

ment of infectious diseases, especially scarlet fever, and am exceedingly surprised that only one medical man out of 13,000 that are supposed to read the JOURNAL wrote to me on the subject.

The "General Practitioner" in your JOURNAL of November 30th says he had "his patients rubbed with thymolised vaseline, but had given it up of late years." Vaseline, lard, lanolin, or fixed oils are all inadmissible as vehicles for the disinfectant; they interfere with transpiration, are a great discomfort to the patient, and the lard and oil soon become rancid. That which I have used is entirely volatile, being composed of essential oils, thymol, etc. It imparts a warm and pleasant feeling to the skin, and by its evaporation it keeps the patient in an atmosphere of disinfectant so strong as to destroy all infection proceeding from his skin or mucous membranes. All disinfectants in solution in water, and those that are not volatile, are alike useless for inunction.

SOUTH KENSINGTON writes: I endorse what all your correspondents said last week. In treating scarlet fever, I always insist on having a highly skilled nurse, so that, except when there are complications, I rarely visit the patient after the first few days more than once a week. I always have the patients oiled in the day and washed clean in the evening, and I keep them in bed, however well they are, from four to five weeks. I am certain that I have never conveyed the disease myself, and I attend as little midwifery as possible if I have a case on hand.

A COUNTRY PRACTITIONER writes: *Apropos* of the conveyance of scarlet fever by medical men, discussed in your last number, I would like to say that, though I am not in the habit of taking any very elaborate precautions myself, I can conscientiously say that there is no evidence that I have ever been the medium of conveying the infection in any instance. I do not think that in private practice I have ever had more than one scarlet fever case on hand at the same time, save once when three members of one family all fell ill within a few days of each other after exposure to a known and common source of infection. I make such cases the last on my mind; if compelled to alter this rule, the visit is treated as the last of a round. I do not see the patients oftener or for a longer time than is absolutely necessary, and during the visit always wear a smooth-surfaced overcoat; at the end of the visit hands and instruments, such as stethoscope, thermometer, etc., are washed with soap and some disinfectant, and, if not driving in an open carriage, I have a short walk on quitting the house. I avoid seeing young persons and children after such a visit. My scarlet fever patients are "oiled." After seeing such cases I do no surgical or gynaecological work until after a complete change of clothing, including boots, and a thorough disinfectant cleansing of face, neck, hands, and arms. I have never had a case of puerperal fever nor, in private practice, one of erysipelas after operation, not much to boast of in my kind of practice perhaps, but a tribute to efficient cleanliness as far as it goes.

THE GILBERT CLUB.

At the inaugural meeting of the Gilbert Club the chair was taken by Sir WILLIAM THOMSON, F.R.S., President of the Institution of Electrical Engineers, and amongst those present were: Sir Frederick J. Bramwell, F.R.S.; Dr. B. W. Richardson, F.R.S.; Professor D. E. Hughes, F.R.S.; Professor John Perry, F.R.S.; Professor George Forbes, F.R.S.; Mr. Latimer Clark, F.R.S.; Mr. G. J. Symons, F.R.S.; Dr. Atkinson, F.R.S.; Mr. H. Trueman Wood; Dr. Laver; Mr. J. Lane; Professor Silvanus P. Thompson, D.Sc., Honorary Secretary; and Mr. Conrad W. Cooke, Honorary Secretary.

Professor SILVANUS THOMPSON explained that what the club proposed to do was to commemorate the tercentenary of William Gilbert and his work and to do honour to him by reproducing in English the great work which began the science of electricity, and concluded by passing a resolution formally inaugurating the club.

Dr. B. W. RICHARDSON, in seconding the resolution, and speaking as an old student of Gilbert and the author of a memoir of him, said he did not know that English science could do better than recognise that distinguished man, the contemporary of Harvey, of Shakespeare, and of Bacon. Gilbert was physician to Queen Elizabeth, and so bewitched her by his kindness and solicitude that he was the only person living to whom she left a legacy. His style of writing betrayed the philosopher in every page. His glory was that he went entirely upon experimental

research, in which he really preceded Bacon. We had no more illustrious man in all our history of science than William Gilbert.

It was resolved: "That all proposals for membership be referred for the present to the council, hereafter to be chosen, for selection, up to the number of 200 in all."

Sir William Thomson was unanimously elected President of the club, and the following Vice-Presidents were elected: Mr. Jonathan Hutchinson, President of the Royal College of Surgeons; Dr. Benjamin Ward Richardson; Lord Rayleigh; Dr. Henry Laver, of Colchester; Professor Reinold, President of the Physical Society; and Professor Hughes. The following gentlemen were elected to serve on the Committee: Mr. Lant Carpenter, Professor Ferguson, Sir Philip Magnus, Professor Rücker, Professor Foster, and Professor Forbes. Mr. Latimer Clark was elected Treasurer, and Mr. Conrad W. Cooke, Mr. Raphael Meldola, and Professor Silvanus P. Thompson, Honorary Secretaries.

ASSOCIATION INTELLIGENCE.

LIBRARY OF THE BRITISH MEDICAL ASSOCIATION.

MEMBERS are reminded that the Library and Writing Rooms of the Association are now fitted up for the accommodation of the Members, in commodious apartments, at the offices of the Association, 429, Strand. The rooms are open from 10 A.M. to 5 P.M. Members can have their letters addressed to them at the office.

NOTICE OF QUARTERLY MEETINGS FOR 1890. ELECTION OF MEMBERS.

MEETINGS of the Council will be held on January 15th, April 16th, July 16th, and October 15th, 1890. Candidates for election by the Council of the Association must send in their forms of application to the General Secretary not later than twenty-one days before each meeting, namely, December 25th, March 27th, June 25th, and September 4th, 1890.

Any qualified medical practitioner, not disqualified by any 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*.

NOTICES OF BRANCH MEETINGS intended for insertion in the JOURNAL of the current week should be forwarded, addressed to the Editor, so as to reach the office not later than mid-day Wednesday of that week.

BRANCH MEETINGS TO BE HELD.

WEST SOMERSET BRANCH.—A clinical meeting will be held at the Taunton and Somerset Hospital on Thursday, December 12th, at 3 P.M. for cases and papers, and a special meeting will be held at the Coffee Hotel, Fore Street, Taunton, on the same day at 5 P.M., to consider Dr. Rentoul's proposals.—W. M. KELLY, M.D., Honorary Secretary.

LANCASHIRE AND CHESHIRE BRANCH.—A special general meeting, to consider Dr. Rentoul's and Dr. Brindley James's proposition and to discuss the whole subject, will be held at the Medical Institution, Hope Street, Liverpool, on Wednesday, December 11th, at 4 P.M.—CHARLES E. GLASCOTT, M.D., General Secretary, 23, St. John Street, Manchester.

METROPOLITAN COUNTIES BRANCH.—A general meeting of this Branch will be held on Thursday, December 12th, at 5 P.M. at the School of Mines.—MR. NOBLE SMITH, Secretary, 24, Queen Anne Street, W.

METROPOLITAN COUNTIES BRANCH: EAST LONDON AND SOUTH ESSEX DISTRICT.—The next meeting will be held, by the kind invitation of the Medical Superintendent, at the Mile End Infirmary, Bancroft Road, on Thursday, December 19th, at 8.30 P.M. The evening will be devoted to a demonstration by Dr. Robinson, of several interesting cases at present in the infirmary.—J. W. HUNT, Honorary Secretary, 101, Queen's Road, Dalston.

METROPOLITAN COUNTIES BRANCH: WESTERN DISTRICT.—A meeting of the above District will be held in the Library of St. Mary's Hospital, Paddington, on Saturday, December 21st, at 8.30 P.M. The chair will be taken by the President of the Branch, W. B. Cheadle, M.D.Cantab., F.R.C.P.Lond., Physician to and Lecturer on Medicine at the Hospital, will give an address in Medicine, with clinical demonstrations on interesting cases. A. Quarry Silcock, M.D., B.S.Lond., Surgeon to the Hospital, will give a brief address in Surgery, illustrated by clinical demonstrations. Mr. Silcock will show cases of Acromegaly, Hyperostosis of Cranial Bones, Traumatic Meningocele, Frontal Exostosis, and others of surgical interest. He will also demonstrate specimens from a fatal case of Parasitism by Psorospermia in man. Mr. Crabb will show pathological specimens.

BORDER COUNTIES BRANCH.—The next meeting of this Branch will be held at the County Hotel, Carlisle, on Friday, December 20th, at 6 P.M. Supper at 9 P.M. Members desirous of reading papers kindly communicate with JAMES ALTHAM, Honorary Secretary, Penrith.

METROPOLITAN COUNTIES BRANCH: EAST LONDON AND SOUTH ESSEX DISTRICT.

ONE of the most successful meetings ever held in this district took place at Brooke House, Upper Clapton (by the kind invitation of Dr. Adams) on November 21st. Nearly forty members were present.

Skin Diseases.—After the usual formal business Dr. STEPHEN MACKENZIE gave a demonstration of about sixteen most interesting cases showing various forms of skin diseases. His cases and remarks were followed with the greatest interest by the large number of members present, and at the conclusion a very hearty vote of thanks was proposed and warmly endorsed by all present.

SHROPSHIRE AND MID-WALES BRANCH.

A SPECIAL general meeting of this Branch was held at the Salop Infirmary on Tuesday, November 19th. Fourteen members of the Branch were present, the PRESIDENT (Mr. H. G. Rope) in the chair. Mr. ROPE, in the course of a few introductory remarks, stated the reason for the calling of the meeting, and read the notice from the General Secretary.—Letters from Dr. Packer and Mr. Macartney, and a telegram from Mr. E. E. King, expressing regret for their absence, were read.—The following gentlemen were proposed by Mr. J. A. BRATTON and seconded by Mr. ROPE, as members of the Branch, and unanimously elected:—Dr. J. Lytle, Shrewsbury; Messrs. E. B. Ormerod (Craven Arms), H. R. O. Sankey (Boreatton Park, Baschurch), E. E. King (Ludlow), G. Walker (Shrewsbury), and Dr. H. Barnett (Church Stretton).—Some letters received by the Honorary Secretary from Dr. Rentoul were next read.

Public Medical Service.—The discussion on this subject was introduced by Mr. CURETON. A report of it will be found at page 1309.

A vote of thanks to Mr. Rope, the President, was proposed by Mr. CURETON and seconded by Mr. BRATTON, and unanimously carried.—Mr. ROPE having briefly expressed his thanks, the meeting was dissolved.

SPECIAL CORRESPONDENCE.

PARIS.

Salol in Gonorrhœa.—Grafting Eyelids.—Rectal Prolapsus.—Cancer of the Stomach.—Icterus with Rupture of the Gall-bladder.—General News.

DR. DREYFOUS has treated seven cases of gonorrhœa with salol. The doses varied from 5, 7, to 8 grammes. The discharge was less abundant. In a recent case, in which gonorrhœa appeared some time before seeking advice, Dr. Dreyfous obtained a complete cure in a few days. M. Dreyfous has tested the effect of salol administered alone, and in other instances he has given it simultaneously with copaiba and cubebs in order to hasten the cure. He recommends the use of salol to surgeons who operate on the urinary organs; it renders urine aseptic, which is thus innocuous when in contact with raw surfaces. Aseptic and antiseptic conditions result from giving salol internally.

Dr. Tripier, of Lyons, sends to the Academy of Sciences a short paper on A Surgical Method of Restoring the Eyelids. When it is a question of the lower eyelid he dissects a tongue of skin from the suborbital region, taking care neither to dissect muscles nor nerves. The strip of skin thus free he places on the raw surface of the lower eyelid, which becomes grafted on it, and constitutes an eye-

lid. To form the upper eyelid a strip of skin is dissected in the supraorbital region and fixed in the space which the eyelid should occupy. The photographs shown at the meeting indicated that the patients thus operated on could open and shut their eyes. The disfigurement resulting from absence of eyelids is considerably modified.

At the Paris Surgical Society M. Nélaton read notes on two cases of rectal prolapsus. Both patients were mothers of a large family; the prolapsed portion measured 11 centimètres in each case. One of the patients had been operated on by M. Périer, and on the twentieth day after the operation left the hospital apparently cured. A month later on, M. Nélaton saw her in a dangerous state. Whilst making an effort she ruptured the perineum, from which protruded 25 centimètres of the large intestine. These M. Nélaton excised, and sutured the end to the neighbouring skin, and obtained a normal anus. The patient was completely cured. The other patient had been treated in every way but surgically. In this case there was no rupture of the perineum; the protruding intestinal portion was removed; in the preceding case 11 c.m. protruded and 25 were excised. Both patients recovered, but in the former case the cure remained stable, whereas in the latter prolapsus occurred six months after the patient had been operated on. M. Nélaton concludes from these two cases that the enormous weight of the intestines, which is unsupported, is probably the cause of rectal prolapsus, not the non-resistance of the perineum. He suggests excising as much of the large intestines as can be drawn down.

A short time since, M. Debove had in his wards a young man, aged 18, attacked with cancer of the stomach. His health had always been good, when suddenly he was subject to copious hæmatemesis. He was treated at the Hôtel Dieu Hospital, for ulcer of the stomach, and was put on milk diet. He left the hospital in apparently good health. Two months subsequently hæmatemesis again occurred, and was treated by M. Debove, who was unable to control it. It became more and more frequent; the patient became anæmic and cachectic, ascites appeared, and the patient died in a state of syncope. At the necropsy a superficial cancerous growth was observed extending over a surface about as large as the palm of the hand; the surface of the cancer was ulcerated.

At a meeting of the Paris Medical Hospital Society, M. Hayem read notes of a case of icterus with rupture of the gall-bladder, in a child 1 month old, which was hæmatophilic. The necropsy showed that there was rupture of the gall-bladder, without obstruction of the common bile duct: bile was diffused in the peritoneum, but there was neither suppurating peritonitis nor absorption of the bile by the lymphatics. M. Hayem observed that this case was interesting inasmuch as it indicated that hæmorrhage in icterus resulted from the direct action of bile. M. Féréol drew attention to the absence of acute peritonitis, proving that the incursion of bile into the peritoneum does not always produce it.

M. Dastre has made a series of experiments concerning chloroform. He states that methylic chloride, a mixture of chloroform and methylic alcohol, such as is prepared in England, contains 70 parts of chloroform to 30 of methylic alcohol, and that of M. Regnaud, 80 of chloroform and 20 of alcohol. When this mixture is used and the necessary precautions observed which determine the quantity administered, the exact quantity inhaled by the patient is known; the tension of the gas which reaches the lung is inferior to that of chloroform used as a sole agent, which, he adds, is the secret of the success obtained by Sir Spencer Wells and M. Le Fort.

M. Ollivier, in his report on epidemics read before the Academy of Medicine, recommended mercuric chloride, in the form of Van Swieten's solution, for treating cholera.

M. Constantin Paul, in a report on mineral water stations, commented on the danger incurred in the inhalation rooms, in consequence of the accumulation of carbonic acid in the atmosphere; also from the sputa deposited and not removed quickly enough.

The pseudo-syphilitic epidemic which broke out at the end of July at Motte-aux-Bois, consequent on vaccinating the children of that village, has completely disappeared. M. Hervieux made a careful inspection on the 17th of November, and a few days ago stated, before the Academy of Medicine, that all the patients were cured and in thoroughly good health, therefore the transmission of syphilitic virus, by means of the vaccine used, does not seem probable, as in that case secondary symptoms would be manifested. The vaccine punctures have all left healthy cicatrices. The child which furnished the vaccine was cured without presenting any

Europe in 1887 she spent four months of her furlough in medical study in Vienna.

In 1888 she was appointed to start a hospital for women in Kashmir. Her death took place at the age of 39, after a year and a half of active earnest work in her new sphere. Already she had gained the confidence medically of large numbers of the women of Srinagar, and had inaugurated an important and promising work. She will be missed by many who were attached to her on account of her high ability and professional enthusiasm, tempered by humility and deep piety.

UNIVERSITY INTELLIGENCE.

CAMBRIDGE.

DEGREES CONFERRED.—At the congregation on Thursday, November 21st, the following degrees were conferred:—*M.B.*: Frank Hodson Bromhead, B.A., Jesus College (*Thesis*: Tonsillitis and Pharyngitis and their connection with the Rheumatic State); Basil de Beauvoir Carey, B.A., Emmanuel College (*Thesis*: On Pleurisy).

ADDITIONAL EXAMINERS.—In consequence of the large number of candidates for the third *M.B.* and *B.C.* examinations in December, Dr. C. H. Ralfe, of Gonville and Caius College, has been appointed an additional examiner in Medicine, and Mr. H. W. Page, M.C., of Christ's College, an additional examiner in Surgery.

BOARDS AND SYNDICATES.—Francis Darwin, M.B., Fellow of Christ's College, is appointed a Syndic of the Botanic Garden; Professor Latham and Dr. D. MacAlister, State Medicine Syndics; and Dr. D. MacAlister a member of the Medical Board.

LONDON.

THE result of the examination for honours in Forensic Medicine at the M.B. examination is as follows:—

First Class.—H. M. Bowman, St. Bartholomew's Hospital (Scholarship and Gold Medal); J. E. Platt, Owens College (Gold Medal); J. J. Macgregor, St. Bartholomew's Hospital; R. Pickard, St. Bartholomew's Hospital; H. J. Campbell, Guy's Hospital.
Second Class.—R. O. Bowman, Owens College; Mary A. McL. Knight, London School of Medicine for Women; W. H. Brazil, Owens College.
Third Class.—E. H. Snell, Queen's College, Birmingham; E. P. Paton, St. Bartholomew's Hospital; J. P. Williams, Owens College; C. F. Seville, Owens College; R. D. Mothersole, Guy's Hospital.

PUBLIC HEALTH

AND

POOR-LAW MEDICAL SERVICES.

A CLERICAL VACCINATOR.

A CURIOUS adventure was noted last week at the Leighton Board of Guardians when the vaccination officer laid before the meeting a certificate of the vaccination of a child received from Mr. T. Duck, of Eaton Bray. The document was signed by Mr. Duck, who, in an accompanying letter, stated that he had no objection to vaccination, but was fully conscious of the dangers usually incurred, and therefore had procured his own lymph; that the Rev. J. H. Doe, vicar of the parish, had vaccinated the child, and he presumed that he had, on presenting his child at the public vaccinator's station in his parish, complied with the law. Dr. Sandell said that if the child had been brought to the station he had not seen or examined it. If the Board wished it he would see the child, and if the operation had been successfully performed, he would certify accordingly. The Board advised that this course should be taken.

SANITARY PLUMBING.

A DRAFT scheme has been prepared by the Parliamentary agents of the Plumbers' Company, providing by legislative enactment for the creation of a "General Council of Education and Registration," with branch councils for England, Wales, Scotland, and Ireland, the general council being composed of, in addition to representatives of the company, representatives of the plumbers of the various metropolitan and provincial centres (elected on the principle of a wide trade vote), and representatives of the Royal Institute of British Architects, the Surveyors' Institution, the Institution of Civil Engineers, the Society of Medical Officers of Health,

and other sanitary bodies; representatives of the Durham College of Science, the Robert Gordon College, the Nottingham University, the Yorkshire College, the Manchester Technical School, and other bodies concerned in the advancement of technical education. In order to give full effect to the registration system and duly protect the public, it is proposed that deputed powers should also be given to the local councils, under proper safeguards.

WHICH UNION?

MR. JOSEPH TUCKER asks if, on the order of a relieving officer, he attends a pauper residing in his district, but belonging to and receiving relief from another union, he is not entitled to charge the guardians of one of the unions, and, if so, which board is he to sue for such medical attendance?

*** This entirely depends on the terms of the engagement, of which nothing is said. He has probably undertaken to give medical attendance to "all paupers resident in the district;" in such case, any belonging to another union would be entitled to his services on the usual order being given for him to attend.

DATE OF RESIGNATION.

FREEMASON asks whether it is not a fact that the resignation of a Poor-law medical officer does not take place till a month after its date, and if he were to resign his appointment on a certain day, would he not have to perform the duties of the office by himself or deputy for a month afterwards?

*** Our correspondent confuses the notice of intended resignation with actual resignation. It is usual for a Poor-law officer to give one month's notice of his intention to resign (and this is frequently made compulsory by agreement); the resignation is supposed to follow in due course. In the meantime, the holder of the appointment is responsible for the proper performance of all duties, and, of course, receives salary till he ceases to act.

NOTIFICATION (INFECTIOUS DISEASES) ACT, 1889.

T. G. H. writes: I wish to ask your opinion of the action of our medical officer of health. Having received the certificate of notification, he proceeds to the house, generally accompanied by a liveried subordinate, enters the bedroom, and makes a thorough examination of the patient. He indicates the line of treatment which he thinks ought to be pursued by asking such leading questions as, "Have you had your throat burnt?" etc. It is pretty safe to predict that if all medical officers of health are thus to examine the patient, verify the diagnosis, and sketch the mode of treatment, the working of the Act will be attended with a good deal of friction. By-and-by, doubtful cases, not running a normal course, will arise, and then who is to decide? I can find nothing in the Act which authorises the medical officer of health thus to constitute himself a medical referee; he should confine himself to the sanitary condition of the premises; if he did this no exception would be taken by patients or medical attendants. Some patients of mine the other morning were very much agitated and indignant at thus having the privacy of the sick chamber intruded upon by officialism.

*** This statement amounts to a very serious charge against the medical officer of health of the district, and it is obviously one for inquiry. The proper course is for the gentleman who writes this letter to make complaint formally to the vestry, or, if he prefers it, to the Local Government Board, who would write to the vestry and ask them to inquire into the matter. The case is one of great public importance, but complaint, with particulars, should be formally made.

THE METROPOLIS AND THE PUBLIC HEALTH ACT.

E. C. writes: Are you not in error in supposing that a magistrate cannot inflict a fine upon a person responsible for a nuisance unless his (the magistrate's) order for its abatement has been disobeyed? You will see that Section 96, Public Health Act, gives to the court of summary jurisdiction to which complaint has been made by a sanitary authority, power to inflict a penalty of £5 with costs, in addition to making the order for the abatement of the nuisance.

*** Our correspondent has overlooked the fact that the Public Health Act does not apply to the metropolis. The powers of the Public Health Act exceed those under the Nuisances Removal Act. But what we contend for is something in advance of the powers of either Act.

MEDICAL OFFICERS AND COUNTY COUNCILLORS IN SCOTLAND.

C. C. writes: Is a parochial medical officer and medical officer of health eligible for election as a county councillor in Scotland?

*** The Scotch Local Government Act of this year, following the English Municipal Corporations Act, 1882, disqualifies for membership of a County Council persons who hold any office of profit under or are interested in any contract or employment with, by, or on behalf of the Council or any Committee mentioned in the Act. Section 17 transfers the administration of the laws relating to public health (including, we presume, the appointment and pay of medical officers) to district committees constituted under the Act. It would seem, therefore, that the position of medical officers in Scotland is different from that of their brethren in England, and that in Scotland they are not eligible to be elected or be members of a County Council while holding such appointments anywhere in the county.

HEALTH OF ENGLISH TOWNS.

In twenty-eight of the largest English towns, including London, which have an estimated population of 9,555,408 persons, 5,167 births and 3,477 deaths were registered during the week ending Saturday, November 30th. The

able under certain restrictions. Dr. P. H. Mules, late Surgeon to the Manchester Royal Eye Hospital, has been elected Medical Officer.

THE DERBYSHIRE COUNTY LUNATIC ASYLUM AT MICKLEOVER.

THE annual report of Dr. Murray Lindsay, the medical superintendent of the asylum, is as usual full of information upon the many details of management, and the Committee state they consider it to be so exhaustive as to all matters relating to the present condition and management of the asylum that they have but little to say. Patients to the number of 159 were admitted during the year 1888, 80 of whom were males and 79 females; the total number under care was 610, and there remained at the end of the year 435 patients on the books, namely, 225 men and 210 women. Young idiots still continue to be sent to the asylum. This is to be regretted; and in the near future we hope to see special provision made for the care and treatment of the idiot children of every county apart from the county asylums. Patients to the number of 101 were discharged, and the recovery rate, exclusive of cases transferred from other asylums and calculated upon the number of admissions, was 43.91 per cent.

The high death-rate, namely, 16.29 per cent., calculated upon the daily average number resident during the year (as suggested in this JOURNAL in September 3rd, 1887), is said to be chiefly attributable to the extremely unfavourable character of the cases admitted. Pulmonary consumption, general paralysis, and maniacal exhaustion, within a short time of admission, are the chief causes given. Twelve died within a month of admission; several within a few days.

Dr. Murray Lindsay enters at some length into the question of pensions for asylum officials, and publishes the following resolution, passed by his Committee: "That in the opinion of the Committee it is desirable that all existing officers of asylums should be assured the right to a pension on a scale not lower than that provided by the rules relating to Her Majesty's Civil Service." Dr. Murray Lindsay's labours in the cause of pensions for asylum officers are worthy of every recognition, and we agree with his statement that asylum officials have anxious and trying duties to perform, not unattended with personal danger, which give them claims to special consideration with regard to pensions.

With reference to the cost for the maintenance of pauper lunatics, he says: "A very low maintenance-rate requires careful scrutiny, should be viewed with suspicion, and is not in my opinion a thing to be commended or to boast of. The insane require a generous diet and liberal treatment, and it should ever be borne in mind that an asylum is a hospital for the insane which should not be allowed to assume the character of a second-rate workhouse." The cost per head for the maintenance of the patients in this asylum is 7s. 9½d. per week.

KENT COUNTY ASYLUM, CHARTHAM, NEAR CANTERBURY. THE Commissioners in Lunacy at their last statutory inspection state: "We are glad to be able to report that this asylum which we have carefully inspected, continues to be maintained in a satisfactory condition. The wards are clean and bright, the beds and bedding well attended to, and the sanitary state of the buildings good." The total number of patients under care during the year 1888 was 904. There were 128 admitted, 60 discharged, and 88 died. The daily average number resident was 764. The recovery rate was 45.7 upon the admissions, and the proportion of deaths to the daily average number resident was 11.5 per cent.

Dr. Spencer, in his annual report, tells us that "the health of the patients generally during the year was good, but the presence of a large number of aged and infirm persons made the death-rate higher than the average." Two female patients were pregnant on admission, one made a satisfactory recovery from her mental illness, and left the asylum six weeks after her accouchement; the other remains hopelessly insane, and fortunately the child was stillborn. One patient died suddenly whilst at dinner; an inquest was held, and the verdict of the jury was death from suffocation and syncope.

The usual occupations and amusements have been provided for the patients, and with regard to the latter the Commissioners in their report state, "in the provision of amusements we have nothing but praise. The large number of programmes of entertainments given since the last visit, which have been laid before us is evidence that much thought and attention are bestowed

upon this subject, and we are glad to find that cricket and outdoor sports are largely practised."

We are glad to be able to congratulate Dr. Spencer and all connected with this admirably conducted institution upon the failure of the attempt to sell it to the London County Council.

INDIA AND THE COLONIES.

INDIA.

REPORT ON THE SANITARY ADMINISTRATION OF THE PUNJAB FOR THE YEAR 1888.

THE chief diseases were, as usual, cholera, small-pox, fever, bowel complaints, and injuries; 14,938 deaths from cholera were registered during the year 1888, compared with 8,804 in 1887. The epidemic of the year under notice was the severest since 1867. The greatest mortality from the disease took place during the months of June, July, August, and September, being the season of the year when organic matter in the soil is undergoing rapid chemical change, heat and moisture being added factors during this period. The people in the district of Shahpur believed that the disease was introduced from Kashmir, where it prevailed. The researches of the Sanitary Commissioner show that the disease spread from Shahpur as a centre. It is a curious fact that in this epidemic the chief towns enjoyed immunity from the disease; and even in those towns, fifteen in number, attacked, the slight incidence of the disease was very remarkable; the Sanitary Commissioner attributes this to improved sanitation. In Lahore, with its large population, only four deaths from cholera took place in the city, a fact justly, as we believe, set to the credit of the pure water with which Lahore is now supplied. This belief is well supported by what is recorded of Rawal Pindi, where the people who suffered most from cholera were those who drank water from a stream known as the Kapie Nulla, exposed to pollution; while those who drank the pure water from the twelve standposts which deliver the Rawal water practically escaped. This is of all facts the one most full of hope for the people of India.

In 1888 small-pox caused 16,938 deaths, being 556 more than in 1887, indicating a death-rate of 0.90 per 1,000. The Commissioner refers to the preference given by the people to inoculation over vaccination, on the ground that the children who have been vaccinated often take the disease severely, while those who have been inoculated, as a rule, rarely suffer a second time. The result of this preference is that inoculation keeps alive and diffuses the variolous poison, and its "effect is to increase and not diminish the mortality among the unprotected; the mortality of natural small-pox being seldom below 20 per cent., and often greatly exceeds that amount." The simple truth is that vaccinators in India are natives of a class not to be depended upon. As the Commissioner says: "to swell these returns, they enter every case as successful, whatever be the character of the vesicle. Over and over again have I found, on inspection, numbers of children covered with cutaneous disease, or suffering from diarrhoea, whose arms were one large ulcer as the result of the operations;" and he truly adds that spurious vaccination only brings discredit on the measure. The Sanitary Commissioner (Surgeon-Major Roe, F.R.C.S.) insists on the fact that vaccination is contraindicated when certain diseases are present, such as diarrhoea and such cutaneous diseases as herpes, eczema, eruptions behind the ears, on the neck, or in the groins are present. The remedy for all this is clearly a superior, and better instructed, and better paid class of vaccinators, and as much strict inspection as possible. All this means money, the great obstacle to the progress of sanitation in India. Surgeon-Major Roe thinks animal lymph vaccination is growing in popularity, and will in time supersede vaccination from arm to arm; the people being most averse to allowing their children to be used as vaccinifers.

This is a very valuable report, doing great credit to the zeal and diligence of the reporter.

JOHN DODDS PRICE, surgeon, was indicted at the Leicester Assizes on Saturday, for administering a noxious drug to a young lady to whom he was engaged. Letters showed that an intimacy had taken place and that drugs had been administered. The girl has since been removed to a lunatic asylum. The prisoner was found not guilty, and Mr. Justice Wills, in discharging him, said it was the only safe verdict possible.

MEDICAL NEWS.

SOCIETY OF APOTHECARIES OF LONDON.—The following candidates, having passed the Qualifying Examination in Medicine, Surgery, and Midwifery, have received certificates entitling them to practise in the same, and have been admitted as Licentiates of the Society on November 20th, 1889:

Gilpin, Frank, Middlesex Hospital.
Heywood, Charles Christopher, St. Thomas's Hospital.
Jones, Evan, Middlesex Hospital.
Lowsley, Lionel Dewe, St. Bartholomew's Hospital.
Ramsden, Herbert, Owens College, Manchester.

THE Government of Victoria is about to establish a retreat for inebriates.

DR. GABRIEL LÓPEZ PEREDA, Professor of Clinical Medicine in the University of Madrid, died on November 26th.

THE West Highland Railway have appointed Dr. Miller, of the Belford Hospital, Fort William, medical officer on that part of the line extending to the county march.

SIR RICHARD WEBSTER, Q.C., M.P., Attorney-General, has accepted the office of a vice-president to the Dental Hospital of London, Leicester Square.

At Nordhausen, in Prussian Saxony, the municipal authorities, at the suggestion of the *Physikus*, or district medical officer, have issued an order that barbers and hairdressers must disinfect their "instruments" each time they have been used.

BRITISH NURSES' ASSOCIATION.—The second annual *conversazione* of this association will be held this day (Friday), at 9 P.M., at the Princes' Hall and in the Galleries of the Institute of Painters in Water Colours, Piccadilly.

MR. D. B. BALDING, F.R.C.S., J.P. for Cambridgeshire, has been appointed one of the justices of the county to make orders for detention of private lunatics, in accordance with Sec. 10, Lunacy Act, 1889.

HOMICIDE BY FIREARMS.—Mr. Justice Wills, in opening the Notts Winter Assizes on Tuesday, expressed himself in favour of a short Act making it an offence punishable by fine to carry loaded firearms without reasonable excuse for doing so.

PRESENTATION.—On November 21st, the nurses and officers of the Lambeth Infirmary presented Dr. Grosvenor Shaw, the assistant medical officer, with a very handsome cut glass and plate side-board piece, in token of their regard and high appreciation of his services.

BEQUESTS.—By the will of the Right Hon. Charlotte Scott, Vicountess Ossington, of Ossington, near Newark, sums of £1,000 each are bequeathed to the Society for the Support and Education of the Indigent Deaf-and-Dumb and to the Charing Cross Hospital.

CANING ON THE HEAD AT SCHOOL.—With reference to a paragraph, under this title, which appeared in the JOURNAL of November 30th, we are requested to state that the death of the boy there referred to was to be attributed to typhoid fever, and not to the blows on the head.

THE LATE SURGEON J. HEATH, A.M.S.—Surgeon-Major Mackinnon has handed over to Miss Robinson, Soldiers' Institute, Portsmouth, £35 14s. 7d., being the amount collected for the purpose of placing a tablet to the memory of the late Surgeon J. Heath, A.M.S., from some of his brother officers of the Burmah Field Force. [This intention has been anticipated by his relatives, and, as there are tablets in Netley military chapel, and at Arklow, county Wicklow, his native place, the relations desire that the sum should be devoted to some charitable object. Mr. Mackinnon hopes that this course will be approved by the subscribers.]

RENAL SURGERY.—Mr. Bennett May writes: Ellen Gooch was admitted into the Queen's Hospital on April 15th, 1888 (not 1887), under the care of Dr. Carter, who diagnosed a large retro-peritoneal abscess, apparently consecutive to post-partum mischief, and asked me to see the case in consultation. There was no evidence of kidney disease. An operation was decided on and performed, which, so far from being ineffectual, undoubtedly saved her life and placed her in a state of comparative comfort. I have seen her to-day, and her condition is now almost precisely the same as

when discharged from hospital in September, 1888. Mr. Tait's own statement shows that she was not under my care in January, 1889, and therefore I think he is not entitled to credit me with being her medical attendant at that time, and in a sense which conveys an erroneous impression to the reader.

EDINBURGH HOSPITAL AND DISPENSARY FOR WOMEN AND CHILDREN.—The annual general meeting of those interested in the Edinburgh Hospital and Dispensary for Women and Children was held last week. Dr. Jex-Blake submitted the medical report, from which it appeared that 210 patients had been treated during the year. Of this number, 164 were provident patients, paying a small subscription. Twenty-five patients had been treated in the hospital. Dr. Littlejohn, in moving the adoption of the report, emphasised the desirability of women attending to women's ailments. Further, women were likely to be of service in the suitable regulation of children's diet.

ROYAL SOCIETY OF EDINBURGH.—The following office-bearers of the Royal Society of Edinburgh were appointed at the statutory meeting on the 25th ultimo: *President*: Sir William Thomson. *Vice-Presidents*: His Grace the Duke of Argyll, The Right Hon. Lord Moncrieff, Professor Sir Douglas MacLagan, M.D., Hon. Lord McLaren, Rev. Professor Flint, D.D., Professor Chrystal, Dr. Thomas Muir, Sir Arthur Mitchell, M.D. *General Secretary*: Professor Tait. *Ordinary Secretaries*: Professor Sir William Turner, Professor Crum Brown. *Library Curator*: Dr. Alexander Buchan. *Council*: Dr. T. Batty Tuke, Professor Bower, Dr. G. Sims Woodhead, Mr. Robert Cox, Professor Bayley Balfour, Professor Ewing, Professor Jack, Professor James Geikie, Dr. W. H. Perkin, Mr. A. Beatson Bell, the Right Hon. Lord Kingsburgh, and Dr. John Murray.

ALLEGED POISONING FROM WATER GAS.—Further evidence has been given as to the rumoured series of disasters at the Leeds Forge, believed to be due to the escape of water gas, and consequent poisoning by carbonic oxide. The further evidence is to the effect that there was an escape of this highly poisonous gas owing to an accident; and similar evidence appears to be forthcoming as to the circumstances of the sudden poisoning of the seven surgeons who were in attendance at the *post-mortem* examination. The insidious dangers of carbonic oxide, which is the chief product, are only too well known. Further comment, however, must be deferred until the full facts of the case are elicited, with the evidence of experts to whom the matter has been referred.

CHEMISTS AND THE PATENT MEDICINE ACTS.—At a recent meeting of the chemists and druggists trading in Northumberland and Durham, held at Newcastle, the following resolution was adopted: "That steps be taken to secure exemption from medicine duty for all preparations made according to the formula of any British or foreign *Pharmacopœia*, and described and sold as such, and all medicines for which there is not claimed either exclusive right of, or secret process to their manufacture." It was decided to forward a memorial in accordance with the resolution to the Pharmaceutical Society, and also to memorialise the Board of Trade that, seeing the uncertainty of the interpretation of the Act, they should give a caution prior to proceeding to impose any penalty for an infringement of the Acts.

ORPHAN HOMES OF SCOTLAND.—The eighteenth annual meeting in connection with the Orphan Homes of Scotland and Destitute Children's Home Mission, or, to call the homes by their popular name, Quarrier's Homes, was held on November 20th. The bare record of what Mr. Quarrier succeeds in doing in a year is of a most remarkable character. The homes are situated near Bridge of Weir, the buildings having been erected, part by part, as money was forthcoming, and now representing a total sum of £100,000. Through these homes, during the past year, a total of 1,103 destitute children has passed. Besides these, 564 children have been provided with a night's shelter. Of the children, 250, both boys and girls, were during the year despatched to Canada. Altogether, since the emigration scheme was started, 3,000 children have been so sent, and of these not $2\frac{1}{2}$ per cent. have failed to fulfil the expectations of their rescuers. The expenditure necessitated by all this work has been met by voluntary gifts of money to the amount of £17,179, besides large quantities of clothing and provisions. Not satisfied with what he is now able to do, Mr. Quarrier seeks to add to his homes additional buildings, at a cost of £20,000, to enable him to accommodate 1,200 additional children; and, to judge by the past, there is little doubt he will obtain his desire.

ANATOMICAL SOCIETY OF GREAT BRITAIN AND IRELAND.—The following have been elected office-bearers for the ensuing year:—*President*: G. Murray Humphry, M.D., F.R.S. *Vice-Presidents*: Sir William Turner, M.B., F.R.S.; Daniel John Cunningham, M.D.; George Dancer Thane. *Treasurer*: Charles Stewart. *Secretaries*: W. P. Herringham, M.D. (England); H. St. John Brooks, M.D. (Ireland); John Yule Mackay, M.D. (Scotland). *Council*: William Anderson; John T. Charles, M.D.; John Curnow, M.D.; J. N. C. Davies-Colley; John Cleland, M.D., F.R.S.; Rickman J. Godlee; G. B. Howes; David Hepburn, M.D.; John Langton; Charles Barrett Lockwood; Alexander Macalister, M.D., F.R.S.; A. M. Paterson, M.D.; Thomas Pickering Pick; J. Bland Sutton; John Struthers, M.D.; Johnson Symington, M.D.; Frederick Treves; Bertram Windle, M.D.; Arthur Thomson, M.B.; and Alfred H. Young, M.B.

STUDENTS' RESIDENCES.—The success of the students' residences at Wadham House, Toynbee Hall, E., and the want of space to accommodate all who wish to reside there, has suggested the foundation of another students' house on the same lines. Part of a house in the immediate neighbourhood is being adapted to the purpose, and will be ready before Christmas. The object is to provide the social and intellectual life of a college for students and others whose days are occupied in business. Every student will have his private room and there will be a common dining room, and eventually a reading room and class rooms. Every effort will be made to bring the charges down to, if not below, the level of those at Wadham House—namely, 7s. per week for furnished room, use of common room, and service. It will be possible to include board and lodging (exclusive of mid-day meals) for 15s. The internal affairs of the house will be, to a large extent, managed by a committee of residents. Each student will have a latch key. It is hoped that students will be able to take full advantages of the classes, library, etc., at Toynbee Hall, and gain much of the best side of college life. Further inquiries should be made of the Rev. S. A. Barnett, or Mr. B. King, Toynbee Hall, 28, Commercial Street, London, E.

COLLEGE OF MEDICINE FOR CHINESE.—At a meeting of the Senate held on Saturday, October 12th, 1889, the Dean (Mr. James Cantlie, M.A., M.B., F.R.C.S.), read the following letter from His Excellency Li Hung Chang, in reply to a communication sent to his excellency for his becoming patron to the College:—"To the Authorities of the Hong Kong College of Medicine for Chinese. Gentlemen,—I am in receipt of your letter informing me that I have had the honour of being elected patron of your College. I also thank you for your desire to perpetuate my name on your College walls. I wish every success to your benevolent design. I learn that there are between twenty and thirty students in the College studying medicine, and consider it most proper that they should also pay attention to the sister subject of chemistry, and understand how to compound and how to analyse, thus insuring greater accuracy in the diagnosis of disease and the preparation of remedies. I remark that your countrymen devote themselves to practical research, and base their scientific principles on the results of investigations, thus differing from those who rest content with theories. The happy results which ever attend the treatment of disease on scientific principles are evidence of the advantage to be derived from the constant study of anatomy and chemistry and the consequent illumination of the dark path of knowledge. The Tientsin Hospital is a brilliant example of the advantage which Western science has over Chinese medical practice. There is no doubt that when your admirable project is achieved it will be appreciated and imitated, and that it will, through your students, be a blessing to China. Trusting that you will prosecute your scheme with unflinching energy, and wishing you my compliments, I subscribe myself on the accompanying card, LI HUNG CHANG." Six students passed the second professional examination in physiology (three in honours), and two the first professional in physiology.

MEDICAL VACANCIES.

The following Vacancies are announced:

BLACKBURN AND EAST LANCASHIRE INFIRMARY.—Junior House-Surgeon. Salary, £50 per annum. Applications by December 17th to Joseph Eastwood.

CANCER HOSPITAL, Fulham Road.—Assistant Anæsthetist. Applications by December 9th to the Secretary.

DONCASTER GENERAL INFIRMARY AND DISPENSARY.—House-Surgeon. Salary, £100 per annum, with board and residence. Applications by December 20th to W. Clark.

GORDON HOSPITAL FOR FISTULA, etc., 278, Vauxhall Bridge Road, S.W.—Anæsthetist. Applications by December 21st to N. S. Hincks.

GRANTHAM FRIENDLY AND TRADE SOCIETIES' MEDICAL INSTITUTION.—Resident Medical Officer. Salary, £150 per annum, with fees, residence, etc. Applications by December 18th to Mr. F. Hullott, Grantham.

KING'S COLLEGE HOSPITAL.—Assistant Physician and Assistant Accoucher. Applications to J. W. Cunningham.

KING'S COLLEGE HOSPITAL.—Assistant Surgeon. Applications to J. W. Cunningham.

LONDON THROAT HOSPITAL, Great Portland Street.—House-Surgeon. Salary, £50 per annum. Applications by December 20th to A. B. Woakes, Honorary Secretary.

MILLER HOSPITAL AND ROYAL KENT DISPENSARY.—Junior Resident Medical Officer. Salary, £30 per annum, with board, etc. Applications by December 13th to the Honorary Secretary.

NATIONAL SANATORIUM FOR CONSUMPTION AND DISEASES OF THE CHEST, Bournemouth.—Physician. Applications by December 9th to the Secretary.

NORTH-WEST LONDON HOSPITAL, Kentish Town Road.—Assistant-Physician. Applications by December 10th to the Secretary.

ST. GEORGE'S HOSPITAL.—Lecturer on Dental Surgery. Applications by December 8th to the Dean.

ST. PANCRAS AND NORTHERN DISPENSARY.—Resident Medical Officer. Salary, £105, per annum, with residence and attendance. Applications to H. P. Bodkin, 23, Gordon Street, Gordon Square, W.C.

YORK COUNTY HOSPITAL.—Assistant House-Surgeon. Salary, £40 per annum, with board and residence. Applications by December 7th to the Secretary.

YORK DISPENSARY.—Resident Medical Officer. Salary, £130 per annum, with apartments, coals, and gas. Applications by December 17th to S. W. North, 84, Micklegate, York.

MEDICAL APPOINTMENTS.

ABBOTT, F. C., L.R.C.P., M.R.C.S. (Extension), appointed Resident House-Physician to St. Thomas's Hospital.

ANSON, G. E., M.A., M.B., B.C. Cantab., L.R.C.P., M.R.C.S., appointed Resident Accoucher to St. Thomas's Hospital.

BETTES, F. B., L.R.C.P. Lond., M.R.C.S., Resident Obstetric Assistant, appointed Junior House-Surgeon to the Westminster Hospital.

BOYCOTT, A. N., L.R.C.P., M.R.C.S. (Extension), appointed House-Surgeon to St. Thomas's Hospital.

CAUDWELL, A. H., M.B., C.M., appointed Medical Officer to the Woodstock Union Workhouse and No. 1 District of Woodstock, *vice* A. H. Mair, M.B., C.M., resigned.

COWEN, T. P., L.R.C.P., M.R.C.S., appointed Assistant House-Surgeon to St. Thomas's Hospital.

DE JERSEY, W. B., L.R.C.P., M.R.C.S. (Extension), appointed Assistant House-Physician to St. Thomas's Hospital.

DICKSON, T. H., L.R.C.P., M.R.C.S., appointed Clinical Assistant in the Special Department for Diseases of the Throat, St. Thomas's Hospital.

FORWARD, F. E., L.R.C.P., M.R.C.S., appointed Resident House-Physician to St. Thomas's Hospital.

HARRISON, H. L., M.B., M.R.C.S., appointed Assistant House-Surgeon to the Leicester Infirmary and Fever House, *vice* G. W. Roll, appointed House-Surgeon.

HUGHES, A. E. P., L.R.C.P., M.R.C.S., appointed Clinical Assistant in the Special Department for Diseases of the Eye of St. Thomas's Hospital.

HULBERT, H. H., L.R.C.P., M.R.C.S. (Extension), appointed House-Surgeon to St. Thomas's Hospital.

JONES, H. S., F.R.C.S., L.S.A., appointed Clinical Assistant in the Special Department for Diseases of the Skin of St. Thomas's Hospital.

KEIFFENHEIM, L. W., appointed House-Physician to the Hospital for Consumption, *vice* Dr. Canney, resigned.

LAKE, R., L.R.C.P., M.R.C.S. (Extension), appointed Clinical Assistant in the Special Department for Diseases of the Ear, St. Thomas's Hospital.

LAMBERT, T. W., L.R.C.P., M.R.C.S. (Extension), appointed Clinical Assistant in the Special Department for Diseases of the Skin of St. Thomas's Hospital.

LAW, W. G., M.B. C.M. Edin. (Extension), appointed Clinical Assistant in the Special Department for Diseases of the Eye of St. Thomas's Hospital.

MACLURE, Herbert, appointed House-Physician to the Hospital for Consumption, Brompton, *vice* Dr. Matthews, resigned.

MILTON, F. R. S., L.R.C.P., M.R.C.S. (Extension), appointed House-Surgeon to St. Thomas's Hospital.

NEALE, J. Headley, M.B. Edin., M.R.C.P. Lond., late Assistant Physician, appointed Honorary Physician to the Leicester Infirmary and Fever House, *vice* Dr. Blunt, deceased.

OGLE, C. J., appointed Surgeon to the Gordon Hospital for Fistula, etc., 278, Vauxhall Bridge Road, S.W., *vice* Mr. Benton, deceased.

OSBURN, H. B., L.R.C.P., M.R.C.S., appointed Senior Obstetric Clerk to St. Thomas's Hospital.

SPENCER, M. H., M.A., M.B., B.C. Cantab., L.R.C.P., M.R.C.S. (Extension) appointed Non-Resident House-Physician to St. Thomas's Hospital.

STABB, A. F., L.R.C.P., M.R.C.S., appointed Assistant House-Surgeon to St. Thomas's Hospital.

TOLLER, S. G., L.R.C.P., M.R.C.S., appointed Clinical Assistant in the Special Department for Diseases of the Throat, St. Thomas's Hospital.

TURNER, H. G., M.A., M.B., B.Ch. Oxon., L.R.C.P., M.R.C.S. (Extension), appointed House-Surgeon to St. Thomas's Hospital.

WICKHAM, G. H., L.R.C.P., M.R.C.S., appointed Clinical Assistant in the Special Department for Diseases of the Ear, St. Thomas's Hospital.

DIARY FOR NEXT WEEK.

MONDAY.

MEDICAL SOCIETY OF LONDON, 8.30 P.M.—Dr. Douglas Powell will open a discussion on the Diagnosis and Treatment of Aneurysm of the Aorta.

TUESDAY.

ROYAL MEDICAL AND CHIRURGICAL SOCIETY, 20, Hanover Square, 8.30 P.M.—Arthur E. Nevins, F.R.C.S. Edin.: (1) On the Frequent Association of Heart Disease, especially Mitral Stenosis, with Diseases of the Pelvic Viscera in Women. Edward Roughton, F.R.C.S.: On Blood Tumours (angiomas and angiosarcomata) of Bone.

ANTHROPOLOGICAL INSTITUTE OF GREAT BRITAIN AND IRELAND, 3, Hanover Square, W., 8.30 P.M.—Mr. Edward Beardmore: The Natives of Mowat, Daudal, New Guinea (communicated by Professor A. C. Haddon). Mr. S. B. J. Skerthly, F.G.S.: Fire-Making in North Borneo. Dr. H. Rink: On the Origin of the Eskimo.

WEDNESDAY.

ROYAL MICROSCOPICAL SOCIETY (King's College, W.C.), 8 P.M.—Mr. A. W. Bennett: On the Freshwater Algae and Schizophyceae of Hampshire and Devon.

THE SANITARY INSTITUTE (Parkes Museum, 74A, Margaret Street, Regent Street, W.), 8 P.M.—Mr. W. Santo Crimp: The Disposal of Sewage.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, BROMPTON, 4 P.M.—Mr. R. J. Godlee: On Abscess of the Liver, and Notes of some Surgical Chest Cases. Lecture I.

HUNTERIAN SOCIETY, 8 P.M.—Pathological evening. Dr. Fowler: Papillomatous Growth of Uvula. Mr. Rivington: (1) Sarcoma of Foot; (2) Exostosis. Mr. Openshaw: Malformed Uterus. Dr. Davies: (1) Sarcoma of Lung; (2) Sarcoma of Kidney. Mr. Bidwell: (1) Acute Necrosis of the Atlas; (2) Abscess of Sternum and Liver, from a Case of Pyæmia. Mr. Poland: Carcinoma of the Sigmoid Flexure.

BRITISH GYNÆCOLOGICAL SOCIETY, 8.30 P.M. Council, 8 P.M.—Discussion on papers. Mr. Lawson Tait: A reply to Some Recent Observations on Ectopic Gestation. Dr. Benington: A Case of Lunacy Cured by the Use of a Pessary. Mr. Bowreman Jessett: The Surgical Treatment of Cancer of the Uterus. Specimens will be shown.

THURSDAY.

CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST (Victoria Park, E.), 4.30 P.M.—Dr. Clifford Beale: On Laryngeal Affections in Phthisical Persons.

OPHTHALMOLOGICAL SOCIETY OF THE UNITED KINGDOM, 8.30 P.M.—Patients and Card Specimens at 8 P.M. Mr. Treacher Collins: Microscopical Sections of Lens, with Epithelium on the Inner Surface of the Capsule, and showing other peculiar structural changes. Mr. Jessop: (1) Aniridia with Dislocation of Lens; (2) Punctate Appearance of Anterior Capsule of Lens; (3) Vacuoles in Lens. Mr. J. Tatham Thompson: Note on a Case of Hereditary Tendency to Cataract in Early Childhood. Mr. Tweedy: On the Operative Treatment (1) of Cicatricial Ectropion of the Lower Lid, (2) of Symblepharon. Mr. Hill Griffith: A Case of Primary Tuberculosis of the Iris. Mr. C. Wray (introduced): On a Form of Conjunctivitis. Mr. Spencer Watson: Osteoma of the Infra-superciliary Region.

FRIDAY.

CLINICAL SOCIETY, 20, Hanover Square, 8 P.M.—Living Specimens.—Dr. Percy Fleming: Acromegaly. Mr. Silcock: Acromegaly. Mr. Kenneth Campbell: Acromegaly. Mr. C. Symonds: Two Cases in which the Thyroid Cysts have been Removed, one of them showing Ocular Sympathetic Paralysis. Mr. W. G. Spencer: Charcot's Disease of Shoulder-Joint attended by Suppuration. Mr. J. H. Morgan: (1) Inflamed Nævus of Leg, with Subcutaneous Hemorrhages. (2) Tumour of the Frontal Bone in a Boy. Papers, at 9 P.M.: Mr. C. Symonds: Nine Cases of Thyroid Cysts and Adenomata Treated by Excision. Mr. W. H. Battle: Case in which a Diffuse Aneurysm developed in the Calf of the Leg, Simulating Abscess; recovery after removal of parts of the Popliteal and Tibial Arteries. Mr. W. G. Spencer: Case of Traumatic Aneurysm following a Fracture, Dislocation of the Spine in the Dorsolumbar Region, and presumably connected with the Lumbar Arteries.

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. The first post on Thursday mornings is the latest by which advertisements can be received.

MARRIAGE.

ORD—MERCER.—On November 28th, at Holy Trinity, Bournemouth, by the Rev. Canon Eliot, William Theophilus Ord, M.R.C.S. Eng., L.R.C.P. Lond., of Halesowen, Worcester, to Elizabeth Louisa, daughter of Major A. H. H. Mercer, formerly of the 60th Rifles, of Lee, Blackheath.

DEATH.

TEIXEIRA.—On November 29th, 1888, at Georgetown, Demerara, Nell, the beloved wife of Dr. João Teixeira, and second daughter of John Hudson, of The Green, Stratford, Essex.

HOURS OF ATTENDANCE AT THE LONDON HOSPITALS.

CHARING CROSS.—Medical and Surgical, daily, 1.30; Obstetric, Tu. F., 1.30; Skin, M. 1.30; Dental, M. W. F., 9.

CHELSEA HOSPITAL FOR WOMEN.—M. Tu. W. and F., 1.30.

GREAT NORTHERN CENTRAL.—Medical and Surgical, M. Tu. Th. F., 2.30; Obstetric, W., 2.30; Eye, Tu. F., 10; Ear, M. F., 2.30; Diseases of the Skin, W., 2.30; Diseases of the Throat, Th., 2.30; Dental Cases, W., 2.

GUY'S.—Medical and Surgical, daily, 1.30; Obstetric, M. Tu. F., 1.30; Eye, M. Tu. Th. F., 1.30; Ear, Tu. 1; Skin, Tu., 1; Dental, Tu. Th. F., 1.30.

KING'S COLLEGE.—Medical, daily, 2; Surgical, daily, 1.30; Obstetric, Tu. Th. S., 1.30; o.p., W. F., 1.30; Eye, M. Th., 1.30; Ophthalmic Department, W., 2; Ear, Th., 2; Skin, F., 1.30; Throat, F., 1.30; Dental, M. Th., 9.30.

LONDON.—Medical, daily, exc. S., 2; Surgical, daily, 1.30 and 2; Obstetric, M. Th., 1.30; o.p., W. S., 1.30; Eye, Tu. S., 9; Ear, S., 9.30; Skin, Th., 9; Dental, Tu., 9. MIDDLESEX.—Medical and Surgical, daily, 1.30; Obstetric, Tu. F., 9.30; o.p., M. F., 9, W. 1.30; Eye, W. S., 9; Ear and Throat, Tu., 9; Skin, Tu., 4, Th. 9.30; Dental, M. W. F., 9.30.

NATIONAL ORTHOPÆDIC.—M. Tu. Th. F., 2.

NORTH-WEST LONDON.—Medical and Surgical, daily, 2; Obstetric, W., 2; Eye, W., 9; Skin, Tu., 2; Dental, F. 9.

ROYAL ORTHOPÆDIC.—Daily, 1.

ROYAL FREE.—Medical and Surgical, daily, 2; Diseases of Women, Tu. S., 9; Eye, M. F., 9; Dental, Th. 9.

ST. BARTHOLOMEW'S.—Medical and Surgical, daily, 1.30; Obstetric, Tu. Th. S., 2; o.p., W. S., 9; Eye, W. Th. S., 2.30; Ear, Tu. F., 2; Skin, F., 1.30; Larynx, F., 2.30; Orthopædic, M., 2.30; Dental, Tu. F., 9.

ST. GEORGE'S.—Medical and Surgical, M. T. F. S., 12; Obstetric, Th. 2; o.p., Eye, W. S., 2; Ear, Tu., 2; Skin, W., 2; Throat, Th., 2; Orthopædic, W., 2; Dental, Tu., S., 9.

ST. MARK'S HOSPITAL.—Fistula and Diseases of Rectum, males, W., 8.45; females, Th., 8.45.

ST. MARY'S.—Medical and Surgical, daily, 1.45, o.p., 1.30; Obstetric, Tu. F., 1.45; Eye, Tu. F. S., 9; Ear, M. Th., 3; Orthopædic, W., 10; Throat, Tu. F., 1.30; Skin, M. Th., 9.30; Electro-therapeutics, 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. Tu. W. Th. F., 1.30; o.p., daily, except Sat., 1.30; Ear, M., 1.30; Skin, F., 1.30; Throat, Tu. F., 1.30; Children, S., 1.30; Dental, Tu. F., 10.

UNIVERSITY COLLEGE.—Medical and Surgical, daily, 1.30; Obstetrics, M. Th., 1.30; Tu., W. F., 2; Eye, Tu. F., 2; Ear, M. F., 9; Skin, W., 1.45, S., 9.15; Throat, Th., 1.20; Dental, W., 9.30.

WESTMINSTER.—Medical and Surgical, daily, 1; Obstetric, Tu. F., 1; Eye, M. Th., 2.30; Ear, M., 9; Skin, W., 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 MIDDAY POST ON WEDNESDAY. TELEGRAMS CAN BE RECEIVED ON THURSDAY MORNING.

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.

CANARIES OR MADEIRA?

A MEMBER, who is giving up practice in consequence of ill-health, would be glad to hear particulars as to the best means of getting to the Madeira or Canary Islands, and the average cost of living; also which of the two groups is preferable. What would be the probable cost for six months with wife, child, and servant? Are small private houses easily attainable?

ANSWERS.

PERLEXED might refer to any good text-book of medicine, as, for instance, Dr. Bristowe's.

