

## ASSOCIATION INTELLIGENCE.

### 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.

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.

**METROPOLITAN COUNTIES BRANCH: SOUTH LONDON DISTRICT.**—A meeting will be held (by kind permission of the Treasurer) in the Governors' Court Room, St. Thomas's Hospital (entrance from Westminster Bridge), on Thursday, October 25th, at 8.30 P.M. Dr. Brodie Sewell (President of the Branch) will take the chair. Dr. Ord will read a paper on the Diagnosis and Treatment of Ulcer of the Stomach. Cases of interest, from the wards of the hospital, will be on view from 8 o'clock.—R. PERCY SMITH, Honorary Secretary, Bethlem Royal Hospital, S.E.

**STAFFORDSHIRE BRANCH.**—The fifteenth annual general meeting of this Branch will be held at the North-Western Railway Hotel, Stafford, on Thursday, October 25th, at 3.30 P.M. An address will be delivered by the President, Dr. F. Boldero, Penkridge.—T. VINCENT JACKSON, Wolverhampton.

**OXFORD AND DISTRICT BRANCH.**—The next meeting of this Branch will be held on Friday, October 26th, in the Radcliffe Infirmary, at 3 P.M. Members intending to read papers or show cases are requested to communicate with the Honorary Secretary, W. Lewis Morgan, 42, Broad Street, Oxford, on or before October 12th.—S. D. DARBISHIRE and W. LEWIS MORGAN, Honorary Secretaries.

**SOUTH-WESTERN BRANCH.**—An intermediate meeting of the Branch will be held at the Angel Hotel, Tiverton, on Thursday, October 25th, 1888, at 2 P.M. Luncheon will be provided between one and two o'clock, at three shillings a head. Notices of papers, cases, etc., to be sent to the Honorary Secretary; and members who propose to attend the meeting and luncheon are requested to inform the Honorary Secretary a few days beforehand. Mr. J. D. Harris, Exeter, will read a paper "On the General Condition of the Injured on Admission to the Devon and Exeter Hospital after the Theatre Fire." Mr. L. Mackenzie, Tiverton, will show: 1. A Case of Arsenic Poisoning simulating Addison's Disease. 2. A Case of Fracture of the Spine.—P. MAURY DEAS, Honorary Secretary, Wonford House, Exeter.

**NORTH OF ENGLAND BRANCH.**—The clinical meeting will be held at the Ingham Infirmary, South Shields, on Wednesday, October 24th, at 4 P.M. Cases of interest will be shown by the members of the staff of the hospital, and by others.—G. E. WILLIAMSON, F.R.C.S., Honorary Secretary, 22, Eldon Square Newcastle-upon-Tyne.

**LANCASHIRE AND CHESHIRE BRANCH.**—An intermediate meeting of the Branch will be held at the Co-operative Hall, Cairo Street, Sankey Street, Warrington, on Tuesday, October 23rd, at 3.15 P.M. Dr. Watkins, President of the Branch, in the chair. The following medical and surgical communications have been promised: Dr. Hill Griffith will exhibit some cases of Mules's Operation "Artificial Vitreous." Mr. C. E. Richmond will read a paper entitled "Cases of Lymphatic Obstruction." Dr. Dreschfeld will make some observations on "Pyrocin, a new Antipyretic." Dr. Mitchell Banks will read a communication on the "Uses of Turpentine and Scraping in Unhealthy Wounds." Mr. Jones will mention a case of "Tumour of the Hard Palate," and exhibit the specimen. Dr. Brooke will read a short paper on the "Bases of Ointments." Dr. Leech will make some remarks on "Some of the Newer Soporifics." Dr. Walter will exhibit a patient from whom he removed a Hydrosalpinx. Lunch will be provided by the members of the Branch residing in Warrington, at the Town Hall, from 2 to 3.15 P.M. Dinner: By the courtesy of the Mayor of Warrington, the dinner after the meeting will be held in the Council Chamber of the Town Hall, at 6 P.M. Tickets 7s. 6d. each (wine not included). It would greatly facilitate the arrangements if members intending to dine

would write for tickets to Mr. C. E. Richmond, Bold Street, Warrington, before the day of meeting.—CHARLES B. GLASCOTT, M.D., General Secretary, 23, St. John Street, Manchester.

**SOUTH-EASTERN BRANCH: WEST SUSSEX DISTRICT.**—A meeting will be held at the Marine Hotel, Worthing, on Tuesday, October 30th, at 3.45 P.M. W. J. Harris, Esq., of Worthing, in the chair. Dinner at 5.30 P.M. Communications by Dr. A. B. Buckell, of Chichester; and Dr. Gostling, of Worthing. Members desirous of reading papers or showing specimens are requested to write at once to the Honorary Secretary, W. AYTON GOSTLING, West Worthing.

**SOUTH-EASTERN BRANCH: WEST SURREY DISTRICT.**—The next meeting will be held at the Royal Surrey County Hospital, Guildford, on Thursday, October 25th, at 3.30 P.M. Albert Napper, Esq., of Guildford, in the chair. Agenda: Bilton Pollard, Esq., F.R.C.S.: The Treatment of Tubercular Disease of Joints, with especial reference to the Hip and Knee Joints. Dr. Herbert J. Stowers: The Treatment of Eczema. Anyone wishing to read papers, etc., should communicate at once with the Honorary Secretary. Dinner at 6 P.M., at the White Lion Hotel. Charge, 7s. (exclusive of wine).—J. PERCY A. GABB, M.D., Honorary Secretary.

**SOUTH EASTERN BRANCH: EAST SUSSEX DISTRICT.**—A meeting of the above District will be held at the Queen's Hotel, Eastbourne, on Friday, November 23rd. Dr. Roberts in the chair. Those desirous of reading papers or showing cases, should communicate with the Honorary Secretary, T. JENNER VERRALL, 97, Montpellier Road, Brighton.

**SOUTHERN BRANCH: ISLE OF WIGHT DISTRICT.**—The quarterly meeting of the above Branch will be held at the Bugle Hotel, Newport, on Thursday, October 25th, at 4.45 P.M. The President, T. A. Buck, M.B., in the chair. Proposed new district member, Surgeon E. J. Erskine Kirk. Agenda: 1. Election of President-elect. 2. Notes on an Outbreak of Typhoid Fever in one Family, T. A. Buck, M.B. 3. A Case of Factitious Urticaria, R. Robertson, M.D. 4. The Influence of Race and Class upon the Course of Disease, B. Hoffmeister, M.D. 5. Mr. John Ellis will show his new Dental Mallet, capable of making over 1,200 strokes per minute. 6. A Question, W. E. Green. 7. A Fatal Case of Atrophy and Dilatation of the Stomach: Necropsy, T. A. Buck, M.B. New Drugs and Pharmaceutical preparations will be exhibited by Messrs. Wyley and Co, of Coventry; Mr. G. Brown, of Sandown and Newport; Messrs. Richardson and Co, of Leicester. Gentlemen who are desirous of introducing patients, exhibiting pathological specimens, or making communications are requested to signify their intention at once to the Honorary Secretary. Dinner at 5.30 P.M. Charge 6s. (exclusive of wine).—W. E. GREEN, Honorary Secretary.

**YORKSHIRE BRANCH.**—A conjoint meeting of the East York and North Lincoln, and Yorkshire Branches will be held in the Museum of the Yorkshire Philosophical Society, in York, on Wednesday, October 31st, at 2.30 P.M. Members intending to read papers are requested to send in their names at once to ARTHUR JACKSON, Secretary.

**DORSET AND WEST HANTS BRANCH.**—The next meeting will be held at Wimborne, on Wednesday, October 24th. The business meeting will be held at the Board Room of the Union, by permission of the guardians, at 2.30 P.M. Agenda: Election of officers for 1889. Place of May meeting. Election of new members of the Branch. Communications.—Mr. Wyke Smith: 1. Bandage used in Cases of Operation for Hernia and Wounds in the Groin. 2. Strap for Ganglia of the Wrist. Mr. Mahomed: Some Cases treated at the Mount Dore, Bournemouth. Dr. Greves: Notes on a Case of Acute Intestinal Obstruction: Operation: Recovery. Mr. Wyke Smith: A Case of Land Scourvy. Discussion: Vomiting in Pregnancy. Dinner at the King's Head Hotel at 5 P.M.; charge 6s. each, without wine. Members intending to be present are requested to communicate with Mr. Parkinson, on or before Saturday, October 20th.—WILLIAM VAUDRY LUSH, M.D., Weymouth, and C. H. WATTS PARKINSON, Wimborne, Honorary Secretaries.

### SOUTH-EASTERN BRANCH: EAST SURREY DISTRICT.

THE autumn meeting of this district was held at the White Hart Hotel, Reigate, on Thursday, October 11th, at 4 P.M.; C. HOLMAN, M.D., of Reigate, Treasurer of the British Medical Association, in the chair. Forty members and visitors were present, of whom twenty-two dined together after the meeting.

**Functional Albuminuria.**—Dr. RALFE read a paper on "Functional Albuminuria," in which, after discussing the theories of the cause of the presence of albumen in the urine—namely (1), as a result of increased pressure in the renal vessels causing its transudation; or (2), that in health the epithelium of the glomeruli or tubules absorbs any albumen in the urine; and where this function is impaired by disease the albumen escapes.—Dr. Ralfe inclined to the latter view, and explained the albuminuria of some forms of dyspepsia by the hypothesis that, owing to functional derangement of the liver, and consequent impaired metabolism of excreta into urea, there might be excess of albuminoids in the blood passing through the renal vessels, and the epithelium being unable to reabsorb all, some escaped in the urine. Dr. Ralfe described the clinical varieties of functional albuminuria, dividing them into three classes: 1. Cyclical; either intermittent or continuous, but always with a daily exacerbation (usually in the morning). 2. Paroxysmal; in this form there were also frequent exacerbations, but not so regularly. The albuminuria of glycosuria was usually of this variety. 3. Intermittent; having varying causes, either

digestive, neurotic, or toxic. The difficulty occasionally experienced in diagnosing functional albuminuria from that of early chronic interstitial nephritis was pointed out. In both, polyuria was frequent; in the former, it was more proportionate to the amount of fluid taken; in the latter, to the arterial tension. Under the forms of intermittent albuminuria due to neurotic causes, Dr. Ralfe described cases where worry or overstrain of mind produced it, as in candidates for examination and for life-insurance, and insisted on the need in such instances of frequent and careful examination of the urine before deciding that the albuminuria had an organic origin. It was probable that in some cases continued functional albuminuria might lead to nephritis.—A discussion followed, in which Drs. HOLMAN, J. H. GALTON, BEBBIDGE, DUNCAN, and KELSEY took part.

**Avulsion of Leg.**—Mr. H. W. DREW read notes of a case of avulsion of the lower limb from an accident, where there was escape of cerebro-spinal fluid, with recovery. The case was unique in many respects.

**Adenoid Vegetations of Naso-Pharynx.**—Mr. T. MARK HOVELL read a paper on "Adenoid Vegetations of the Naso-pharynx," in which he described the etiology, symptoms, and treatment of the affection. He showed the forceps which he used for removal of the growths; it had a cutting edge all round; one blade, fitting into the other accurately, punched out any projecting tumour laid hold of. Mr. Hovell advised an anæsthetic to be given, and as much as possible removed at one sitting. Recurrence to any extent was infrequent.—Dr. J. H. GALTON, Mr. WRAY, Drs. PRANGLEY, CHALDECOTT, and BEBBIDGE made remarks.

**Electricity in Insanity.**—Dr. G. H. NEWTH gave illustrations of cases showing the value of electricity in the treatment of insanity.

## SPECIAL CORRESPONDENCE.

### VIENNA.

[FROM OUR OWN CORRESPONDENT.]

**A New Method of Mixed Narcosis.**—The *Rudolfsquelle* of Marienbad.—The Effect of Hyoscine.—Eight Fatal Cases of Rupture of Tubal Pregnancy.

IN a recent number of the *Wiener Klinische Wochenschrift*, Professor Obalinski proposes the following method of mixed narcosis, which he has repeatedly tried and found very useful. Pure chloroform is given to begin with in the usual way (that is, by means of Esmarch's mask) for from four to twelve minutes, the quantity of chloroform used being equal to from 4 to 12 grammes. A quantity of from 3 to 5 centigrammes of a 3 to 5 per cent. solution of cocaine is then injected into the place to be operated upon. There is no reason to be afraid of injecting even a larger quantity of cocaine, as chloroform, which is one of the best antidotes of cocaine, is administered at the same time; and also, because a part of the cocaine is removed by operation. After the injection of cocaine Professor Obalinski does not use any more chloroform, especially when the operation is one of short duration; occasionally he employs it in small quantities and at long intervals of time. The method has hitherto been employed in twenty-four cases, and the following are its advantages: 1. The advantages of both the general and local anæsthetising methods are combined in it. Certain dangers proper to each of these methods are excluded by the combined procedure. The fact that a smaller quantity of chloroform is used gives greater confidence in its use, and besides at the same time a drug is employed which is known to be the best excitant, as it causes contractions of the blood-vessels as well as of the cardiac muscle, whereas chloroform paralyses these organs. Again, there are individuals who have a certain idiosyncrasy in respect of cocaine; in these, even proportionately small doses of the drug produce disagreeable symptoms of cerebral anæmia, shown by "tinnitus aurium," pallor of the face, giddiness, etc.; and an antidote, such as amyl nitrite, chloral hydrate, chloroform, ether, or morphine, when administered at the same time, instantly causes all these disagreeable phenomena to disappear. From all these facts it may be concluded that local cocaine anæsthesia in connection with semi-narcosis produced by chloroform is more reliable than pure chloroform narcosis. 2. Vomiting occurs much more rarely in mixed than in chloroform narcosis. 3. The patients

awake more easily from the mixed narcosis, and do not feel depressed or weary. The sole disagreeable symptom—and it is one of rare occurrence—is that there is more excitement, especially in nervous persons. This is manifested by crying, uneasiness, or strong tetanic muscular contractions. Similar symptoms are, however, also observed in pure chloroform narcosis.

Dr. Hans Kopf, of Marienbad, contributes a paper to a recent number of the *Internationale Klinische Rundschau* on the *Rudolfsquelle* of Marienbad. By the use of the "Rudolfsquelle," Dr. Kopf has obtained good results in the treatment of different diseases of the urinary apparatus during a period of ten years. The "Rudolfsquelle" water is colourless and quite clear, having a temperature of 10.25° C., equal to 8.2° R.; its taste is pungent, saline, and slightly astringent. A glassful of the water shows numerous air-bubbles. When exposed to the air, the water forms a yellow deposit. Its reaction is acid. According to Professor Lerch's analysis in 1866, "Rudolfsquelle" contained a considerable quantity of carbonate of lime, as well as large quantities of carbonate of magnesia; it also contained very considerable quantities of sparry iron ore. As to the physiological effect of the "Rudolfsquelle," it is the carbonic acid, carbonate of lime, and carbonate of magnesia, as well as sparry iron ore contained in it, which produce the therapeutic effect in certain diseases. The "Rudolfsquelle" water, when taken in a large quantity, especially increases diuresis, and causes a more copious elimination of urea. The effect of the carbonic acid chiefly manifests itself in an irritation of the nervous system. The functional activity of the stomach and the intestine is quickened, the circulation is favourably influenced, and particularly the secretion of urine augmented. Owing to its chemical composition, and according to the experiments of Dr. Kopf and his colleagues, the "Rudolfsquelle" has as much right to be considered a specific against the various diseases of the urinary apparatus as the springs of Wildungen. The use of the "Rudolfsquelle" is indicated in several affections—especially, in chronic catarrh of the bladder. During the past ten years a great number of Dr. Kopf's patients suffering from this disease have been perfectly cured after a four weeks' use of the "Rudolfsquelle" and a simultaneous use of the baths of the "Marienquelle" (27° C.) thrice a week. "Rudolfsquelle" is also used with good results in cases of gravel, neuroses of the bladder, cystospasmus and neuralgia cystourethralis, pyelitis, renal and vesical calculus.

Dr. S. Fischer, of Buda-Pesth, writing in the *Gyógyászat* on the influence of hyoscine, arrives at the following conclusions:—1. The "hyoscinum muriatum" may be successfully used as a sedative in greatly-excited or maniacal patients. 2. As the effect of hyoscine manifests itself even after a dose of half a milligramme, larger doses should be avoided, though the dose may be increased to one milligramme without any harm. 3. No bad after-effect is observed in such doses. 4. The drug also proves efficient as a hypnotic; but, owing to its depressing influence on the organism, it should only be used in those cases in which other drugs are ineffectual. 5. In five cases—namely, of chronic mania, chronic dementia, and acute insanity—the drug did no good. This was perhaps due to idiosyncrasy on the part of the patients.

At a recent meeting of the Obstetrico-Gynecological Society of Vienna Professor Edward Hofmann showed specimens of a number of cases of tubal pregnancy in which death had occurred through rupture. An analysis of these cases showed that: 1. Among the eight women, six were over 30 years of age; in one instance the age could not be determined; one of the patients was 22 years old. 2. As to one of these women, it could be stated with certainty that she had already been confined; in another this was doubtful. 3. In two cases the right Fallopian tube, and in six instances the left, was the seat of pregnancy. 4. In three cases the pregnancy was situated in the middle, and, in the rest of the cases, in the internal portion of the tube. 5. The passage of the ovum had taken place in only two cases; in one from the left to the right side, and in another from the right to the left side. 6. In half the number of the cases peritonitic adhesions of the Fallopian tube were detected. 7. In seven cases rupture occurred in the second, and only once in the third, month of pregnancy. 8. In one-half of the cases, several hours (from four to twelve) elapsed between the first symptoms of the disease and the death; in the rest of the cases, however, it was questionable whether death occurred suddenly, as there was no exact history of disease. It is thus obvious that in most of the cases, provided the diagnosis is made in proper time, there is sufficient time for surgical interference. 9. In two cases of fresh hemorrhage the fœtus was already found in a macerated condition; this, as

## UNIVERSITY INTELLIGENCE.

## CAMBRIDGE.

DR. W. H. GASKELL, F.R.S., University Lecturer in Advanced Physiology, has been elected a member of the General Board of Studies, in place of Dr. Vines, now Sherardian Professor of Botany in Oxford.

A MEDICAL FELLOW.—Mr. William Stanley Melsome, B.A. (First Class Natural Sciences Tripos, 1886-87), student of medicine, and Assistant Demonstrator of Anatomy, has been elected to a Fellowship at Queens' College.

CHEMICAL LABORATORY.—The new Chemical Laboratory is fully occupied for the first time this term; and the old laboratory is in process of transformation for the purposes of the pathological department, under Professor Roy.

THE MEDICAL COURSES.—All the courses in medicine and natural science have now commenced, and there appears to be a larger number than usual of students attending them. The number of freshmen who have commenced residence at the several colleges is somewhat smaller than last year; but there seems to be little or no diminution in the number of medical students. We hope to have the actual numbers next week.

## OBITUARY.

GEORGE HARRY BARFOOT, M.D.Lond., Birkenhead.

We regret to record the death, at the early age of 37, of Dr. G. H. Barfoot, of Birkenhead. Dr. Barfoot was a native of Leicester, and was the eldest son of Mr. William Barfoot, at one time Mayor of that town. He took the degree of M.B.Lond. and the Membership of the Royal College of Surgeons of England in 1872, and became M.D. of his University in 1874. On the completion of his studies he spent a year in China, chiefly for the benefit of his health. On his return home he was appointed a house-surgeon at University College Hospital, and afterwards held a similar appointment in the Leeds General Infirmary, and, on resigning the latter, acted as assistant to a general practitioner in Shrewsbury.

About ten years ago Dr. Barfoot settled in Birkenhead, and entered into partnership with Dr. Walker, of Hamilton Square, and maintained the connection until shortly before his death. He became one of the most respected and popular medical men in the borough, and was highly successful in practice. He was one of the acting medical officers of the Wirral Children's Hospital, and took a lively interest in the welfare of that institution.

Naturally of a somewhat delicate constitution, the exigencies of hard professional work seem to have enfeebled him, and some time ago he consulted Dr. Glynn, of Liverpool, who found him to be suffering from pernicious anæmia. Acting on Dr. Glynn's advice, Dr. Barfoot took a prolonged holiday of three months, but returned without having received any benefit from the rest. Recently he was seized with symptoms pointing to cerebral thrombosis, and he died on October 9th, at his residence, Devonshire Road, Claughton. He leaves a widow and one child.

ROBERT DAVIS, M.R.C.S.Eng.

THE death is announced, at the age of 64, of Mr. Davis, of Wreckenton, Gateshead. He was surgeon to the Gateshead Dispensary; medical officer to the Southern District of the Gateshead Union. He was at one time surgeon to the Gateshead volunteers, and was formerly Deputy Coroner for North Durham. During the cholera epidemic of 1849 he rendered valuable service, and was himself twice attacked by the malady.

GLASGOW TRADES HOUSE.—At a meeting of the Trades House of Glasgow held on October 11th the following representatives were elected: Governor of Anderson's College Medical School, Mr. Alexander Waddell; Managers of Royal Infirmary, Mr. Tullis and Mr. John Glen; Directors of Western Infirmary, Messrs. A. M. Bayne and Angus Mitchell; Director of the Victoria Infirmary, Mr. William C. Coghill; Managers of Lunatic Asylum, Messrs. David Kinghorn and Adam Turnbull; Directors of Asylum for Blind, Mr. Tullis and Mr. W. R. Hunter; Director of Maternity Hospital, Mr. J. G. Munro; Manager of Lock Hospital, Mr. George Ogilvie; Director of Convalescent Home, Mr. John Phillips; Director of Home for Relief of Incurables, Mr. Tullis.

## PUBLIC HEALTH

AND

## POOR LAW MEDICAL SERVICES.

## PREVALENCE OF FEVER IN FERMOY, CO. CORK.

DR. CLEMENTS, Local Government Board Inspector, has recently forwarded a report in reference to the sanitary condition of Fermoy Dispensary District, in which he states that the Fermoy Union Sanitary Authority do not appear to give the necessary attention to sanitary matters in that portion of the district which lies within the urban boundary. He observes that the nuisances existing at the rear of the premises in that part of the town where fever recently prevailed are still unabated, and adds that the connections with the main drains are bad, and the sewers obstructed in parts of the town. Fever, it seems, has prevailed almost continuously since June, principally of a typhus character, in others undefined. There have been about forty cases, with a mortality of five; and, although there have not been any fresh cases since September 24th, yet Dr. Dilworth, the medical officer, has shown febrile symptoms which possibly are of the same character. There are also twelve typhus cases at present under treatment in the workhouse hospital. The Local Government Board have forwarded Dr. Clements's report to the Fermoy guardians, and have requested that a special meeting of the sanitary authority may be at once convened to consider the matters referred to by their inspector.

## HEALTH OF GREENOCK.

DR. WALLACE, medical officer, reports that for the four weeks ending September 29th, the deaths amounted to 78, equal to an annual death-rate of 13.1 per 1,000, as against 20.1 for the same period last year. There were 11 deaths from zymotic diseases and 110 cases reported; of these, there were 2 of chicken-pox, 9 of typhus, 7 of enteric fever, 1 undefined, 40 of scarlet fever, 37 of measles, 9 of whooping-cough, 1 of diphtheria, 1 of croup, 6 of diarrhoea, and 1 of puerperal disease. The cases of typhus came from Port Glasgow. The cases of measles spread from an unnotified case in a family, the other members of which had been allowed to attend school.

## HEALTH OF GLASGOW.

THE Glasgow death-rate has increased from 19 per 1,000 three weeks ago to 22 last week, an increase due to scarlet fever throughout the city, which, however, is not nearly so prevalent as it was at the same season in the two previous years. The Chief Constable's report for September shows an increase of 260 in the number of persons apprehended during the month, as against the same period of the previous year, the increase being mainly made up of cases of drunkenness. It was indicated by the Lord Provost that this was one of the signs and accompaniments of improvement of trade (!)

## AN UNHEALTHY WATER SUPPLY.

THE town of Darvel, in Ayrshire, is supplied with water from fifteen wells. The water has recently been submitted to chemical examination, with the result that thirteen have been condemned. The water from one was described as the most polluted water the analyst had ever examined, being a mixture of 1 part of sewage and 2½ pure water. Four of the wells contained water varying between 1 of sewage to 7 of water and 1 to 8. The mixture in another was equal to 1 of sewage to 6 water, another 1 to 10½, another 1 to 13, another 1 to 17½. Three others gave results varying between 1 to 21 and 1 to 72. No wonder such a revelation has produced a commotion in the town.

HEALTH OF ENGLISH TOWNS.—In the twenty-eight large English towns, including London, which have an estimated population of 9,398,273 persons, 5,816 births and 3,777 deaths were registered during the week ending Saturday, October 13th. The annual rate of mortality, which had been 18.3 and 18.2 per 1,000 in the two preceding weeks, rose to 21.0 during the week under notice. The rates in the several towns ranged from 11.9 in Derby, 16.8 in Bristol, 17.2 in Birmingham, and 17.8 in Brighton to 27.3 in Preston, 28.0 in Bolton, 28.5 in Huddersfield, and 35.7 in Manchester. In the twenty-seven provincial towns, the mean death-rate was 22.9 per 1,000, and exceeded by as much as 4.2 the

head of debility from birth, these being 16, as compared with 8 in 1886. Dr. Harvey confesses that he is unable to account satisfactorily for the markedly increased mortality from bronchitis and pneumonia. He regards the increase of deaths under the head of debility from birth as a probable indication that the long-continued scarcity of work, with its attendant poverty, is telling more and more on the offspring of the poorer classes. After measles, diphtheria was the most fatal of the zymotic diseases. The cases were of a severe type, and the percentage of deaths consequently high. The general death-rate was 19 per 1,000.

## INDIA AND THE COLONIES.

### INDIA.

**CHOLERA AT MURREE.**—The outbreak of cholera this summer is a serious matter, which ought to engage the anxious attention of the sanitary authorities in India. Murree is supposed to be a sanitarium, yet cholera has prevailed there for three or four months, and the natives have been permitted to act with almost incredible recklessness; sources of water-supply have been contaminated by the washing of clothes, and the bodies of natives dead of cholera have been buried only a foot or two below the surface, so that the effluvia is described as horrible. The continued prevalence of cholera in the coast towns of India to so terrible an extent is a standing opprobrium to our rule and a serious hindrance to commerce. It may be hopeless to expect to see it extirpated, but it is possible to very materially reduce its present fearful frequency.

**THE MAHARANI OF BULRAMPUR** has sent the Commissioner of Lucknow a subscription of 2,500 rupees towards the building fund of the Women's Hospital to be erected in Lucknow opposite the Bulrampur Hospital in connection with the Lady Lyall Medical School.

**ABSTINENCE IN THE INDIAN ARMY.**—Medical officers who have had experience with the army in India have spoken much of the harm resulting from intemperance among the soldiers. A great improvement has occurred of late years with regard to drinking, and further progress will be made by the help of the soldiers themselves. The well-being and personal comfort of the men in India is a matter of personal interest to the Commander-in-Chief, who takes much interest in the institutes or coffee clubs of the men. The regimental canteen is disappearing before the regimental coffee shop, where the man can spend his spare time, and where he can find such amusements, comforts, and congenial companions as are at hand. The various Indian temperance societies have wisely amalgamated, and now admit to "full membership" upon the lines of total abstinence, with a three months' probationary period before admission. It has, however, been agreed to include a grade of "honorary membership"—of temperance, as distinguished from total abstinence; this is a great advance in practical wisdom, and now the Society includes Sir Frederick Roberts as one of its supporters and active members, and the Government have sanctioned the establishment of an institute for every British regiment, with its coffee shop. Thus temperance has received official recognition, and the institute is to be "regimental," and exist on equal terms and fair competition with the canteen. According to the report recently issued, last year there were held 1,146 courts-martial in Bengal, and "392 of them were distinctly traceable to drunkenness." In the Madras Presidency, 96 out of 370 courts-martial were traceable to the same cause. The percentage of cases wherein temperance men were court-martialed was insignificant. Official statistics also prove the comparatively great immunity of temperance men from sickness and disease.

## MEDICAL NEWS.

**EXAMINING BOARD IN ENGLAND, BY THE ROYAL COLLEGES OF PHYSICIANS AND SURGEONS.**—The following gentlemen passed the second examination in Anatomy and Physiology at a meeting of the Board of Examiners on October 11th, namely:—

G. L. Bell, student of Melbourne University; and F. S. Dfar, of Grant Medical College and Mr. Cooke's School of Anatomy and Physiology.

**Passed in Anatomy only.**

C. K. Crowther, of St. Bartholomew's Hospital; H. P. Job, of University College; R. James, S. A. Ord-Mackenzie, of University College and Mr.

Cooke's School; J. Wells, E. S. Sanderson, H. Corby and H. W. West, of London Hospital; T. H. English, P. Q. Ambrose, and L. Wainwright, of London and Mr. Cooke's School; H. G. Biddle, G. Siebel, and G. W. B. Featherstone, of Guy's Hospital; L. D. Heather, of King's College; R. R. Hatherell, S. F. Wright, and P. W. Campbell, of St. Thomas's Hospital.

**Passed in Physiology only.**

H. H. Brind and A. A. Fennings, of St. Mary's Hospital; E. K. Goodwin, L. J. Minter, and G. F. Read, of King's College; R. Henry and E. C. Walter, of St. Thomas's Hospital; E. Cornish, H. H. Greaves, E. W. Sharman, and W. E. Sturges-Jones, of Guy's Hospital; A. H. Beardmore, of Sheffield Medical School; F. T. Morris, of University College; H. Sisson, of London Hospital; E. D. Madge, of Middlesex Hospital; J. Abrines, J. B. Anderson, J. Cooper, W. F. Cotton, E. A. R. Covey, and F. E. Withers, of St. Bartholomew's Hospital; W. Wright, of St. Bartholomew's Hospital and Mr. Cooke's School.

**Passed in Physiology only on October 12th.**

G. Kendrick, of Queen's College, Birmingham; W. R. Ashworth, T. C. Hughes, of Westminster Hospital; C. B. Braithwaite, of Guy's Hospital; T. H. Adams and R. C. Middlemist, of London Hospital; F. Turner, of University College; H. B. Williams, of St. Thomas's Hospital; W. K. Brewer and P. A. Longhurst, of Charing Cross Hospital.

**SOCIETY OF APOTHECARIES OF LONDON.**—Examination in Arts Pass-list, September, 1888. The following have passed in all the subjects required for registration:

**First Class.**—T. Sandells, A. R. Milton. **Second Class.**—W. W. Ashfield, J. H. Bettington, J. J. Blagden, T. L. Braidwood, H. S. Desprez, F. J. Fennings, R. B. Gillard, A. F. Goldsmith, E. P. Hewitt, T. V. Hodgson, L. W. Light, V. Low, J. J. L. Macfarlane, A. Mercer, H. M. O'Byrne, G. Parnell, W. A. Pinniger, R. A. Pitter, G. S. Pownall, H. N. Robson, E. J. Rowbotham, O. W. St. Cedd, W. C. P. Smith, M. F. Staniland, F. Swindells, H. B. Thurston, H. Whicello, C. S. Wilkinson.

The following have passed in the subjects specified by the numbers and letters placed opposite their names:

1 The English language. 2 The Latin language. 3 Arithmetic and Algebra. 4 Geometry. 5 Elementary Mechanics. Optional subjects: a Greek, b French, c German, d Logic, e Botany, f Elementary Chemistry.

L. L. Allen, 2, 3, 4, 5; H. F. W. Armstrong, 2; G. L. Bates, 2, 5; G. M. Bennett, 5; G. S. Berryman, 2; E. H. Betts, 5; W. Bradshaw, 5; M. Breton, 3, 4, 5; E. Brown, 5, b; L. L. Burton, 3; J. Butterworth, 2, 4; C. L. Chevallier, 1, 3, 4, 5; G. A. Child, 5, f; W. H. Chute, 3, 4; H. E. Cock, 1, 2; W. S. H. Coghlan, 1, 3, 4, 5, b; A. D. Cowburn, 2; H. G. Danolds, 5; G. L. Davidson, 5; R. N. Davis, 5; M. W. Day, a; E. N. Dodd, 1, 2, 3, 4; J. P. Bales, 4; H. D. Eccles, 5; C. P. T. Edwards, 5; A. P. Eldred, 4, 5, f; O. T. Elliott, f; H. S. Elworthy, 3, 4; A. E. Farndon, 4, 5; S. A. Francisco, 5; E. G. Frederick, 1, 5; C. D. Garrett, 3, 4, 5; S. Gill, f; C. R. Girardot, 2, 5; S. H. Grossmith, b; J. M. K. Grover, 4, 5; W. Grummitt, 5; J. W. Haigh, 4, 5; J. G. Halford, 2, 3; W. R. Hanbury, 2, 3, 4, 5; F. G. Haywood, 2; P. F. Heury, 1; G. M. Hetherington, 5; T. G. S. Hodson, 5; A. H. Hollingsworth, 4; A. H. Hosford, b; J. F. H. Iles, 1, 2, 3, 4, 5; H. W. Johnson, 5; W. H. Johnson, 5, b; J. E. Jones, 3, 4; J. I. Jones, 5; E. W. Joscelyne, 5; E. T. Lanyon, 5, f; T. H. Lawrie, 5; A. T. Morgan, 5; M. C. Murdoch, 2, 3, 4, 5; H. W. Newton, 5; A. J. Ortlepp, 5; O. Parde, 1, 3, 4, 5; T. H. Parker, 4; C. O. Parsons, 5; H. M. Pentreath, 2, 3, 4, a; J. Plomley, 4; A. R. Rendle, 2, 3, 4, 5; F. T. Richards, 3; R. P. Ridsdale, 3, 4, 5, a; M. R. Roberts, 3, 4; F. C. Robinson, 5; W. S. Scott, b; G. M. Seagrove, 5; E. Shepherd, 1; R. Sim, 5, b; A. A. S. Sparling, 5; R. D. Stacy, 5; W. B. Stevenson, 3, 4, 5; E. R. Thomas, 3, b; A. J. Tindall, 3, 5; C. H. St. M. W. Toke, 5; A. E. Tonks, a; E. C. L. Towne, 5; A. C. Underwood, 3, 4, 5; R. J. S. Verity, 3, 4, 5; A. M. Waite, 5; H. Waring, 4; A. Wells, 4; E. White, 4, 5; W. A. D. Whiteman, 1, 3, 4, 5, b; H. W. Whitley, b; A. E. Worfolk, 3, 4; H. J. M. Wyllys, 4; W. Wyllys, 5, b.

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 September, 1888.

Foster, John Edward, Birmingham, Queen's College.

Alcock, Richard, Owens College, Manchester.

Slyman, William Betenson, St. Bartholomew's Hospital.

Beale, Peyton Todd Bowman, King's College.

Westwood, John, Birmingham, Queen's College.

Winn, Thomas Cromwell, The London Hospital.

Moles, Frederick Parker, Owens College, Manchester.

**The following passed in Surgery.**

J. D. Morton, St. Mary's Hospital; E. J. Neville, King's College.

**The following passed in Medicine, Forensic Medicine and Midwifery.**

H. H. Ellis, St. Thomas's Hospital; S. Fielder, Glasgow University and St. Thomas's Hospital.

**The following passed in Medicine and Forensic Medicine.**

W. Hurst, Owens College, Manchester.

**The following passed in Medicine and Midwifery.**

F. Hues, Birmingham, Queen's College.

### MEDICAL VACANCIES.

**The following Vacancies are announced:**

**BOOTLE BOROUGH HOSPITAL.**—House-Surgeon. Salary, £80 per annum with board and residence. Applications by October 31st to the Honorary Secretary.

**CHELSEA HOSPITAL FOR WOMEN.** Fulham Road, S.W.—Pathologist. Applications by October 30th to the Secretary.

**CHELTEMHAM GENERAL HOSPITAL.**—Assistant House-Surgeon. Salary, £40 per annum, with board and apartments. Applications by October 20th to Lieutenant-Colonel Croker-King, Honorary Secretary.

**DENTAL HOSPITAL OF LONDON AND SCHOOL OF DENTAL SURGERY,** Leicester Square.—Lecturer on Mechanical Dentistry. Applications by November 12th to the Dean.

**ENNIS DISTRICT LUNATIC ASYLUM.**—Visiting Physician. Salary, £100 per annum. Candidates, who must be doubly qualified, should forward their applications to the Board of Governors.

**GREAT NORTHERN CENTRAL HOSPITAL,** Holloway Road, N.—Physician to Out-Patients. Applications by October 27th to the Secretary.

**GREAT NORTHERN CENTRAL HOSPITAL,** Holloway Road, N.—Surgeon to Out-Patients. Applications by October 27th to the Secretary.

**KILBURN, MAIDA VALE, AND ST. JOHN'S WOOD GENERAL DISPENSARY.**—Honorary Medical Officer. Applications by October 20th to the Honorary Secretary, 13, Kilburn Park Road, N.W.

**NORTH-WEST LONDON HOSPITAL,** Kentish Town Road.—Senior Resident Medical Officer. Applications by October 22nd to the Secretary.

**OWENS COLLEGE,** Manchester.—Junior Demonstrator of Anatomy. Salary, £100 per annum. Applications by October 24th to the Registrar.

**PADDINGTON GREEN CHILDREN'S HOSPITAL.**—House-Surgeon. Salary, £50 per annum, with board and lodging. Applications by October 20th to the Secretary.

**RUBERY HILL ASYLUM.**—Assistant Medical Officer. Salary, £100 per annum, with apartments, board, etc. Applications to Dr. Lyle, Medical Superintendent.

**ST. MARYLEBONE GENERAL DISPENSARY.**—Resident Medical Officer. Salary, £105 per annum, with apartments, etc. Applications by October 20th to the Secretary.

**SEAMEN'S HOSPITAL SOCIETY,** Greenwich.—Resident House-Physician. Salary, £75 per annum, with board and lodging. Applications by October 22nd to P. Michelli, Esq., Secretary, Greenwich, S.E.

**SEAMEN'S HOSPITAL SOCIETY,** Well Street, London Docks.—Surgeon for the Dispensary. Salary, £63 per annum. Applications by October 22nd to P. Michelli, Esq., Secretary, Greenwich, S.E.

**SEAMEN'S HOSPITAL SOCIETY,** Well Street, London Docks.—Dispenser. Salary, £40 per annum. Applications by October 22nd to P. Michelli, Esq., Secretary, Greenwich, S.E.

**WILTS COUNTY ASYLUM,** Devizes.—Second Assistant Medical Officer. Salary, £100 per annum, with board and residence, etc. Applications by November 5th to the Medical Superintendent.

**WREXHAM INFIRMARY AND DISPENSARY.**—House-Surgeon. Salary, £100 per annum, with furnished rooms, etc. Applications by October 30th to J. O. Bury, Esq., Secretary, 9, Temple Row, Wrexham.

### MEDICAL APPOINTMENTS.

**ALLEN, W. E. L., M.B., C.M.Glas.,** appointed House-Surgeon to the North Lonsdale Hospital, Barrow-in-Furness.

**BOYD, A. J., B.A., M.D. T.C.D.,** appointed Medical Officer to the No. 3 District, Ware Union, *vice* H. May, M.D., resigned.

**BROMHEAD, F. H., L.R.C.P., M.R.C.S.,** appointed Junior Assistant Medical Officer to the Essex Lunatic Asylum, *vice* C. C. Smith, L.K.Q.C.P.I., deceased.

**BROOKS, J. Harley, M.B., C.M.Aberd.,** appointed Assistant Medical Officer to the Mile End Infirmary, School, and Workhouse, Bancroft Road.

**BUCHANAN, John, M.D., C.M.Glas., M.R.C.S.Eng.,** appointed Medical Officer, No. 2 District, Ladies Charity and Lying-in Hospital, Liverpool, *vice* Dr. Fisher, resigned.

**DRAKE, J. H., L.R.C.S.E., L.R.C.P.E.,** appointed Medical Officer to the Halberton District of the Tiverton Union, *vice* R. Bryden, M.R.C.S., resigned.

**DOWDALL, S. M.R.C.S., L.R.C.P.Lond.,** appointed Clinical Assistant to the Marylebone Infirmary, Notting Hill.

**GARDNER, J., M.R.C.S., L.S.A.,** appointed House-Surgeon and Secretary to the Stourbridge Dispensary, *vice* C. Daly, M.D., M.Ch., resigned.

**HARRIS, Thomas, M.D., M.R.C.P.Lond., M.R.C.S.Eng.,** appointed Honorary Assistant-Physician to the Manchester Royal Infirmary, Dispensary, and Lunatic Asylum, *vice* James Ross, M.D., F.R.C.P., promoted.

**HESEGOOD, S. P., M.R.C.S., L.R.C.P.Lond.,** appointed Junior House-Surgeon to the Royal Infirmary, Hull.

**KAY, Walter Smith, M.D.Edin., M.R.C.S.,** appointed Medical Superintendent to the South Yorkshire Asylum, Wadsley, near Sheffield, *vice* Samuel Mitchell, M.D., resigned.

**KEITH, Arthur, M.B.Aberd.,** appointed Assistant Medical Officer, Murray's Royal Asylum, *vice* George Findlay, M.B., resigned.

**KEMPE, Arthur, M.D.Brux., M.R.C.P.,** appointed Medical Officer of Health to the newly constituted Exeter Port Sanitary Authority.

**ROSS, J., M.D., F.R.C.P.,** appointed Honorary Physician to the Manchester Royal Infirmary.

**SAVERY, Frank, M.R.C.S.,** appointed House-Surgeon to the General Infirmary, Hull, *vice* E. Harrison, M.A., M.B., F.R.C.S., resigned.

**SOMERSET, B., M.R.C.S., L.R.C.P.Lond., L.S.A.,** appointed Assistant House-Surgeon to the Salop Infirmary, Shrewsbury.

**STANFORTH, J. W., M.R.C.S., L.R.C.P.,** appointed Junior Assistant House-Surgeon to the Sheffield Public Hospital and Dispensary, *vice* J. D. Wynne, M.B., B.Ch., M.R.C.S., promoted.

**TATHAM, Ernest J., M.B., B.C.Cantab., M.R.C.S.,** appointed House-Surgeon to the Cheltenham General Hospital, *vice* F. J. G. Mason, M.R.C.S., L.S.A., resigned.

**THOMSON, H. A. M.B., B.Sc., M.R.C.S.,** appointed Tutor in Clinical Surgery to the Edinburgh School of Medicine, *vice* J. W. B. Hodsdon, resigned.

**TREVELYAN, E. F., M.D.Lond., B.Sc., M.R.C.S.,** appointed Resident Medical Officer and Pathologist to the Leeds General Infirmary, *vice* C. W. Turner, resigned.

**EMPHYEMA IN INFANCY.**—Purulent pleurisy is an exceedingly serious disease in infancy, and comparatively few infants recover after incision and drainage. Special interest, therefore, attaches to a case reported by Mr. Otto Wien Smith, M.B.Edin., of Clare, South Australia, in the *Australasian Medical Gazette*, No. 79. The purulent collection occupied the right side of the chest, and there was dulness from apex to base, both behind and in front, with slight bulging of the intercostal spaces and displacement of the heart. The child was taken ill on July 31st, 1887, and on August 23rd, chloroform having been administered, Mr. Smith made an incision in the right axillary line, and excised a portion of the fifth rib, in order to admit a metallic tube a quarter of an inch in diameter; a large amount of thick, curdy pus was evacuated. No antiseptics were used. The case did remarkably well; the tube was removed on September 30th, and on October 16th the wound was quite healed; there was no distortion of the chest, and the respiratory murmur could be heard all over the right side.

**A BANQUET OF DEATH.**—The annual banquet given on June 26th last by the alumni of the Marietta (Ohio) College was attended with such fatal consequences that it was literally a banquet of death. Between seventy-five and a hundred students, graduates, post-graduates, and professors sat down to the festivities. Of these at least seven are dead, while some thirty others suffered more or less acutely. It is believed that either some ice-cream or some lemonade was in a poisonous state.

**SOCIETY OF APOTHECARIES OF LONDON.**—The results of the examination in Arts qualifying for registration as medical student, held in the Hall of the Society on September 7th and 8th, have just been published. There were 155 candidates, and from the pass-list it appears that 2 were placed in the first class, and 28 in the second class, and 91 were certified as having passed in some subjects, but not in all. The next examination will be held on December 7th and 8th.

**BURIAL REFORM.**—We understand that the proposed memorial of the Church of England Burial Reform to the Home Secretary is now assuming definite shape, and will be supported by the Archbishop of York and many leading sanitarians. Meetings have been held in Liverpool and York, and similar meetings are to be held in Birmingham, where a good deal of support is anticipated.

**PNEUMONIA AS A SEQUELA OF GERMAN MEASLES.**—Not only is röteln a mild disease in itself, but it is seldom followed by serious sequelæ, but Dr. W. H. Greenlee, of Waynesville, Ohio, has reported in the *Archives of Pediatrics* (vol. v, No. 58) an epidemic affecting about sixty persons, in which severe catarrhal pneumonia ensued in thirty cases after a period varying from five to sixteen days.

**MRS. CAROLINE E. HUDSON,** of Oxford, has forwarded £1,000 to the Guest Hospital, Dudley—a gift in memory of her father, the late Mr. Thomas Mills, of the Shrubbery, Kingswinford.

**PRESENTATION.**—Mr. Spencer Hurlbutt was presented on October 6th with a handsome marble timepiece by the officers and nurses of the Fulham Infirmary on the occasion of his resigning the post of Assistant Medical Superintendent to that institution.

**PRESENTATION.**—Miss Katherine Peter, the Lady Superintendent of the Jenny Lind Infirmary, Norwich, has been presented with an elegant clock on the occasion of her relinquishing her connection with that institution.

**LORD DYSART,** who offered £200 per annum to the Grantham Hospital, on condition of a homeopathic physician being appointed to the staff, and whose offer was declined, has withdrawn his subscription of £25 annually.

**CREMATION IN FRANCE.**—The French bishops have, it is stated, received a communication from the Congregation of the Holy Office strongly disapproving of cremation and ordering the clergy not to abandon the customary Christian burial. All the Protestant Consistories of France are said to agree with the Holy See in its condemnation of the practice of cremation.

**STRAY DOGS.**—One thousand and twenty-one stray dogs were seized by the police last month in the metropolis, and taken to the Dogs' Home at Battersea. Twenty-four were killed in the streets as "mad or ferocious." During the month 103 persons were bitten by dogs not suspected of being mad, and one individual by a dog certified to be rabid.

## DIARY FOR NEXT WEEK.

## MONDAY.

MEDICAL SOCIETY OF LONDON, 8.30 P.M.—Dr. Fletcher Beach: On a Case of Recovery after Laceration of Brain. Mr. Marmaduke Sheild: On the Removal of an Aural Exostosis by the Chisel, after Incision of the Cartilaginous Meatus. Dr. Howard: On a New Method of Raising the Epiglottitis.

## TUESDAY.

ROYAL MEDICAL AND CHIRURGICAL SOCIETY, 8.30 P.M.—Mr. W. A. Meredith: Remarks on some Points affecting the Mortality of Abdominal Section; with Tables of Cases. Mr. E. Owen: Arthrectomy; Erosion of Joints.

## WEDNESDAY.

BRITISH GYNÆCOLOGICAL SOCIETY, 8.30 P.M.—Specimens and notes of cases by Dr. F. A. Purcell, Dr. Fancourt Barnes, Mr. Reeves, Mr. Lawson Tait, Dr. Richard Smith, and Dr. Granville Bantock. Council, 8 P.M.

HUNTERIAN SOCIETY, 8 P.M. Dr. Stowers: Notes on the Treatment of Diseases of the Skin.

## FRIDAY.

BROWNING SOCIETY, 8 P.M.—Opening of Session. Mr. E. Berdoe: Paracelsus, the Luther of Medicine.

CLINICAL SOCIETY OF LONDON.—1. Dr. H. Handford: Case of Empyema; Loss of Vision, Cerebral Softening. 2. Dr. Beaufoy Green: Case of Dermoid Cyst of Tongue. 3. Mr. Hutchinson: Second report on Persistent "Aptyalism," or Dry Mouth, with an additional Case. 4. Mr. E. H. Fenwick: Case of Encysted Stone.

## BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 8s. 6d., which should be forwarded in stamps with the announcement.

## MARRIAGES.

TIMS—FINDLAY.—On October 3rd, at the Cathedral Church of St. Mary, Edinburgh (service fully choral), by the Very Rev. the Dean of Edinburgh, assisted by the Rev. H. C. Percival, Senior Chaplain, H. W. Marett Tims, M.B. Edin., to Maud, daughter of the late Lieutenant-Colonel Alexander Findlay (3rd W. I. Regiment), of Millbank, Nairnshire, and J.P. for the county.

SYMPSON—KNIGHT.—On the 10th instant, at St. Paul's Church, Camden Square, by the Rev. F. Wallis, M.A., Fellow and Dean of Caius College, Cambridge, assisted by the Rev. R. H. Leamon, Edward Mansel Sympton, M.A., M.B. Cantab., M.R.C.S., James Street, Lincoln, son of Thomas Sympton, F.R.C.S., to Florence Mabel, younger daughter of Joseph Knight, Barrister-at-Law, of 27, Camden Square, N.W.

## DEATH.

HOSKINS.—On October 12th, at York Place, Candie Road, Guernsey, Samuel Elliott Hoskins, M.D., F.R.S., aged 89 years and 8 months. It is requested that no flowers be sent.

## 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); 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 Orthopaedic.—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; 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., 8.30; 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; Bar 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. 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; Orthopaedic, 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., 8.30; Consultations, M., 2.30; Operations, Tu., 1.30; Ophthalmic Operations, F., 9.  
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, 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.

## QUERIES.

## TREATMENT OF OBESITY.

W. P. F. writes: A recent issue of the JOURNAL contains an interesting letter from Dr. Towers Smith, but to be of real value it requires supplement. Will he inform us what he took with the beefsteak; was it accompanied with bread, or did he live on steak, and steak alone? Further, how would either of such diets, that is, beef alone or beef and bread, affect the dyspeptic?

## LECTURES TO NURSES.

C. H. S. has been asked, as house-surgeon at a country hospital where there is a training school for nurses, to lecture to the probationers. He asks for advice as to what such a course should best contain, and would be glad to know: 1. Where he could obtain the syllabus of such a course. 2. What would be the best book, if any, to prepare the lectures from.

## ECZEMA RUBRUM.

AN OLD PHYSICIAN writes: I am a hard worked physician, in my 67th year. I never have a holiday, and cannot get one, as I have to earn my daily bread, and not only for myself but for others also. Within the past two years I have had three most severe attacks; the present one, under which I am labouring, being the most severe. I am a most temperate living man, an early riser; know of no cause for the attacks, except a mental shock that I received two years ago from a most unjust lawsuit that was decided against me. I am taking full doses of Fowler's solution, with wine of colchicum in Murray's magnesia, using the Deala oil with oil of sweet almonds upon the ulcers and bandaging the legs. I am using a mixed dietary of meat and vegetables; and only drink whisky and water by the advice of several leading physicians. I am particularly anxious to know if there is any hope of escaping these attacks in the future; if there is any prophylactic treatment that I could adopt; if stimulants are injurious; if any particular code of dietary that I could adopt; if baths would be admissible. The disease in my case appears in all forms, the throat and neck discharging; the extremities ulcerated like pemphigus; other part dry, like psoriasis; the itching intolerable; no sleep except by chloral and hyoscyamine; bowels fairly regular, unless when I drink milk, which constipates me always; renal secretions normal. Any hint will be most kindly and gratefully received.

**Section II.—3.** Strong sulphuric acid is heated with the following bodies: copper, nitrate of sodium, oxalic acid, chloride of sodium, charcoal. Explain and give the formulae for the changes, if any, which occur. 4. How would you prepare the carbonate and oxide of magnesium from the sulphate? Describe the properties of these bodies, and state in what respects they differ from the corresponding calcium compounds. 5. How is pure iodide of potassium prepared? What are its properties? Calculate the weight of iodine contained in ten pounds of this salt. ( $K=39$ ;  $I=127$ .)

**Section III.—6.** Give the formula of urea and the percentage amount of nitrogen which it contains. What takes place when an alkaline solution of hypobromite of sodium is added to a solution of urea, and how may the method be employed in estimating the amount of urea in the urine? 7. In what respects do the vegetable alkaloids bear a resemblance to ammonia? How can quinine be extracted from cinchona-bark, and morphine from opium? 8. How can you obtain (a) ethylene (olefiant gas) and (b) ether by the action of sulphuric acid on alcohol? Give the formula and properties of each of these bodies.

**PART II.—Materia Medica and Pharmacy.**—1. What is an anæsthetic? Distinguish between local and general anæsthetics, and give examples of each. By what methods and in what forms are these agents employed? 2. Describe the physical properties of permanganate of potassium. State the strength of its official solution, and give an account of its actions. 3. Enumerate and classify the purgatives with which you are acquainted, and state in what form and dose you would administer calomel, sulphur, colocynth, senna, and jalap. 4. In what forms and in what doses is sulphate of iron employed medicinally? Describe its action when administered internally. 5. What is an emulsion, and how does it differ from a solution? Give examples of drugs which may be administered in the form of an emulsion, with the method of preparation required in each case. 6. Give an account of the origin of opium, and enumerate its more important active principles. Give the composition and strength of the official compound powders containing opium.

(First Examination.)

**PART III.—Elementary Physiology.**—1. *Vidæ voce* on microscopical sections. 2. What do you understand by the terms (1) crassamentum, (2) buffy coat, (3) liquor sanguinis, (4) serum of blood? 3. Describe the mechanism of quiet and forced inspiration. 4. Contrast the phenomena of contraction in voluntary and involuntary muscle-fibres. 5. Mention the chief constituents of bread, and describe how each of them is acted upon by the various digestive juices. 6. Explain the effects of stimulating (a) a motor nerve, (b) a sensory nerve, (c) a nerve of special sense.

(Second Examination.)

**Physiology.**—1. What is understood by the expression "blood pressure?" Explain the conditions which lead to variations in the normal blood pressure in arteries and veins. 2. Describe the changes which the proteid constituents of food undergo in the various parts of the alimentary canal. 3. How do the lymphatics commence? Where is the lymph derived? Mention the circumstances which influence its flow. 4. Describe a lobule of the liver, and an individual liver cell. 5. Describe the functions of the vagus as a cardiac nerve. 6. State the evidence in favour of the localisation of motor centres in the cerebral cortex. Where are the centres connected with the movements of the right arm supposed to be situated?

(Second Examination.)

**Anatomy.**—1. Describe the upper end of the femur (head, neck, and trochanters), giving muscular and ligamentous attachments. 2. Give the nerve supply and actions of the following muscles: (a) buccinator, (b) teres major, (c) first dorsal interosseous of hand; (d) tensor fasciæ femoris, (e) adductor longus, (f) gastrocnemius. 3. Describe the fornix. 4. Give the course and relations of the brachial artery, and enumerate its branches. 5. Describe the position and relations of the right kidney. 6. Give the relations of the internal and external popliteal nerves, and enumerate their branches.

**Surgical Anatomy and the Principles and Practice of Surgery.**—1. Mention the situation of the various groups of lymphatic glands found in the pelvis and lower extremity; and state the sources from which they receive lymphatic vessels. 2. Mention the relative positions of the several structures in immediate relation with the shoulder-joint; and describe the operation of excision of the head of the humerus. 3. Describe the symptoms and the structural changes of carbuncle in the different stages of the disease. Give the treatment, local and general, which you would adopt. 4. Describe the after-treatment of a case of tracheotomy. Mention the complications which may arise, and how you would meet them. 5. Describe the constitutional and local effects which may follow severe burns, and give their appropriate treatment. 6. What fluid swellings may present themselves in the popliteal space? Give their differential diagnosis and state briefly the treatment appropriate to each.

ROYAL COLLEGE OF PHYSICIANS OF LONDON. EXAMINATION FOR THE LICENCE.

(Third Part or Final.)

THE following were the questions at the examinations in October, 1888:

**Principles and Practice of Surgery.**—1. What kind of cancer is usually found affecting the rectum? What symptoms may be produced by it? How should the disease be treated? 2. Describe a case of glaucoma, giving the pathology, the symptoms, and the treatment. 3. Give the symptoms by which you would distinguish the following tumours of the breast:—(a) Simple cyst; (b) adenoma; (c) serocystic sarcoma; (d) scirrhous cancer. How would you treat these tumours? 4. Describe in detail the treatment which it may be necessary to adopt in case of pyæmia. 5. Describe a case of Colles's fracture. Give in detail the treatment which may be required. 6. How would you treat the following cases?—(a) Punctured wound of the femoral artery; (b) punctured wound of the femoral vein; (c) punctured wound of both artery and vein.

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The Illustrated Optical Manual. By Surgeon-General Sir T. Longmore, C.B., F.R.C.S. Fourth Edition. London: Longmans, Green, and Co.  
Chats at St. Ampelio. By John A. Goodchild. London: Kegan Paul, Trench, and Co.

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