

Department, Dr. J. B. Ball. Aural Surgeon, Mr. S. Paget. Physician to Skin Department, Dr. F. G. D. Drewitt. Surgeon to Skin Department, Mr. H. F. Weiss. Surgeon in Charge of Orthopædic Department, Mr. C. B. Keetley. Physician in Charge of Electrical Department, Dr. W. P. Herringham. Administrators of Anæsthetics, Messrs. T. Gunton, Alderton, and Rickard W. Lloyd. Secretary, Mr. R. J. Gilbert.

ST. MARK'S HOSPITAL FOR FISTULA AND OTHER DISEASES OF THE RECTUM, CITY ROAD, E.C.—Physician, Dr. F. de Havilland Hall. Surgeons, Messrs. Allingham, and Alfred Cooper. Assistant Surgeons, Messrs. D. H. Goodsall, and F. Swinford Edwards. 322 in-patients, 2,040 out-patients. Clinical instruction is given by the Surgeons both in the out-patient department and in the department and in the wards. The practice of this hospital is free to medical men and students. Operations on Mondays and Tuesdays at 2.

ERRATUM.—The name of the lady who is to deliver the Inaugural Address at the London School of Medicine for Women is Miss Walker Dunbar, M.D., not "Dundas," as printed in the Student's Number of the JOURNAL.

ASSOCIATION INTELLIGENCE.

NOTICE OF QUARTERLY MEETING FOR 1888.

ELECTION OF MEMBERS.

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

A meeting of the Council will be held on October 17th, 1888. 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, September 26th, and December 28th, 1888.

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.

REPORTS upon the two remaining inquiries, namely, that into DIPHTHERIA, and that into the GEOGRAPHICAL DISTRIBUTION OF CERTAIN DISEASES, are in preparation, and will be published as soon as ready.

The following inquiry only of the first series remains open, namely, that on the ETIOLOGY OF PHTHISIS.

A fresh inquiry into the ORIGIN AND MODE OF PROPAGATION OF EPIDEMICS OF DIPHTHERIA has been issued.

Memoranda upon these subjects, and forms for recording observations, may be had on application to the Secretary of the Collective Investigation Committee, 429, Strand, W.C.

BRANCH MEETINGS TO BE HELD.

NORTH OF ENGLAND BRANCH.—The autumnal meeting will be held at Middlesbrough on Thursday, September 20th, at 2.45 P.M. Dr. Hedley will introduce a discussion on the Recent Epidemic of Pneumonia in the Middlesbrough District. Dr. Rutherford Morison will exhibit gall-stones removed by operation, and will read Notes of a Successful Case of Removal of Bladder Tumour by Suprapubic Operation, with microscopic specimens and drawings of the tumour. Dr. Drummond will exhibit some pathological specimens. Dr. Oliver will read a paper on Adonidine in the Treatment of Heart Disease. Dr. Ellis will read a paper on the Treatment of Noises in the Head. Dr. Hinchelwood will read Notes on some Interesting Cases of Syphilis. The dinner after the meeting will be at 4.30 P.M.—G. E. WILLIAMSON, F.R.C.S., Honorary Secretary, 22, Eldon Square, Newcastle-upon-Tyne.

SOUTH-EASTERN BRANCH: EAST SUSSEX DISTRICT.—A meeting of the above district will be held at the Station Hotel, Hayward's Heath, on Thursday, September 27th; Dr. Braid, of Burgess Hill, in the chair. Meeting at 3.45 P.M. Dinner at 5.45 P.M. Charge, 6s., exclusive of wine. Dr. Talford Jones will give a summary of his paper on Mercury as a Diuretic, read at the last meeting, and discussion will be invited. Members of the Branch or others desirous of contributing papers or cases are requested to communicate at once with the Honorary Secretary, T. JENNER VERRALL, 97, Montpellier Road, Brighton.

SOUTH MIDLAND BRANCH.—The autumnal meeting of this Branch will be held at Oundle on Tuesday, October 2nd. Gentlemen who are desirous of bringing forward communications, etc., are requested to inform the Secretary of their intention as soon as possible. CHARLES J. EVANS, Honorary Secretary.

SPECIAL CORRESPONDENCE.

PARIS.

[FROM OUR OWN CORRESPONDENT.]

The Congress on Tuberculosis.

[Continued from page 267.]

M. DE BRUN, of Beyrou, read an interesting paper on the antagonism existing between paludism (ague or marsh fever) and tuberculosis. In Syria he had never met with tuberculosis among persons suffering from intermittent fever, whereas among the negroes, who were exempt from this affection, tuberculosis was very frequent. M. Piot had observed similar facts in Egypt. M. Arloing had made several experiments with the view of discovering some means of preventing tuberculosis. So far he had failed, but he still did not despair of success. Excision of the glands in relation with the seat of inoculation was ineffectual in arresting the course of the disease. Vaccination with tuberculous and scrofulous virus did not prevent a second inoculation from taking effect. M. Babès demonstrated to the Congress that in children the bacillus of tuberculosis was nearly always associated with other micro-organisms, almost as injurious as "Koch's bacillus." It was necessary to realise the fact that latent encysted tuberculosis, which was extremely common among children under the form of glandular tuberculosis, could assume an acute and serious character under the influence of the associated microbes, which were often undeniable factors in the development of the disease. M. Landouzy read a paper on paternal hereditary tuberculosis, in which he stated that children whose mothers and wet nurses were perfectly healthy and free from any taint of tuberculosis, but whose fathers had succumbed to the disease, might develop tuberculosis. In such cases, which are evidently examples not of tuberculous contamination but of autochthonous tuberculosis inherited from the father, it was a question of infection of the ovum by the spermatozoon. It has been observed that subsequent conception results in the birth of weakly marasmic children, or in repeated miscarriages.

M. Hureau de Villeneuve protested against the custom of feeding phthisical patients on raw meat and blood. He maintained that healthy people would run the risk of contracting tuberculosis; and, moreover, such articles of food were not suitable to the digestive organs. M. Arloing, on behalf of M. Galtier, observed that patients ought not to eat raw meat unless it were mutton or goat's flesh; he added that the only milk free from the taint of tuberculosis was goat's milk. M. Legroux mentioned two cases of tuberculous infection resulting from drinking unboiled milk furnished by tuberculous cows, and urged that strict sanitary measures be taken concerning cow's milk; the sale of ass's and goat's milk should be encouraged. M.M. Cornil and Toupet described a lesion observed in an oyster, which, morphologically, closely resembled that of tuberculosis. These pseudo-tubercloses were very difficult to detect. It was only by inoculations and cultivation that they could be identified.

During the Congress, several visits were paid by the members to the different Paris laboratories. One of the most interesting was that to the veterinary school at Alfort. The Director, M. Nocard, showed the visitors all the arrangements, and observed that equine tuberculosis, though known to occur, was so rare that some authors denied it, and spoke at length on the pseudo-tuberculosis or farcy of Guadeloupe oxen, a special micro-organism which had been detected as characteristic of the bovine affection. M. Proust showed the visitors in his "Musée d'Hygiène," a model of M.M. Genesti and Herscher's disinfecting stove, and said soon every transport boat, every steam packet, would be provided with one. For disinfecting rooms in which tuberculous patients had dwelt. M. Proust recommended sending a spray of sublimate solution on the walls. In the Paris hospitals spittoons are cleansed by boiling water; the bacilli are surrounded by water at 90° C., which suffices to kill them. The Congress terminated with a banquet at the Hôtel Continental, at which M. Monod, the accomplished Director of the Ministerial Department of the Assistance Publique, made an excellent speech, furnishing another proof of his scientific

and the highest in Dublin and Wexford. The death-rate from the principal zymotic diseases in these towns averaged 2.0 per 1,000. The 138 deaths registered in Dublin during the week under notice were equal to an annual rate of 20.4 per 1,000, against 18.2 and 17.9 in the two preceding weeks. These 138 deaths included 19 from the principal zymotic diseases (equal to an annual rate of 2.8 per 1,000), of which 8 were referred to "fever," 7 to diarrhoea, 2 to scarlet fever, 2 to whooping-cough, and not one either to small-pox, measles, or diphtheria.—In the sixteen principal town-districts of Ireland the deaths registered during the week ending Saturday, September 8th, were equal to an annual rate of 19.5 per 1,000. The lowest rates were recorded in Londonderry and Sligo, and the highest in Kilkenny and Armagh. The death-rate from the principal zymotic diseases averaged 2.2 per 1,000. The deaths registered in Dublin during the week under notice were equal to an annual rate of 21.7 per 1,000 (against 17.9 and 20.4 in the two preceding weeks), the rate for the same period being only 16.0 in London and 15.1 in Edinburgh. The 147 deaths included 25 which resulted from the principal zymotic diseases (equal to an annual rate of 3.1 per 1,000), of which 12 resulted from diarrhoea.

NOTIFICATION OF INFECTIOUS DISEASE.

MR. D. BIDDLE (Kingston-on-Thames) writes: In the JOURNAL of August 25th, 1888, appeared a paper with the above heading by Dr. Tatham, Medical Officer of Health for Salford. In it Dr. Tatham says: "It is not my object to-day to elicit further controversy on the so-called 'burning question' which has been so warmly discussed of late in our leading periodicals. I am content to record, and to gratefully realise, the fact that, having had experience in my own borough of the concurrent advantages of disease notification and hospital isolation, for a period of nearly six years, I find that these systems have been productive of substantial benefit to the health of the people, and that the advantages which we derive from notification accumulate steadily as time goes on." He then goes on to say that, since the beginning of this year, he has (in conjunction with several other medical officers of health) carried out a "project of collecting and circulating returns of infectious sickness," and hopes it will become general throughout the country.

With your permission, I should be glad to draw attention to a somewhat cruel commentary upon this *nimia diligentia*, which is to be found on p. 457 of the same JOURNAL. We there have presented to us "Public Health Statistics relating to Twenty-eight Large English Towns, for the Second Quarter of 1888," and we find, under the head of Annual Death-rate from the Principal Zymotic Diseases, that Salford actually has the highest, namely, 3.14 per 1,000! Manchester (also under the dual system of notification) is next below it, with 2.65 per 1,000. But Liverpool, with a population three times as numerous and nearly three times as dense as that of Salford, but with no system of notification, has a zymotic death-rate of only 1.48 per 1,000 for the same period.

We here have the stern criticism of facts, gathered from an independent source, and I trust that Dr. Tatham and those who think with him will take it to heart, and cease their meddling.

MEDICAL OFFICERS OF HEALTH.

PERPLEXITY writes: Will you please explain Section 18 Subsection 1 of the Local Government Act, 1888, which requires every medical officer of health to be "legally qualified for the practice of medicine, surgery, and midwifery?" Please give the names of the various qualifications to practise midwifery, one or other of which every medical officer of health must now possess.

* * The qualification required by the Local Government Act for a medical officer of health in the first instance does not seem to differ from that previously required by the Public Health Act, the words of which are "legally qualified medical practitioner." Under both Acts it is necessary for the medical officer of health to be on the Register. The Medical Act of 1886 defines the qualifications which are necessary in order to entitle a man to be on the Register, and we presume that anyone who has these qualifications, and is on the Register accordingly, may be selected by a County Council to be their medical officer of health. If there is any doubt as to the efficiency of a particular diploma, we will hereafter endeavour to solve it.

EXTRAORDINARY MIDWIFERY.

MR. WALTER BUCHANAN (Chatham) writes: I was greatly interested in reading the short account concerning the Sheffield guardians' return to the Local Government Board with regard to extraordinary midwifery. At first sight the proportion of 124 to 329 seems "astounding," as one of the guardians remarked, especially when the matter is considered by one incompetent to judge. Now, speaking from an experience of over 20 years, I think that what I write will quite modify the opinion. 1. Difficult midwifery exists more frequently in different districts. 2. The nature of the employment of the female inhabitants must be taken into account. 3. General custom of the *accoucheur*.

I recollect, just after qualifying, passing a few months with a friend. The first case I attended for him was one of placenta previa, about three miles from home. I was quite proud of my case, for it did well; but my conceit was quite taken down by my friend stating that these cases were very common in the neighbourhood, owing to the stooping occupation of agricultural women. I found he was right, for I had three cases there in three months, and I have only had eight since in my own practice in nineteen years. In a lace-making county I found forceps were often necessary; the reason given was that the sedentary occupation of young women in bad atmosphere, inclined over their work for the greater part of the day, caused pelvic deformity.

Now, with regard to the line of practice, some medical men dislike forceps so much that they prefer trusting to Nature for expulsion, and risking *post-partum* hæmorrhage and its consequences; whereas others more cautious wish to assist Nature when they find its efforts are ineffectual, thereby saving the risk.

Coming more closely to the point, in towns such as Sheffield and the one I live in, the midwifery, to the extent of 80 per cent., is conducted by ignorant women (too old or lazy to do hard work), who know nothing whatever of what they profess to undertake, and the consequence is that only the difficult ones out of this number—which, in many cases, are almost exhausted—fall into the hands of the district medical officer. In my pauper midwifery, I average about one extraordinary case in four, and attend not more than twenty pauper confinements in a year, whereas I vaccinate over 500, nearly all of which are midwives' cases.

When the midwife retires from a case, the responsibility falls upon the medical man, who has a private practice at stake; and is the fee of £2 too much in such instances—not only cases of anxiety and dirt, but which often have to be attended in some hovel in which a guardian would be sorry to stable his horse or soil his pig by allowing it to live therein?

HOSPITAL AND DISPENSARY MANAGEMENT.

CORK LUNATIC ASYLUM.

At the monthly meeting of the governors held last week, the report of Dr. Nugent, Inspector of Lunatic Asylums in Ireland, in which he recommended the building of a second asylum for the West Riding of the county, was under consideration. The proposal, as might naturally be expected, was not approved of by the resident medical superintendent, while the Mayor believed that the establishment of a second asylum would considerably increase taxation. Dr. Nugent directed attention to the fact that out of 991 inmates 226 were from the West Riding, and said that the matter would be brought under the notice of the Board of Control. He considers that no further additions ought to be made to the asylum, however requisite for the wants of the district, even were they feasible, bearing in mind the fact that the city has, owing to its vicinity, more than twice its legitimate proportion, and that it would not be equitable to entail on the more remote portions of the county an expenditure on buildings from which they would derive but scanty benefit, the city being essentially a gainer. Apart, however, from any outside consideration, the land attached to the asylum is ill-adapted and much too small for the proposed scheme.

INDIA AND THE COLONIES.

TWENTY-THIRD ANNUAL REPORT OF THE SANITARY COMMISSIONER WITH THE GOVERNMENT OF INDIA, 1886.

THE report opens as usual with a summary of the meteorological phenomena of the year. The health of the European garrison of India appears to have been better than in the previous year; the number of admissions was less, but the mortality was greater, and the number of serious cases was in excess of the average, facts explained by the influence of active military operations going on in Upper Burmah. The strength of the European Army for the year was 61,015; the number of admissions was 1,514; the daily sick 75; the deaths 15.18; the invaliding 21; the total loss 36 per mille of strength. The death-rate was the highest since 1881, but was 4 per 1,000 less than the average of 1870-79. Madras "was the chief contributor to the increase of the death-rate," explained by the fact that Burmah is included, where active operations were going on. There was a considerable decrease in the loss from invaliding. The total loss from death and invaliding was as above, 36 per mille, a ratio lower than that of any year since 1870. In Bengal the average strength of European troops was 38,784, the admissions 1,559, the daily sick 73, the deaths from cholera 0.64, from other causes 14.88; total 15.52; invaliding 18 per 1,000; total loss 34.

In Madras the average strength was 11,181; the admissions into hospital, 1,380; daily sick, 82; deaths from cholera, 0.09; from other causes, 16.37; total, 16.46; invaliding, 24; total loss, 40 per 1,000.

The average strength of the European army of Bombay was 11,050; admissions into hospital, 1,490; daily sick, 73; deaths from cholera, 0.36; from other causes, 12.31; total, 12.67; invaliding, 28; total loss per 1,000, 41. The chief diseases causing invaliding were, in order, circulatory diseases, anæmia and debility, phthisis, hepatitis, syphilis, dysentery, injuries, mental affections, rheumatism, ague, and malarial cachexia. Malarial fevers as

usual caused a large proportion of the sickness in the three presidencies; venereal diseases head the list in Madras. It is a serious fact that the ratio of admissions from the disease increased in all three presidencies—that of Bengal by 31 per mille, that of Madras by 44, and that of Bombay by 90. So much for the legislation forced on the Government of India by the advocates of respect for the feelings of prostitutes at home and abroad. It is a notable fact that the death-rate from enteric fever (5.70) exceeded that of the other chief diseases in all three presidencies. Next to it come hepatitis, 1.26, as usual highest in Madras; then dysentery, 0.91; then apoplexy and heat-stroke, 0.88; remittent and simple continued fever, 0.83; cholera, 0.64.

This admirable report as usual is quite a storehouse of valuable information on all health questions of interest. We regret that the weekly increasing pressure on our space prevents us from presenting an analysis of its contents; we can only commend it to the careful study of military medical officers and students of tropical medicine throughout the world.

CYPRUS.

THE CYPRUS SOCIETY.—Princess Christian has become the president of this society, which has been formed for the advancement of hospital and educational work in Cyprus. The society proposes to establish a hospital at Kyrenia, where there is none at present, with the prospect of its subsequent development into a convalescent hospital. Kyrenia, situated on the north coast, is admirably adapted for this purpose, being one of the healthiest parts of the island, and remarkable for its beautiful scenery. In accordance with the wish of the donor of the site, it will be named the "Gordon Hospital," in memory of General Gordon. After the hospital—which will be of the nature of an English cottage hospital—has been built and equipped, the society hopes to train native nurses and establish travelling dispensaries, or ambulances. The society also hopes to found technical, industrial, and agricultural schools. The society is in no way political, but only seeks to supply that which is beyond the province and resources of the government. The honorary secretaries are William White, F.S.A., and Miss S. Chapman Hand, of whom further information can be obtained.

OBITUARY.

JAMES SYMES, L.R.C.P. and S. EDIN.

WE regret to have to record the untimely death of this gentleman, which occurred on July 29th, at Malvern, where he had gone for the benefit of his health. Mr. Symes, who was 47 years of age, had been in practice for a considerable time at Briton Ferry, Glamorganshire, where he was extremely popular socially as well as professionally. The deceased gentleman was the second son of Mr. James Symes, solicitor, of Dublin, who survives him. He was educated at Trinity College, Dublin, and obtained the licence of the Edinburgh College of Surgeons in 1862, and that of the College of Physicians in 1864.

Mr. Symes had a thoroughly sound knowledge of his profession, and was a very successful practitioner. Whilst his medical skill made him the trusted adviser of a large number of sufferers, his kindness of heart and utterly unselfish disposition made him universally beloved in Briton Ferry and the neighbourhood for a wide distance around. His funeral was of an impressive character, and bore eloquent witness to the sorrow felt by all classes of the inhabitants for the loss of one who had spent his life among them in doing good.

JAMES BELL JARDINE, M.D. EDIN.

WE regret to announce the death of this venerable practitioner, which took place at his residence in Chatham on August 24th. Dr. Jardine was one of the oldest members of the profession, having attained the ripe age of 81. In 1827 he became Licentiate of the Royal College of Surgeons, Edinburgh, and in 1831 he took the M.D. degree in the University of Edinburgh. Nearly half a century ago he settled in Chatham, where he remained in active practice until a few days before his death, which resulted from an overdose of morphia. He had been suffering from diarrhoea, accompanied by great pain, for nearly a week; and on the evening of August 23rd, in the presence of one of his relatives, he poured out and drank (without measuring) about half a wineglassful of liquor morphiæ acetatis, B.P., in order, as he said, to get a little

sleep. From the effects of this he died after twenty-five hours' narcosis. His funeral took place on August 28th, amid many tokens of respect from the inhabitants of the town, and was attended by several of his brother practitioners, by the members of the Chatham Board of Health, and numerous patients and friends. The deceased held the appointment of Medical Officer of Health for Chatham, and was formerly senior visiting surgeon under the Contagious Diseases Acts. He was widely known, and greatly respected, his kindly genial manner endearing him to all classes.

MEDICAL NEWS.

SOCIETY OF APOTHECARIES OF LONDON.—The following gentlemen, having satisfied the Court of Examiners as to their knowledge of the science and practice of Medicine, Surgery, and Midwifery, received certificates entitling them to practise as Licentiates of the Society, in August, 1888:—

Adams, Campbell Rutherford, St. Thomas's Hospital and Newcastle-on-Tyne.

Cochrane, James Mackeand, M.D., C.M. Ontario, Toronto Hospital.

Davis, Harry, University College.

Francis, Lloyd, M.D. Oxon., M.R.C.S., L.R.C.P. Ed., London Hospital.

Livsey, William Edward, University College and Liverpool Royal Infirmary.

Masters, Alfred Thomas, St. Mary's Hospital.

Mitchell, Elizabeth Simpson, Kingston General Hospital, Canada.

Preston, Francis Harrison, St. Bartholomew's Hospital.

Stover, Herbert Charles, Guy's Hospital.

The following passed in Surgery.

E. Knight, University College, Bristol; R. T. Hewlett, King's College; P.

P. Baly, Queen's College, Birmingham; J. C. Hoyle, St. Bartholomew's

Hospital; E. S. Snell, University College; C. E. Baxter, Charing Cross

Hospital; W. L. Bentley, Owens College, Manchester; W. Case, King's

College; H. A. Rudyard, University College; F. C. Spurgin, Middlesex

Hospital.

The following passed in Medicine.

J. E. Foster, Birmingham; F. Brightman, University College; W. B. Sly-

man, St. Bartholomew's Hospital; J. H. Gordon, Birmingham and Uni-

versity Durham; A. J. Horton, Queen's College, Birmingham; H. Ver-

mack, Queen's College, Birmingham; C. F. Marshall, Owens College,

Manchester; F. L. Wood, Owens College, Manchester.

The following passed in Midwifery.

A. Crompton, St. Bartholomew's Hospital.

MEDICAL VACANCIES.

The following Vacancies are announced:

BELGRAVE HOSPITAL FOR CHILDREN.—Resident House-Surgeon and Assistant Secretary. Appointment for six months. Salary at the rate of £30 per annum, with board and residence. Applications by September 15th to the Honorary Secretary, 79, Gloucester Street, S.W.

CHELTENHAM GENERAL HOSPITAL.—Resident Surgeon for the Branch Dispensary. Salary, £180, with partly furnished house, etc. Applications by September 15th to the Honorary Secretary.

CITY OF LIVERPOOL.—City Hospital, Parkhill, and City Hospital, Grafton Street.—Visiting Physician. Salary, £100 per annum. Applications by September 25th to the Chairman of the Hospitals' Committee, Town Clerk's Office, Liverpool.

COUNTY ASYLUM, Shrewsbury.—Junior Assistant Medical Officer. Salary, £100 per annum, with board, lodging, etc. Applications by September 18th to the Medical Superintendent.

DENTAL HOSPITAL OF LONDON, Leicester Square.—Lecturer on Dental Surgery and Pathology. Applications by October 8th to the Dean.

EAST LONDON HOSPITAL FOR CHILDREN, Shadwell, E.—Resident Clinical Assistant. Board and lodging. Applications by September 28th to the Secretary.

FULHAM UNION.—Assistant Medical Superintendent. Salary, £100, with board and furnished apartments, etc. Applications by September 24th to the Clerk to the Guardians, Fulham Palace Road, Hammersmith.

GENERAL INFIRMARY, Hull.—House-Surgeon. Salary 100 guineas per annum, with board and furnished apartments. Applications by September 17th to the Chairman of the House Committee.

GENERAL INFIRMARY, Leeds.—Resident Medical Officer and Pathologist. Salary, £100 per annum, with board, residence, etc. Applications by September 15th to the Secretary of the Faculty.

GREAT NORTHERN CENTRAL HOSPITAL, Holloway Road, N.—Physician. Applications by September 29th to the Secretary.

GREAT NORTHERN CENTRAL HOSPITAL, Holloway Road, N.—House-Physician. Salary, £50 per annum, with board and lodging. Applications by September 29th to the Secretary.

MANCHESTER ROYAL INFIRMARY, DISPENSARY, AND LUNATIC ASYLUM.—Honorary Assistant Physician. Applications by September 18th to the Chairman of the Board.

NORTH SHIELDS AND TYNE MOUTH DISPENSARY.—House-Surgeon and Dispenser. Salary, £130 per annum, with furnished house, etc. Applications by September 27th to the Honorary Secretaries, 99, Howard Street, North Shields.

PARISH OF DORNOCH.—Medical Officer. Salary, about £40 per annum. Applications by September 18th to the Rev. Neil Taylor, Chairman of the Parochial Board, Dornoch, N.B.

PARISH OF LAMBETH.—Assistant Medical Officer and Dispenser. Salary, £125 per annum, with board and lodging, etc., and £8 per annum in lieu of beer. Applications by September 18th to the Clerk, Guardians' Board-room, Brook Street, Kennington, S.W.

ROYAL UNITED HOSPITAL, Bath.—House-Surgeon. Salary, £80, with board and lodging. Applications by September 21st to the Secretary Superintendent.

ST. MARYLEBONE GENERAL DISPENSARY, Welbeck Street, W.—Resident Medical Officer. Salary, £105 per annum, with furnished apartments, etc. Applications by September 24th to the Secretary.

WEST LONDON HOSPITAL, Hammersmith Road.—House-Surgeon. Board and lodging. Applications by September 20th to the Secretary Superintendent.

WESTMINSTER GENERAL DISPENSARY, Gerrard Street, Soho.—House-Surgeon. Salary, £100 per annum, with apartments. Applications by September 22nd to the Secretary.

WESTMINSTER HOSPITAL, S.W.—Fourth Assistant Physician. Personal application on October 2nd.

WESTMINSTER HOSPITAL, S.W.—Administrator of Anæsthetics. Personal application on October 2nd.

MEDICAL APPOINTMENTS.

GARRETT, John Henry, M.D., B.S., L.S.Sc.Univ.Durh., appointed Resident Medical Officer to the City of Liverpool Southern Hospital for Infectious Diseases.

GOUGH, H. E., M.R.C.S.Eng., L.R.C.P.Lond., appointed Assistant Surgeon to the Liverpool Dispensaries, *vice* H. E. Brodrick, M.B., resigned.

KERSHAW, E. E., M.R.C.S., L.R.C.P.Lond., appointed House-Physician to the Middlesex Hospital.

NASON, W. S., M.B.Édin., appointed Assistant House-Surgeon to the General Hospital, Birmingham.

PAYNE, Charles A., M.R.C.S.Eng., L.S.A.Lond., appointed Resident Medical Officer to the General Hospital, Hobart, Tasmania, *vice* C. J. Parkinson, resigned.

HOME FOR INEBRIATES.—The eighth report of the Inspector of Retreats, under the Habitual Drunkards Act, 1879, for the year 1887, recently published, shows that sixty-six persons in the aggregate were admitted to the seven retreats during the year, as against seventy-three in the previous year. Several patients obtained their discharge for various reasons before the usual time. Very satisfactory work was reported from all the retreats.

EDUCATION OF PLUMBERS IN FRANCE.—A School of Sanitary Plumbing has lately been established by the Council of the Association of Working Plumbers in the Department of the Seine, for the purpose of giving these artisans better instruction in the practical part of their trade, and a competent knowledge of the principles of hygiene relating to their work. Besides technical courses, Dr. A. J. Martin will lecture on the hygiene of the dwelling, and M. L. Masson on sanitary plumbing.

PRESENTATION.—The medical practitioners of Swansea held a meeting on August 31st for the purpose of presenting Dr. William T. Davies with an illuminated address and a case of instruments on the occasion of his leaving the town to practise at the Cape of Good Hope. The address was signed by almost all the members of the medical profession in Swansea, and the warmest wishes for Dr. Davies's success in his new sphere were expressed. Dr. W. T. Davies is the son of Mr. Ebenezer Davies, an ex-President of the South Wales and Monmouthshire Branch of the British Medical Association.

BRUSSELS EXHIBITION.—Mr. W. E. Bush, F.C.S., a member of the firm of Messrs. W. J. Bush and Co., manufacturing chemists, London, has been appointed British Juror in the Chemical Section of the Brussels Exhibition.

THE MANAGERS of the Central London District Schools, Hanwell, have voted £100 to Dr. Littlejohn for his extra services in having for a time superintended the schools, in addition to his own official duties as Medical Officer.

MEDICAL MAGISTRATE.—Dr. Adam Fletcher has been placed on the Commission of the Peace for the borough of Bury.

BEQUESTS.—Mr. Capel Carter, formerly of Woodford, but late of Bath, bequeathed £3,000 to the London Hospital, £3,000 to the Charing Cross Hospital, and £2,000 to the Dental Hospital of London.

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 announcement.

MARRIAGE.

EWART-MULLER.—At St. Mary's, Swiland, Suffolk, on September 1st, by the Rev. J. D. Brown, Rector of Winesham, assisted by the Rev. J. Wickham, Rector of Swiland, Charles Ewart, M.D., L.R.C.P., M.R.C.S.Eng., of 58, Queen's Gate Terrace, South Kensington, S.W., to Maud Muller, daughter of William Muller, Esq., of 17, Prince's Square, W.

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 Orthopedic; 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); St. Mary's; 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 Orthopedic.—10.30 A.M.: Royal London Ophthalmic.—1 P.M.: Middlesex.—1.30 P.M.: St. Bartholomew'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; St. Thomas's (Obstetric Department); 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.; 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. S., 1.30; 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; Orthopedic, M., 2.30; Dental, Tu. F., 9.

ST. GEORGE'S.—Medical and Surgical, M. T. F. S., 1; Obstetric, Tu. S., 1; o.p., Tu., 2; Eye, W. S., 2; Ear, Tu., 2; Skin, W., 2; Throat, Th., 2; Orthopedic, W., 2; Dental, Tu., S., 9, Th., 1.

ST. MARY'S.—Medical and Surgical, daily, 1.45; Obstetric, Tu. F., 1.45; o.p., M. Th., 1.30; Eye, Tu. F. S., 9; Ear, M. Th., 3; Throat, Tu. F., 1.30; Skin, M. Th., 9.30; Electrician, Tu. F., 2; Dental, W. S., 9.30; Consultations, M., 2.30; Operations, Tu., 1.30; Ophthalmic Operations, F., 9.

ST. THOMAS'S.—Medical and Surgical, daily, except Sat., 2; Obstetric, Tu. F., 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 FOR THE CURRENT WEEK'S JOURNAL SHOULD REACH THE OFFICE NOT LATER THAN THE FIRST POST ON WEDNESDAY.

COMMUNICATIONS respecting editorial matters should be addressed to the Editor, 429, Strand, W.C., London; those concerning business matters, non-delivery of the JOURNAL, etc., should be addressed to the Manager, at the Office, 429, 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, 429, 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.

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

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.