orton, Newcastle-upon-Tyne; Dr. J. Maxwell Ross, Edinburgh; Mr. J. C. Mitchell, Taunton; Dr. R. Barnes, London; Dr. Clifford Allbutt, Leeds; Dr. James Ross, Manchester; Dr. C. W. Suckling, Birmingham; Mr. F. M. Corner, London; Mr. R. Clement Lucas, London; Mr. J. Knowsley Thornton, London; Mr. A. Duke, Dublin; Mr. W. A. Day, Redcar; Dr. R. E. Power, Portsea; Dr. W. Scott Lang, Edinburgh; Mr. J. Gopal, Punjab; Dr. W. J. Simpson, Calcutta; Dr. Styrup, Shrewsbury; Dr. W. Alexander, Halifax; Dr. R. Park, Glasgow; Mr. Clements Hailes, Clifton; Mr. G. Anderson Critchett, London; Dr. C. R. Illingworth, Accrington; Mr. J. Wickham Barnes, London; Mr. Edward Atkinson, Leeds; Mr. G. M. Edwards, Aberdeen; Mr. Alfred S. Gubb, London; Deputy Surgeon-General Jessop, London; Dr. John Beddoe, Clifton; A Member; Professor Windle, Birmingham; Dr. Wolfe, Glasgow; Dr. W. H. Barlow, Manchester; Mr. Edgar A. Browne, Liverpool; Dr. Martin Oxley, Liverpool; Mr. Morton Smale, London; Professor G. Buchanan, Glasgow; Dr. Godson, London; Professor Annandale, Edinburgh; Surgeon-General Tuson, London; Mr. T.

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BOOKS, ETC., RECEIVED.

- The Diagnosis and Treatment of Diseases of the Kidney amenable to Direct Surgical Interference. By W. B. Clarke, M.A., M.B. Illustrated. London: H. K. Lewis. 1886.
- Sanitary Examinations of Water, Air, and Food. By C. B. Fox, M.D., F.R.C.P. Second Edition. Illustrated. London: J. and A. Churchill. 1886.
- Rupture of the Perinæum, its Causes, Prevention, and Treatment. By Michael Joseph Molony, L.R.C.P., L.R.C.S. Dublin: Fannin and Co. London: Baillière, Tindall and Cox. 1886.
- Wellerisms from Pickwick and Master Humphry's Clock. Selected by C. F. Rideal. Edited, with Introduction, by Charles Kent. London: G. Redway. 1886.
- Subjective Symptoms in Eye-Disease. By G. A. Berry, M.B. Edinburgh: Oliver and Boyd. 1886.
- Transactions of the Society of Medical Officers of Health: Session 1885-86. London: Shaw and Sons. 1886.
- Sputum: its Diagnostic and Prognostic Significations. By Dr. F. Troup. Edinburgh: Oliver and Boyd. 1886.
- Poems, Songs, and Sonnets. By W. M. Stenhouse, M.D. Glasgow: A. Stenhouse. 1886.
- Alpine Winter in its Medical Aspects, with Notes on Davos Platz, Wiesen, St. Moritz, and the Maloja. By A. Tucker Wise, M.D. Third Edition. London: J. and A. Churchill. 1886.

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