

out from the gates of St. Bartholomew's as an ambulance corps for real work in assisting the injured. It should be added that the assistant chloroformist, Mr. Watts, accompanied the detachment.

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 19th day of January next, at 2 o'clock in the afternoon.

FRANCIS FOWKE, *General Secretary.*

161A, Strand, December 16th, 1886.

NOTICE OF QUARTERLY MEETINGS FOR 1887.

ELECTION OF MEMBERS.

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

Meetings of the Council will be held on January 19th, April 13th, July 13th, and October 19th, 1887. Candidates for election by the Council of the Association must send in their forms of application to the General Secretary, not later than twenty-one days before each meeting, namely, December 29th, 1886, and March 24th, June 23rd, and September 29th, 1887.

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 being pursued on the following subjects

DIPHTHERIA,

THE ETIOLOGY OF PHTHISIS,

THE VALUE OF HAMAMELIS,

THE VALUE OF PURE TEREBENE.

Memoranda on the above subjects, and forms for communicating observations on them, may be had on application.

The INQUIRIES on OLD AGE, CANCER OF THE BREAST, and the CONNECTION OF DISEASE WITH HABITS OF INTEMPERANCE, are now closed.

A Report on the CHOREA Inquiry has been prepared by Dr. Stephen Mackenzie; and will be published in the BRITISH MEDICAL JOURNAL as soon as the printing can be completed.

A Report on CENTENARIANS, prepared by Professor Humphry, was published with the JOURNAL of December 11th; a full Report on OLD AGE will follow.

Reports are in preparation upon the INQUIRIES made into ACUTE RHEUMATISM, DIPHTHERIA, CANCER OF THE BREAST, and HABITS OF INTEMPERANCE, and a Supplementary Report on PUERPERAL PYREXIA. All the above will be published in the JOURNAL as soon as completed. Tables of the Chorea and Acute Rheumatism cases will be published in separate form.

The Returns made to the GEOGRAPHICAL INQUIRY are being tabulated for report.

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.

ABERDEEN, BANFF, AND KINCARDINE BRANCH.—The next meeting of this Branch will be held at 198, Union Street, Aberdeen, on the evening of Wednesday, December 22nd, at 8 o'clock, when the President, Dr. Urquhart, will take the chair. Business: 1. Minutes, nomination of members, etc. 2. Ballot for admission of Dr. Arthur Morrison, Suez, Egypt; Dr. John D. Thomson, Marischal College; Dr. James S. Milne, Peterhead, as ordinary members of Branch. 3. Sequel to Case of Myxœdema, and results of *Post Mortem*, by Dr. Urquhart. 4. On the Treatment of Scarlattina Maligna by the Inhalation of Vapour of Carbolic Acid, by Dr. Michie, Cove. 5. Case of Fracture of the Base of the Skull, by Dr. Michie. 6. Exhibition of Specimen: Case of Enormous Hydrocephalus, by Dr. Cheyne, Aberdeen.—ROBERT JOHN GARDEN, J. MACKENZIE BOOTH, Honorary Secretaries.

GLOUCESTERSHIRE BRANCH.—The next ordinary meeting will be held at the Gloucester Infirmary, when Dr. Batten will give his presidential address, on Tuesday, January 18th, at 7.30 p.m.

METROPOLITAN COUNTIES BRANCH: EAST LONDON AND SOUTH ESSEX DISTRICT.—The next meeting will be held, by the kind invitation of Dr. Mickle, at Grove Hall, Bow, on Thursday, January 20th, at 8.30 p.m. The chair will be taken by Cornelius Garman, Esq. Dr. Mickle will demonstrate, and a number of patients illustrate, various forms and phases of insanity and general paralysis of the insane. Dr. C. R. Walker will show a patient suffering from locomotor ataxy, with perforating ulcer of the foot.

BATH AND BRISTOL BRANCH.

THE second ordinary meeting of the session was held at the Grand Pump-room Hotel, Bath, on Thursday evening, December 9th, C. GAINÉ, M.R.C.S.E., President, in the chair. There were also present forty members.

New Members.—The following gentlemen were elected members of the Association and Branch. Drs. W. J. Williams, Bath; W. Wilkinson, Bath; and Messrs. C. S. Reade, Horfield; P. Watson Williams, Bristol; J. E. Trask, Bath; R. Davis, Bath; and E. J. Sheppard, Clifton.

Communications.—1. Dr. MARKHAM SKERRITT read a paper on the Occurrence of Albumen in Hydatid Fluid.

2. Dr. E. T. FOX read notes of "A Peculiar Case."

3. Mr. H. W. FREEMAN gave the notes of a Case of Ovariectomy, followed by Intra-peritoneal Hemorrhage, reopening of the Abdomen, with Recovery.—Mr. GREIG SMITH and Mr. N. C. DOBSON made some remarks on the case, to which Mr. FREEMAN replied, and showed some instruments which he had found useful during the operation.

4. Dr. A. B. BRADAZON read notes of a Case of Belladonna Poisoning successfully treated by Hypodermic Injections of Apomorphine and Pilocarpine.—The following gentlemen spoke on the case: Mr. MASON, Dr. SKERRITT, Dr. SWAYNE, and Mr. E. LAURENCE.

GLOUCESTERSHIRE BRANCH.

THE annual meeting was held at Cheltenham on November 16, 1886; Dr. GOODING, President, in the chair.

Election of Officers.—The following officers were elected for 1887:—President, Dr. Batten, Gloucester. Members of Council: Dr. Needham, Gloucester; Dr. Gooding and Mr. Bennett, Cheltenham; and Dr. Currie, Lydney. Messrs. Bowre and Fowler were re-elected scrutineers. Mr. G. Arthur Cardew, Cheltenham, was appointed honorary secretary.

Balance Sheet.—The balance-sheet was presented, showing a balance of £2 19s. 2d.

The Exclusion of the Apothecaries' Society.—The following resolution was proposed by Dr. ROOKE, and seconded by Mr. BOWRE, and carried:—"That this Branch is of opinion that, in justice to the great majority of medical practitioners in England and Wales, and with the view of retaining the only existing check against unqualified practitioners, it is advisable that the Apothecaries' Society should be admitted to the conjoint examination scheme of the Royal College of Physicians and Surgeons."

SPECIAL CORRESPONDENCE.

PARIS.

[FROM OUR OWN CORRESPONDENT.]

The Epidemic of Cholera at Le Guilvinec.—Muscular Contraction and Animal Heat.—Bone Grafting.—Analysis of Urine in Cases of Abdominal Tumours.—Megaloscope.

THE *Revue d'Hygiène* gives an account of the epidemic of cholera which raged in the little town of Le Guilvinec, in Brittany, at the end of 1885 and the beginning of 1886. The author is not a medical man, but M. H. C. Monod, Prefect of Le Finistère, who, from his position as prefect of the department in which Le Guilvinec is situated, was able to obtain the fullest details. M. Monod was named prefect of Le Finistère when the cholera was raging in all its violence; and by the energetic measures which he adopted he succeeded in checking it, though not without much trouble. Le Guilvinec is a small fishing village, which, during the epidemic, contained a population of only seven or eight hundred persons. There were 125 cases of cholera and 71 deaths. All the circumstances of the epidemic could be far more accurately ascertained and studied than in large centres, such as Toulon, Marseilles, etc., where the circumstances of individual cases, the modes in which contagion is spread, etc., cannot be analysed in detail. M. Monod, on the other hand, was able to investigate each particular case in the same manner that M. Marex last year studied the epidemic in each of the towns situated in the Côte d'Or. M.

give honour to whom honour is due, and thus make the testimonial befitting the occasion. Dr. Edward Hamilton, 120, Stephen's Green, Dublin, is the Honorary Treasurer.—Yours, etc.,
December 14th, 1886.

SEMPER VIGILANS.

ALCOHOL AND THE MEDICAL STAFF.

SIR,—With the increase of scientific knowledge, it has become a question whether it would not be for the good of hospitals if the Managers were to find some non-intoxicating beverage for the use of the medical staff. This would be in consistency with a large amount of medical testimony, corroborated by strong statistical evidence. The records of ancient history give evidence of the longevity of those who did not use alcohol. In modern times, when the mischief became specially apparent, Sir Benjamin Brodie and other medical men, to the number of two thousand, signed a strong declaration in 1847, in which are the following words: "That total or universal abstinence from all alcoholic liquors or beverages of all sorts would greatly contribute to the health, the prosperity, and the happiness of the human race."

Now, as the medical staff of our hospitals form part of the human race, it is evident it applies to them, and for them to cease from its use would be for their benefit. Since the declaration of the late Sir B. Brodie and others, many years have elapsed, and their testimony has been strongly confirmed by the statistics of the Life Assurance Societies, which have three classes of assurances: (1) Lowest class of premiums, for abstainers; (2) Moderate drinkers, whose lives prove shorter than the abstainers; (3) Publicans and others, deemed dangerous lives.

From these remarks, I hope no one will think me unfriendly to the medical profession. On the contrary, I desire their good, and hold the profession in high esteem, especially for their kindness to the poor. I think it possible that some medical men, from habit or want of due thought, are victims of the seductive influence of alcohol, and do not reflect that it is bought with subscriptions given to aid the sick and suffering; and that, as they would be better without it, the cost of the alcohol so used is wasted. This is in accordance with the opinion of an eminent physician of the present day also: "That the great majority of people at any age, and of either sex, will enjoy better health, both of body and mind, and will live longer without any alcoholic drink whatever." (See Sir H. Thompson, M.D., 1886.)

So far as my researches have gone, I estimate the alcohol consumed by the staff of hospitals of London to cost from £4,000 to £5,000, and that in some small hospitals more alcohol is used by the staff than by the patients; this was admitted to me by an official to be the case in a country hospital. In general (with a few exceptions), the large hospitals in the country do not expend so much in alcohol for the staff as in London districts.

When the attention of the public shall be directed—as is desirable—to hospital expenditure, it may be expected that many subscribers may hesitate to allow their subscriptions to be applied to purchase for the hospital staff what is not only wasteful but injurious.—Yours, faithfully,
GEO. STURGE.

Sydenham Hill Road, December 4th, 1886.

OL. PINI SYLVESTRIS IN THE TREATMENT OF CHRONIC BRONCHITIS.

SIR,—Mr. Robson's note on the use of *Ol. pini sylvestris*, in chronic bronchitis has rather surprised me, as I thought that its beneficial effects in diminishing expectoration, both in that ailment and in phthisis, were well known. I myself commenced its use in 1877, nearly ten years back, on the advice of my late brother, F. Goodchild, M.B.; and several of my medical friends have constantly prescribed it for almost as long a period. For almost all cases of purulent, or of exceedingly profuse expectoration, it has proved, in doses of two or three minims, the most valuable drug at my command; and has achieved all the results which have been more or less conceded to its present fashionable rival, pure terebene.

J. A. GOODCHILD.

INDIA AND THE COLONIES.

INDIA.

THE HEALTH OF BOMBAY.—From the Bombay Commissioners' Administration report for the year ending March 31st it is seen that the number of births, exclusive of still-born, was 14,964, whilst the number of deaths was 21,580; the births and deaths, per thousand of population, were thus 19.35 and 28.25 respectively, or, if allow-

ance be made for the usual increase of population, 17.72 and 25.88. Although it is estimated that there are three men in Bombay to every two women, this birth-rate is extremely low. The proportion of birth-rate and death-rate among Parsees is pretty equal, the birth-rate of that community being 28.43. There were 598 cases of cholera, with which exception there was no serious epidemic during the year; there were only 55 deaths from small-pox, and the general health of the city was fairly good. For the last five years there has been a lower rate of mortality among Europeans, but as there has been a corresponding increase in the death-rate of Eurasians, the probability is that many of these enter themselves in the census returns as Europeans. It is thought that overcrowding has a great deal to do with the mortality, and as Camateepoor has a cubic house space of only 250 feet for each inhabitant, it is hardly to be wondered at that the health of that district compares unfavourably with that of other parts of the city, where there is a much larger percentage of cubic feet. Vaccination operations were not so satisfactory as in previous years, the number of re-vaccinations being only 860 against nearly 3,000 in 1884, and more than 1,500 in 1885, when there was a small-pox epidemic.

VILLAGE SANITATION.—The new Sanitary Commissioners of Madras have induced the local government to take up the important question of village sanitation. The district board will be required in future to report fully all that is done for the improvement of towns, villages, and fairs.

MEDICO-LEGAL AND MEDICO-ETHICAL.

MEDICAL RELIEF FOR VOTERS.

OUR readers may remember the outcry which was raised for electioneering purposes in the summer of 1885, and which resulted in the hasty passing through Parliament of the "Medical Relief Disqualification Removal Act, 1885," 48 and 49 Vict., c. 46. It is an old principle of our common law that persons who have, shortly before an election, been in receipt of alms were disqualified from voting, because from their dependent situation they were not capable of giving their judgment freely. This principle was recognised and formulated by the Reform Act of 1832, 2 Will. IV, c. 45, s. 36, which, as amended by 30 and 31 Vict., c. 102, s. 40, provides "that no person shall be entitled to be registered in any year as a voter who shall, within twelve months previously, have received parochial relief or other alms," etc. Medical relief given at the expense of the rates comes under this head. By the Poor-law Amendment Act, 1834, 4 and 5 Will. IV, c. 76, s. 56, it was enacted that "all relief given to or on account of the wife, or to or on account of any child or children under 16," should be considered as given to the husband or father, as the case might be. So the law stood till 1875; and it was undoubted that if a man or his family received medical attendance or aid, at the expense of the rates, he received parochial relief, and thereby for twelve months became disqualified to be on the register of Parliamentary voters. The Act passed in 1885, however, altered this, as it, by Section 2, says that "where a person has, in any part of the United Kingdom, received for himself or for any member of his family any medical or surgical assistance or any medicine at the expense of the poor-rate, such person shall not by reason thereof be deprived of any right to be registered or to vote." And Section 4 defines the term "medical or surgical assistance" as including "all medical or surgical attendance, and all matters and things supplied by or on the recommendation of the medical officer having authority to give such attendance and recommendation at the expense of the poor-rate." The first decision, so far as we are aware, on the construction of this Act, has recently been given in the case of *Honeybone v. Hambridge*, which was an appeal from a revising barrister. It appeared that Mrs. Honeybone obtained an order for attendance in her approaching confinement by the parish medical officer, but that, when the time came, she was in fact attended by an uncertified midwife, who attended at the request, not of the medical officer, but of the relieving officer, and who was afterwards paid for her attendance by the relieving officer. The barrister struck Honeybone's name off the list of voters, holding that this attendance, being paid for out of the rates, amounted to parochial relief; and that, being rendered by an uncertified midwife, it was not "medical or surgical attendance," nor was it "a matter or thing supplied on the recommendation of the medical officer." The Court, however (Lord Coleridge, Baron Pollock, and Mr. Justice Smith), reversed the barrister's decision, and decided that Honeybone was entitled to his vote on the ground that the intention of the Act is that persons who have occasional assistance of a medical or surgical kind shall, not on that account be disqualified, and that the assistance

in Calcutta, and 32.6 in Madras. Cholera caused 63 deaths in Calcutta, against 34 and 98 in the two preceding weeks; 38 fatal cases of diarrhoeal diseases occurred in Madras, and "fever" mortality showed the largest excess in the same city. According to the most recently received weekly returns, the annual death-rate averaged 24.5 per 1,000 persons estimated to be living in twenty-two of the largest European cities, and exceeded by 1.6 the mean rate during the week in the twenty-eight large English towns. The death-rate in St. Petersburg was 25.6, showing a considerable increase upon the rates in recent weeks; the 455 deaths included 4 from small-pox, 12 from "fever," and 12 from scarlet fever. In three other northern cities—Copenhagen, Stockholm, and Christiania—the death-rate averaged only 15.4, and ranged from 14.3 in Stockholm to 17.1 in Christiania; diphtheria and croup caused 12 deaths in Christiania, 8 in Copenhagen, and 2 in Stockholm; 4 fatal cases of scarlet fever occurred in Christiania, and 2 in Stockholm. In Paris, the death-rate was equal to 23.3, scarcely differing from the rates in recent weeks, but exceeding the rate during the same week in London by 1.5; the deaths included 22 from typhoid fever, 22 from diphtheria and croup, and 31 from measles. The 173 deaths in Brussels, of which 6 resulted from diphtheria and croup, were equal to a rate of 20.7. The rate in Geneva was 25.2, but no fatal case of zymotic disease was reported. In the three principal Dutch cities—Amsterdam, Rotterdam, and the Hague—the mean death-rate was 23.2, the several rates being 21.0 in Amsterdam, 23.9 in Rotterdam, and 27.7 in the Hague; measles caused 4 deaths in Amsterdam and 2 in the Hague, and croup 6 in Amsterdam. The Registrar-General's table includes nine German and Austrian cities, in which the death-rate averaged 26.8, and ranged from 19.9 in Berlin, and 21.3 in Dresden, to 32.1 in Prague and 40.9 in Buda-Pesth. The 332 deaths in Buda-Pesth included 85 from small-pox, 25 from scarlet fever, 12 from diphtheria and croup, and 2 from cholera. Diphtheria showed fatal prevalence in most of these German cities, the greatest mortality occurring in Hamburg, Dresden, and Prague. The death-rate averaged 22.0 in three of the largest Italian cities, and was equal to 18.2 in Venice, 19.9 in Turin, and 22.1 in Rome; small-pox caused 8 deaths in Rome, and "fever" 6 in Rome and 5 in Turin. The rate of mortality was equal to 35.6 in Alexandria and 50.9 in Cairo; 36 deaths from diarrhoeal diseases occurred in Alexandria and 129 in Cairo, and the fatal cases of typhoid fever were 16 in Cairo and 4 in Alexandria. In four of the principal American cities, the recorded death-rate averaged 22.2, and ranged from 17.9 in Baltimore, to 24.9 in New York. Diphtheria and croup caused considerable mortality in each of these four American cities, and the reported deaths from typhoid fever were 11 in Brooklyn, and 8 both in Philadelphia and Baltimore.

MEDICAL NEWS.

ROYAL COLLEGE OF PHYSICIANS OF LONDON.

AN extraordinary meeting of the Fellows was held on Thursday, December 16th; Sir W. JENNER presiding.

A letter from Sir R. Webster to the President of the College was read, in which he referred to the foundation of the John Lucas Walker Studentship at the University of Cambridge, and requested that the President would consent to become one of the electors to that studentship. The College unanimously approved of the President's acceptance of this office.

A report was received from the Committee of Management of the Conjoint Examinations. It contained the following recommendations, which were sanctioned by the College:—

1. That Mr. Thomas Cooke's School of Instruction in Anatomy and Physiology, in Brunswick Square, be recognised as a "place of study" for candidates rejected at the second examination of the Examining Board in England, subject to an annual renewal of such recognition on application from Mr. Cooke.

2. That the committee be empowered to determine questions relating to exceptions to the conditions of admission to the several examinations of the Examining Board in England.

3. That in the final part of paragraph 18, Section II, of the regulations of the Examining Board in England, relating to the interval of two years required to be spent in professional study between the date of passing the second examination and admission to the third or final examination, the words "two winter and two summer sessions" be substituted for "two years."

A report was also received from the Building Committee, stating that satisfactory progress was being made with the new Examination Hall, and the committee was formally empowered to provide all necessary fittings (other than furniture) for the new building.

The report of the Committee of Delegates, appointed by this College and the College of Surgeons to consider the question of the desirability and practicability of granting degrees in medicine and surgery to persons who have passed the conjoint examinations of the two Colleges, was received and ordered to be entered on the annals. This report recommended the adoption of two resolutions:—1. That candidates who have passed the examinations of the Examining Board in England for the licence of the Royal College of Physicians of London, and the diploma of Member of the Royal College of Surgeons of England, should have a degree in medicine and surgery conferred upon them, provided that they have passed such examination in arts and science as may hereafter be defined, and have pursued clinical studies in London—or in other medical school or schools, if the governing body should so

determine—for at least two years after having passed the second professional examination.

2. That an application be made to the Crown by the Royal College of Physicians of London and the Royal College of Surgeons of England, acting conjointly, for power to confer degrees in medicine and surgery.

The report further pointed out the reasonableness of the demand for an opportunity for students to obtain medical degrees in London, and also the fact that the essentials of a university, as regards teaching and the means of study in medicine, exist more fully in London than anywhere else in England. The social influences of collegiate life existed to a considerable extent in the intercourse of the students of the London medical schools with each other and with their teachers; and the examinations of the Colleges on the subjects comprised in their curriculum were on a level with those of the majority of the universities of the United Kingdom. This being so, it was desirable that the formal privilege of conferring degrees should be obtained; this power would stimulate the development and progress of higher education.

Dr. WILSON FOX moved the adoption of the first resolution.

Dr. ALLCHIN moved, as an amendment: "That no scheme for the conferring of degrees on the Licentiates of the Royal College of Physicians and the Members of the Royal College of Surgeons can be deemed satisfactory unless it provide for the conferring of such degrees by a university outside the Colleges themselves, but on which they may be represented." He thought that the idea of a genuine university involved residence, and that its function was primarily educational. He asked what was to be the relation of the Colleges to the proposed university; were they to be absorbed and lost? Practically, he looked upon the proposal as one for the foundation of a second-rate university.

Dr. NORMAN MOORE seconded the amendment. He insisted that any steps taken by the Colleges must be distinctly with a view to the improvement of medical education. He advocated the scheme proposed for the "Teaching University."

Dr. CURNOW thought that the proposed action of the two Colleges would really prove to be the first step in the formation of the "Teaching University," which might include the faculties of Arts and Science, by-and-by. Someone must take the first step, and it was impossible to wait until the teachers in Arts and in Science had come to an agreement. Universities differed in character all the world over, and markedly so in England.

Dr. BRISTOWE thought that it had been decided, by the resolution passed by the College some months ago, that the degree ought to be granted by the Colleges themselves.—Sir GEORGE PAGET and Sir RISON BENNET dissented from this interpretation. The amendment was supported by Dr. CHAMBERS, and opposed by Dr. WILSON FOX, Sir WILLIAM GULL, and Dr. QUAIN. Finally, on the motion of Sir H. PITMAN, the discussion was adjourned.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

A SPECIAL meeting of the Council was held at the College on Thursday, December 16th, to consider a report from the Committee of Delegates appointed by the Royal Colleges of Physicians and Surgeons, to consider the question of granting degrees in Medicine and Surgery. The report was discussed and adopted with certain verbal alterations, and referred back to the Delegates for consideration of these amendments, in conjunction with any alterations which may be introduced by the College of Physicians, which was simultaneously engaged upon the consideration of the report.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—The following Members, having passed the final examination for the Fellowship on November 24th, 25th, 26th, and 27th were, at a meeting of the Council held on December 9th, admitted Fellows of the College, namely:—

G. H. Sylvester, L.R.C.P.Lond., Dry Hill Park, Tonbridge, Kent, date of membership, April 16th, 1878; J. R. Dodd, M.D.Durh., Army Medical Staff, July 21st, 1879; F. C. Vinrace, M.D., Q.U.I., 17A, Temple Row, Birmingham, November 11th, 1879; E. M. Little, L.R.C.P.Lond., 18, Park Street, W., January 21st, 1880; E. K. Campbell, M.B.Edin., 64, Guilford Street, W.C., July 21st, 1881; T. H. Openshaw, M.B.Durh., London Hospital, January 17th, 1882; E. Hudson, L.S.A., Indian Medical Service (Bengal), July 31st, 1882; E. Harrison, M.B.Cantab., Royal Infirmary, Hull, May 17th, 1883; J. Elliott, M.B.Lond., St. Bartholomew's Hospital, July 29th, 1884; G. W. H. French, Rose Bank, Highgate, April 23rd, 1884; C. E. Tanner, M.D.Durh., Marlborough, Wilts, October 22nd, 1884; H. M. Page, L.R.C.P.Lond., 27, Westbourne Park, January 26th, 1885.

One other Candidate passed the examination, but not having attained the legal age (25), will receive his diploma at a future meeting

of the Council. Fourteen Candidates failed to reach the required standard; four were referred for six months, and ten for one year.

The following Members, having passed the final examination in May last, and having since attained the legal age, were also admitted Fellows.

J. H. Targett, M.B.Lond., Guy's Hospital, January 24th, 1883; E. W. Rough-ton, Brook Green, W., January 24th, 1883.

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

For the Degree of Doctor in Medicine for Practitioners of Fifteen Years' Standing.—J. Deans, M.R.C.S., L.S.A.; W. Le Gros Denzloe, M.R.C.S., L.S.A., M.R.C.P.Ed.; C. E. Hardyman, F.R.C.S.Edin., M.R.C.S., L.S.A.; J. Hedley, M.R.C.S., L.S.A.; T. S. Smith, L.R.C.S.Edin., L.S.A.; T. O. Wood, M.R.C.S.Eng., F.R.C.S.Edin., F.R.C.P.Edin.

For the Degree of Doctor in Medicine (Essay).—H. W. Dixon, M.B., L.R.C.S.Edin., G. W. Richards, M.B., M.R.C.S.; C. F. Rumboll, M.B., M.R.C.S.; W. Slater, M.B., L.R.C.S.Edin.

Gold Medal for Best Essay for Year 1886.—J. V. Salvage, M.B., L.R.C.P., M.R.C.S. *Proxime Accessit.*—C. F. Rumboll, M.B., M.R.C.S.

Final Examination for the Degree of Bachelor in Medicine: Second Class Honours in Order of Merit.—W. J. Hadley, M.R.C.S., L.S.A., London Hospital; J. W. Dalgliesh, College of Medicine, Newcastle-upon-Tyne; T. E. Honey, St. Mary's Hospital. *Pass-list in Alphabetical Order:* W. M. Abbot-Anderson, University College; W. D. Arnison, College of Medicine, Newcastle-upon-Tyne; A. F. Bradbury, College of Medicine, Newcastle-upon-Tyne; G. Cranston, St. Thomas's Hospital; R. Crosby, M.R.C.S., College of Medicine, Newcastle-upon-Tyne; G. T. Giddings, London Hospital; A. Green, College of Medicine, Newcastle-upon-Tyne; F. Hewkley, M.R.C.S., London Hospital; G. G. Howitt, College of Medicine, Newcastle-upon-Tyne; R. W. Jalland, L.R.C.P., M.R.C.S., L.S.A., St. Bartholomew's Hospital; W. Lansdale, M.R.C.S., Guy's Hospital; T. McInerney, L.K.Q.C.P., L.R.C.S.I., Ledwich School of Medicine, Dublin, and College of Medicine, Newcastle-upon-Tyne; A. J. H. Montague, L.R.C.P., M.R.C.S., L.S.A., St. Thomas's Hospital; F. J. J. Orton, M.R.C.S., L.S.A., Queen's College, Birmingham; A. C. A. Packman, M.R.C.S., College of Medicine, Newcastle-upon-Tyne, and Sheffield School of Medicine; F. W. Ramsay, L.S.A., College of Medicine, Newcastle-upon-Tyne; H. Renney, College of Medicine, Newcastle-upon-Tyne; R. B. Robson, College of Medicine, Newcastle-upon-Tyne; T. A. Robson, College of Medicine, Newcastle-upon-Tyne; W. F. Steele, College of Medicine, Newcastle-upon-Tyne; F. Winter, College of Medicine, Newcastle-upon-Tyne; W. M. Yeoman, College of Medicine, Newcastle-upon-Tyne.

For the Degree of Bachelor in Surgery.—W. M. Abbot-Anderson, University College; W. D. Arnison, College of Medicine, Newcastle-upon-Tyne; W. Baint, M.B., College of Medicine, Newcastle-upon-Tyne; A. B. Blacker, M.B., L.R.C.P., M.R.C.S., L.S.A., St. Thomas's Hospital; A. F. Bradbury, College of Medicine, Newcastle-upon-Tyne; R. Crosby, M.R.C.S., College of Medicine, Newcastle-upon-Tyne; J. W. Dalgliesh, College of Medicine, Newcastle-upon-Tyne; A. C. Dove, M.B., M.R.C.S., St. Bartholomew's Hospital; J. H. Garrett, M.B., University College; T. H. Openshaw, M.B., L.R.C.P., M.R.C.S., L.S.A., London Hospital; H. B. W. Paige, M.B., College of Medicine, Newcastle-upon-Tyne; W. Race, M.B., College of Medicine, Newcastle-upon-Tyne; F. W. Ramsay, L.S.A., College of Medicine, Newcastle-upon-Tyne; H. Renney, College of Medicine, Newcastle-upon-Tyne; W. G. Richardson, M.B., College of Medicine, Newcastle-upon-Tyne; T. A. Robson, College of Medicine, Newcastle-upon-Tyne; C. F. Rumboll, M.B., M.R.C.S., St. Bartholomew's Hospital; W. F. Steele, College of Medicine, Newcastle-upon-Tyne; J. Straughan, M.B., College of Medicine, Newcastle-upon-Tyne; W. Turnbull, M.B., L.S.A., College of Medicine, Newcastle-upon-Tyne; F. Winter, College of Medicine, Newcastle-upon-Tyne.

KING AND QUEEN'S COLLEGE OF PHYSICIANS IN IRELAND.—At the usual monthly Examination for the licences of the College, held on Monday, Tuesday, Wednesday, Thursday, and Friday, December 6th, 7th, 8th, 9th, and 10th, 1886, the following candidates were successful:

For the Licences to practise Medicine and Midwifery.—T. D. Ambrose, Montreal, Canada; T. G. Barton, Rathmines, Dublin; E. J. Byrd, Leeds; J. Garth, Preston, Lancashire; W. Greene, Dublin; C. J. C. O. Hastings, M.D. Univ. Vict. Coll. Toronto; J. P. Howe, Dublin; P. McSwiney, Dublin; J. E. Midgley, M.D. Univ. Trin. Coll. Toronto; St. Thomas's, Ontario; A. E. Murphy, Kingstown, co. Dublin; H. M. Norris, Deal, Kent; B. B. Pattullo, M.D. Univ. Vict. Coll. Toronto; Toronto; T. J. Rossiter, Ennisceorthy, co. Wexford; J. B. Ryan, Cahircionish, co. Limerick; W. J. Shee, Carrick-on-Suir, co. Waterford.

For the Licence to practise Medicine only.—C. V. Burgess, Redruth, Cornwall; T. A. Connellan, Carrick-on-Shannon; H. G. G. Day, Rathgar, Dublin; H. E. B. Dickson, Ivy Bridge, Devon; St. L. J. Edmundson, Dublin; J. Ellison, Scarborough; I. P. Hartford, Dublin; W. A. Kelly, Waterford; A. F. Smith, Donoughmore, Queen's co.; G. H. Spencer, Bolton, Lancashire.

For the Licence to practise Midwifery only.—R. V. B. Smyth, M.D. Univ. Dubl., Strabane, co. Tyrone; M. P. Williams, M.D., R.U.I., Dungarvan, co. Waterford.

The undermentioned Licentiate in Medicine of the College having complied with the by-laws relating to Membership, pursuant to the provisions of the Supplemental Charter of December 12th, 1878, has been duly enrolled a Member of the College.

J. Duggan, Lic. Med. 1870, Woodville, Coolarne, Turloughmore, co. Galway.

MEDICAL VACANCIES.

The following vacancies are announced.

BRISTOL DISPENSARY.—Surgeon. Applications by January 1st, 1887, to the Secretary.

CITY OF LONDON LUNATIC ASYLUM, Stone, near Dartford, Kent.—Assistant Medical Officer. Salary, £120 per annum, with board, etc. Applications by December 30th to H. F. Youle, Esq., Guildhall, E.C.

CROYDON UNION.—Vaccination Officer. Applications by December 20th to the Clerk to the Guardians.

FULHAM UNION.—Assistant Medical Superintendent and Dispenser. Salary, £100 per annum, with board, etc. Applications by December 18th to the Clerk to the Guardians.

HOSPITAL FOR CONSUMPTION, Brompton.—Resident Clinical Assistants. Applications by December 18th to the Secretary.

HOSPITAL FOR THE INSANE, Barnwood, Gloucester.—Junior Assistant Medical Officer. Salary, £100 per annum, with board, etc. Applications to Dr. Needham.

JAMES MURRAY'S ROYAL ASYLUM, Perth.—Assistant Medical Officer. Apply to Dr. Urquhart.

MANCHESTER ROYAL INFIRMARY.—Resident Medical Officer. Salary £150 per annum, with board and residence. Applications by December 18th to the General Superintendent.

MIDHURST UNION, Sussex.—Medical Officer. Salary, £80 per annum, and fees. Applications by December 25th to the Clerk to the Guardians.

NATIONAL DENTAL HOSPITAL, 149, Great Portland Street, W.—House-Surgeon. Salary, £50 per annum. Applications by December 20th to the Secretary.

ROYAL SEA-BATHING INFIRMARY, Margate.—Two Surgeons. Applications by December 20th to the Secretary.

SOUTH DEVON AND EAST CORNWALL HOSPITAL, Plymouth. House-Surgeon. Salary, £100 per annum, with board, etc. Applications by December 20th to the Honorary Secretary.

MEDICAL APPOINTMENTS.

BLUMER, G. Alder, M.D., L.R.C.P., L.R.C.S.Edin., appointed Medical Superintendent to the State Lunatic Asylum, Utica, New York, U.S.A., *vice* John P. Gray, M.D., LL.D., deceased.

BOOTH, Mackenzie, M.D., appointed Chloroformist to the Aberdeen Infirmary.

CALLAGHAN, James Leslie, L.R.C.P.Ed. and L.R.C.S.I., appointed Honorary Medical Officer to the Sir George Bowle's Hospital, Butleigh, Somerset.

DAVIDSON, J. Mackenzie, M.D., appointed Ophthalmic Surgeon to the Aberdeen Infirmary, *vice* Professor Dyce Davidson, deceased.

DOUGLAS, Claude, M.R.C.S.Eng., L.R.C.P.Lond., appointed Honorary Assistant Surgeon to the Leicester Infirmary.

GARDNER, W. T., M.B., M.R.C.S., L.R.C.P., appointed House-Surgeon to the West London Hospital, *vice* R. Lake, M.R.C.S., L.R.C.P., resigned.

GARROD, A. E., M.A., M.B., M.R.C.P., appointed Honorary Physician to the St. Marylebone General Dispensary, *vice* T. T. Pyle, M.D., M.R.C.S., resigned.

GRABHAM, G. W., M.D., M.R.C.S., appointed Honorary Physician to the Bradford Infirmary and Dispensary, *vice* Dr. Alexander, resigned.

FISKE, T. H., M.B., C.M.Edin., appointed Assistant House-Surgeon to the Rotherham Hospital.

MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

MONDAY.—Medical Society of London. Clinical night. Dr. Ord will show a case of Hypertrophic Cervical Pachymeningitis. Dr. Orwin will show a case of Lupus of Larynx, also Hereditary Specific Disease of Tongue. Mr. Marmaduke Sheild: Ulcer of Face. Mr. Bull: Enlargement of Thigh in a Boy. Mr. Noble Smith: Case of Club-Foot and other cases.

TUESDAY.—Pathological Society, 8.30 p.m. Dr. Hale White: Ulceration and Endocarditis of the Right Side of Heart. Dr. Pasteur: Syphiloma of Heart. Dr. A. Money: Rare Aneurysm of Undefined Space. Dr. Handford: Fatty Tumour of Heart. Dr. Hadden: Fatal Cases of Alcoholic Paralysis. Dr. Barlow: Ulcers of Stomach in case of Tuberculosis. Mr. Bruce Clarke: Epithelioma of Bladder. Mr. Swinford Edwards: Tumours of Testis and of Spermatic Cord. Card Specimens: Mr. S. Paget: Sarcoma of Foot. Dr. Handford: (1) A series of Specimens of Oesophageal Disease. (2) Fusion (congenital?) of the Aortic Valves, with three Coronary Arteries. Mr. Shatlock: Hammer Toes.

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.

STALLARD.—On December 14th, at 338A, Oxford Road, Manchester, the wife of Prince Stallard, M.B., C.M., of a son.

DEATHS.

CATTILIN.—On November 13th, at Glendale, Bournemouth, William Alfred Newman Cattlin, F.R.C.S.E. Friends will kindly accept this intimation.

HOPGOOD.—On December 12th, at Stow-on-the-Wold, Gloucestershire, Philip Downing Hopgood, M.R.C.S.E., L.S.A., aged 42.

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, 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; Throat, Th., 3; Dental, Tu. F., 10.
LONDON. —Medical, daily, exc. S., 2; Surgical, daily, 1.30 and 2; Obstetric, M. Th., 1.30; o.p. W. S., 1.30; Eye, W. S., 9; Ear, S., 9.30; Skin, Th., 9; Dental, Tu., 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, Tu., 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, M., 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.

G. H. would feel obliged if any medical brother could recommend him a boarding school for his daughter, aged 13, within easy access of Derby, and where the terms inclusive would not exceed £50 per annum.

AMBULANCE APPLIANCES.

DR. H. J. PRANGLEY (Anerley, S.E.) writes: It having been decided by the proprietor of the Croydon Racecourse to take some measures for the treatment of any accidents that occur at the race meetings held there, I have been requested by him to draw out a list of surgical necessities. I should be greatly obliged to any member who has had special experience in such ambulance work for any hints as to what inexpensive collection of splints, bandages, and other appliances it would be best to provide; and as the subject is not one of general interest, I would ask him to communicate with me directly. I might add that the cases to be treated will be few in number, but of course any accident may arise.

REMEDY FOR LOSS OF HAIR.

A SURGEON would be thankful to any professional brother who can tell him of a remedy that will prevent the hairs of his moustache falling off, and quicken new growth. It was at one time a good one, but latterly it has become thin and bald in places, causing a shiny appearance where the hair has disappeared.

ANSWERS.

AMERICAN DEGREES.

J. G. R. can have the information he desired (JOURNAL of November 27th) re American degree by sending his address to W. Williams, Hafod-y-gan, Llanfair, Abergel.

CHLORIDE OF AMMONIUM IN HEPATIC DISEASE.

THE book referred to in Dr. William Alexander's letter was, *Stewart on Hepatic Diseases*, published by Smith, Elder, and Co., 15, Waterloo Place, S.W.

HIGH INSTEPS.

DR. LILFE.—The London depot for Holland's "Patent Instep-arch" is 416, Brixton Road, S.W.

M. P. J. should communicate with the Registrar for Ireland, Dr. R. L. Heard, 35, Dawson Street, Dublin.

THE PRODUCTION OF THE HUMAN VOICE.

MUSIC will find the points on which he seeks for information fully explained in any of the following works; Merrell Mackenzie, *Hygiene of the Vocal Organs* (Macmillan and Co.); Gouguenheim and Lermoyez, *Physiologie de la Voix et du Chant* (Paris, 1885); Gütznier, *Physiologie der Stimme*, in the first volume of Hermann's *Handbuch der Physiologie*, Leipzig, 1879.

HOUSEMAID'S KNEE.

DR. C. R. ILLINGWORTH writes: I think Dr. Saunders would be better satisfied with Lister's plan of treatment—that of tapping and subsequent immediate blistering, for the purpose of inducing a flow of coagulable fluid into the cavity, with consequent absorption and adhesion.

NOTES, LETTERS, ETC.

UNQUALIFIED ASSISTANTS AND THE GENERAL MEDICAL COUNCIL.

AN ASSISTANT OF THE SOCIETY OF APOTHECARIES, LONDON, writes: Will you kindly publish a few remarks from an unqualified man on the above subject?

Now that the Council has adopted its resolution, can it act upon it? Has the Council the power to deprive hundreds of men of the means of obtaining an honest living? As I understand it, to be guilty of infamous conduct, a medical man must do something that is illegal; and as the practice of an unqualified man, under the control of his master, has not been declared by law to be illegal, how can a medical man be held guilty of infamous conduct?

If the Council's resolution be put into force, how are we unfortunate unqualified men to get a living? Take my own case. I have been engaged as an unqualified assistant for fifteen years, during which time I have acquired a vast amount of practical experience in medicine, surgery, and midwifery, and have received able instruction in all these branches from my employers, and in addition to this instruction in private practice, I have the run of the practice in a small hospital, and receive valuable teaching from its staff of physicians and surgeons. I am now 37 years of age, am married, and have three children (one only a few hours old), and I would ask how I am to obtain daily food for these dear little ones of mine if the only means of which I am possessed of getting a living is taken from me? My case is like unto many others.

Your correspondent "M.R.C.S." (JOURNAL of November 27th) makes a very good suggestion, namely, to "register those of us who can produce evidence of a certain standard of experience." This, if carried out, would be a boon to us of the present day, and in a few years the profession would be rid of unqualified men.

Could not the unqualified men in London hold a meeting, and arrange to memorialise the new General Medical Council on this question of registration of unqualified men? I am sure that the names of we men in the country could soon be obtained.

In conclusion, may I add that I do not want to stand in the way of any young qualified man, but I do want bread for my wife and children.

AN UNQUALIFIED ASSISTANT WITH COMPLETE HOSPITAL CURRICULUM writes: This matter is becoming of vital importance to those whom it is most likely to affect, namely, the men who have to earn a precarious and meagre subsistence as "legally unqualified" assistants. Every week we see in the medical papers fresh clamours for their annihilation, but never any suggestion from their adversaries which may tend to ameliorate the hardship of their wholesale expulsion, or to save a large and by no means undeserving class of men from starvation. It is not the bulk of the profession that desire the suppression of unqualified assistants (such as are properly supervised by legally qualified principals), but it is a powerful minority whose voice is heard in the Council, most of whom are consultants, and do not require to employ assistants, whether qualified or unqualified.

If it be decided to discontinue the employment of unqualified assistants, do not in common justice, turn over all those who are making a living by assisting

qualified practitioners, but give them a chance of continuing their vocation, provided that they can show a reasonable claim to be allowed to do so. I would suggest that one or more examinations of a certain standard be held for assistants, and that those who satisfy at that examination be allowed to continue as unqualified assistants, and to register as such, and that other unqualified men be excluded from entering the profession subsequently to the last period fixed for the examination, and registration of assistants. If some such plan as this be adopted, it will at least give unqualified men a last chance of clinging to their profession, and they will then have no occasion to complain that their livelihood has been snatched from them by arbitrary and unjust legislation.

LEAD-POISONING THROUGH HOME-MADE WINES.

Messrs. PRICE, SONS, AND CO., Bristol, write: Our attention has been called to your article on "Lead-poisoning through Home-made Wines." It is quite true that common pans and common earthenware are glazed with compositions having lead in some form or other. But Bristol glazed stoneware, made by Powell and Sons and ourselves, and also by several potters in London, has no such drawback, and is glazed so perfectly as to withstand not only fermentation of wine or fruit, but the severest tests applied for electrical purposes, for accumulators, secondary batteries, etc.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

THE following were the papers set at the recent examination for the Diploma of Member:—

October 15th, 1886.—*Surgical Anatomy and the Principles and Practice of Surgery*.—1. Give the attachments of the Quadratus Lumborum Muscle, and mention, in their normal positions, the several parts in relation with it. 2. Describe the operation of Excision of the Elbow-Joint, and give, in their order, the relation of the parts concerned. 3. How would you proceed to investigate a case of imperfect sight, with the object of determining in what part of the visual apparatus its cause is seated? 4. Describe the more common Ulcers of the Tongue. Give their chief differences, and their appropriate treatment. 5. Describe the symptoms of Rupture of the Urinary Bladder, and the complications which may result from it. State the various plans of treatment which have been recommended, and give your reasons for the method you would adopt. 6. Give the symptoms, progress, terminations, and treatment of Caries of the Vertebrae.—Candidates were required to answer at least four questions (including one of the first two), and were strongly advised to answer all six.

October 16th, 1886.—*Midwifery and the Diseases of Women*.—1. Describe the signs of Pregnancy at the sixth month. 2. Describe the natural terminations of Labour with the shoulder presenting. 3. Describe a case of Plegmasia Dolens, from the onset of an attack to recovery. How would you treat it? 4. Describe a case of Urethral Caruncle, giving its symptoms, its treatment, and its behaviour under treatment.—Candidates were required to answer three of the four questions.

October 16th, 1886.—*Principles and Practice of Medicine*.—1. Describe the symptoms and treatment of Rheumatic Fever. Enumerate its chief complications and sequelae. 2. What are the causes, symptoms, physical signs, and treatment of Ascites? 3. Discuss the etiology, anatomical characters, and clinical signs of Vesicular Emphysema. 4. Give an account of the action and uses of the following preparations, and mention their doses:—Carbonate of Ammonium, Tartarated Antimony, Hydrate of Chloral, Compound Pill of Soap, Compound Spirit of Ether, Tincture of Nux Vomica, Wine of Colchicum, and Copaliba.—Candidates were required to answer three of the four questions, including question No. 4.

EXTRA-UTERINE FETATION TREATED BY ELECTRICITY.

DR. W. E. STRAUVENSON writes: My remarks at Brighton on the above subject, as quoted in the JOURNAL of November 27th, might be taken as being adverse to the employment of electricity in cases of extra-uterine fetation. That was not my wish; what I wanted to elicit was the best mode of applying electricity in such cases, and, if possible, by what means or in what way the electricity acted so as to destroy the fetus.

The Association had before it two successful cases of extra-uterine fetation, each cured by electricity, and in each case the electricity was employed in an entirely different way; so that the active cause of the destruction of the fetus in one case must have been essentially distinct from that which caused its demise in the other.

In the face of the strong expression of Dr. Robert Newman, the great apostle of electrolysis in New York, at the recent annual meeting of the American Medical Association, it would be rash not to give electricity a fair trial in all cases of extra-uterine fetation. Dr. Newman is reported to have said: "And now, Mr. President, I add to the list the greatest achievement of electrolysis, the certain saving of every woman afflicted by extra-uterine pregnancy, while all perished in former times. Successful cases have been reported by A. D. Rockwell, E. G. Landis, Nathan Bozeman, Garrigues, Reeve, Lusk, and others. The *modus operandi* is simple. Repeated applications, one metal probe in the vagina or rectum, near and below the tumour, the positive sponge-electrode above the abdomen, will destroy and absorb the fetus. It is of great importance to the obstetrician—nay, to every practitioner—to know that he has a certain remedy to save life in this troublesome anomaly of nature."

Dr. Newman has in this connection used the term electrolysis in a different sense to that in which it is understood in this country.

TINNITUS AURIUM A SYMPTOM ONLY.

MR. H. BENDELACK HEWETSON (Ophthalmic and Aural Surgeon to the General Infirmary at Leeds) writes: In the BRITISH MEDICAL JOURNAL of December 4th, I see it reported, but shortly, that Mr. Ward Cousins read a paper entitled "Tinnitus Aurium," describing a method of treatment by "the alternate injection and evacuation of medicated air," before the meeting of the Southern Branch of the South-East Hants District. It would be interesting to learn how the air was medicated, and into what part of the ear it was injected; but I take it, that tinnitus aurium, being but a symptom only of many forms of ear disease (and even when present not always symptomatic of disease of the ear), it cannot be possible to treat successfully as a disease *per se* that which is looked upon as a subjective symptom of some lesion in the ear, or some disorder elsewhere. I can only conceive it possible that "tinnitus aurium" can be either temporarily or permanently relieved by this method when it depends on some error in intra-tympanic air-tension. But I wish forcibly to draw attention to such a title as being entirely misleading, and I maintain that, however imperfectly reported, it is unscientific to attempt to treat a symptom of many forms of

disease of the ear, and other errors of general health, by some universal plan applied to all, which the report of the paper (possibly quite unintentionally) implies.

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BOOKS, ETC., RECEIVED.

Text-Book of Pathological Anatomy and Pathogenesis. By Ernst Ziegler. Translated and Edited by Donald MacAlister, M.A., M.D. Sections IX-XII. London: Macmillan and Co. 1886.

Treatise on Chemistry. By Sir H. E. Roscoe, F.R.S., and C. Schorlemmer, F.R.S. Vol. III. Part III. Organic Chemistry. London: Macmillan and Co. 1886.

Transactions of the Pathological Society of London. Vol. XXXVII. 1886.

On Fevers; the History, Etiology, Diagnosis, Prognosis, and Treatment. By Alex. Collie, M.D. London: H. K. Lewis. 1886.

Gout and its Relation to Diseases of the Liver and Kidney. By Robson Roose, M.D. Third Edition. London: H. K. Lewis. 1886.

Whitaker's Almanack. 1887.

The Prescriber; a Dictionary of the New Therapeutics. By J. H. Clarke, M.D. Edin. Second Edition. London: H. Kimpton. 1886.

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