

(2) that this antiseptic property of the acidulous radical is perpetuated through its salts. It has been shown that sulphite of zinc is always oxidising when in solution, and that this unstable condition of sulphites results in the production of a fluid craving for oxygen, which is antagonistic to germ life.

This brings us to the important consideration of what part the basilius element zinc plays in the work. The use of zinc chloride in rendering the surface of the wound a non-cultivating ground is well known. This action is present to a high degree in zinc sulphide without many of the objections appertaining to the chloride. Zinc salts seem to have a specific action in keeping organisms in check and allowing the formation of healthy tissue; this is shown by the efficacy of the zinc salts in embalming the dead and rendering the tissue an inert and unchanging mass.

I (Dr. Heuston) now bring this paper to a conclusion by a tabular arrangement of the cases, as furnished by the resident, in which this dressing has been applied in the Adelaide Hospital by my colleagues and myself.

Cases dressed by the Sulphite of Zinc Gauze in the Adelaide Hospital between February and July, 1890.

Name.	Age.	Operation.	Date.	Result.
M. T.	42	Amputation of breast	Feb. 18	Suppurated in one place, where great strain was on the stitches; rest of wound healed by first intention.
T. C.	21	Radical cure of inguinal hernia	„ 20	Superficial wound healed by first intention; slight deep suppurated from silk ligatures applied to sac.
F. R.	20	Radical cure of varicocele	April 3	Healed by first intention.
M. C.	—	Removal of strumous glands from neck	„ 8	Healed by first intention.
M. S.	16	Removal of parotid tumour	„ 24	Healed by first intention.
M. H.	20	Arthrectomy	May 21	First dressing May 23rd; healed by first intention. Second dressing May 26th; healed.
S. W.	31	Amputation of breast	„ 29	First dressing June 1st; healed by first intention. Second dressing June 8th; healed.
J. F.	19	Treves's operation for psoas abscess	June 19	Wounds healed by first intention, except where drainage tube existed. Although there was a great discharge from the drainage tube, there was no irritation of skin.
H. Y.	43	Ovariectomy	„ 21	First dressing June 24th; wound healed. June 28th, patient sat up for five hours. July 2nd, all dressings removed, and patient discharged from hospital.
C. W.	20	Nephrolithotomy (Dr. Purefoy)	„ 21	June 24th, wound quite healthy, deep suppurated from drainage tube.
O. B.	19	Excision of knee (Mr. Franks)	„ 27	First dressing July 7th (tenth day); wound quite healed.
J. M.	60	Draining subpatellar bursa	July 3	July 8th, wound healed.
P. O'B.	19	Excision of knee	„ 3	First dressing July 8th; wound healed.
E. S.	7	False cartilage removed from knee-joint on which arthrectomy had been performed two years since	„ 3	Healed by first intention.
A. M.	12	Excision of knee	„ 10	First dressing July 13th; wound healed.
L. R.	30	Excision of knee (Mr. Barton)	„ 19	First dressing July 25th; wound healed.
T. B.	60	Epithelioma of labia	„ 26	Wound dressed several times daily; no suppurated or irritation to present time (July 30th).

Those cases where not otherwise mentioned were operated on by Mr. Heuston. MR. KENDAL FRANKS said he had found so much cutaneous irritation following the use of the mercurio-cyanide gauze that he was glad to put to the test of experience the gauze dressing described by Mr. Heuston. He had been very fairly satisfied with the alembroth gauze, though it also occasioned irritation of the skin. He has now used the sulphite of zinc gauze in many cases. In every case he has found the wound to run a perfectly aseptic course, and in no case had he seen the slightest irritation of the skin beneath the gauze. It would, he thought, prove a valuable addition to surgical dressings.

MEMORANDA: MEDICAL, SURGICAL, OBSTETRICAL, THERAPEUTICAL, PATHOLOGICAL, ETC.

PANOPHTHALMITIS AND REMOVAL OF THE GASSERIAN GANGLION.

THE following case will support the probability of the panophthalmitis and loss of the eye being caused by the removal of the Gasserian ganglion. The daring brilliancy and success of Mr. Rose's operation¹ needs no comment from me.

J. B., a substantial middle-aged farmer, had been operated upon by me three times for epithelial cancer of left lower lip. Disheartened by its fourth appearance I took him to Mr. Jonathan Hutchinson, who removed the recurrent growth by a large V-shaped incision. It returned again after a rather longer interval. He then consulted an American cancer curer (quack), and I lost sight of him for a time. In a shorter period than after Mr. Hutchinson's operation the cancer returned with the addition of agonising pains in the left side of his face and head, which he was told was neuralgia. Ashamed of leaving me, and his pocket smarting under the abstraction of the fees of the American, he had put off calling me in for some time. The growth on this sixth appearance was not in the free border of the lip, which had been extensively destroyed by very painful caustics, but was seated under the mucous membrane of the reflexion from the maxilla to the lip, and was of the size of a walnut. The neuralgia of the left side of the head, face, and jaw had disappeared and the tumour was painless.

I took him again to Mr. Jonathan Hutchinson to decide upon the utility of another operation. Mr. Hutchinson pointed out the absence of the temporal, masseter, and other muscles on the left side supplied by the sensory branches of the fifth nerve, and in the most lucid manner demonstrated the uselessness of any operation in the mouth, as there was almost certain evidence of a growth under the dura mater having destroyed the Gasserian ganglion on the left side. There were no cerebral symptoms.

Shortly afterwards the left eye was attacked by severe inflammation, and being totally uninfluenced by treatment, went on to suppuration. Although its appearance was that of the most violent inflammation, with swelling, redness, and heat, there was no pain, and he calmly looked at me when passing a bistoury into the eye. It suppurated well and soon healed. The growth in the mouth rapidly increased and was accompanied by an enormous appetite. It never ulcerated, as he was seized after a few months with coma and died in a few days.

Till the coma appeared he was perfectly sane, and beyond a slightly increased natural irritability had no brain symptoms. The most earnest entreaties failed to obtain a *post-mortem* examination.²

Kimbolton.

J. HUGHES HEMMING, M.R.C.S., ETC.

REINFECTION, RECRUDESCENCE, OR WHAT?

UNDER the above heading in the issues of September 27th and October 11th of the BRITISH MEDICAL JOURNAL I read with interest the letters by Drs. Greene and Squire. Cases of scarlatina, where a second attack supervenes with but a short interval of time between that and the first, are rare enough to be recorded. Such are the two cases which came under my notice two years ago.

On November 16th, 1888, I was called in to attend two boys, R. and V. T., aged 11 and 9 years respectively, and found them suffering from a well-marked attack of scarlatina. Both cases terminated favourably, without complication, in due course, I making my last visit on December 5th, when desquamation had almost ceased.

On January 19, 1889 (45 days after my last visit therefore) I was again summoned to attend these boys, and to my surprise found them stricken down by a second attack of scarlatina. As before, both cases proceeded to recovery without any bad symptoms developing. In both attacks the symptoms of the disease were well marked, there being no doubt as to the nature of the complaint.

It is curious to note that on both occasions these two children

¹ BRITISH MEDICAL JOURNAL, November 1st, p. 1012.

² As well as I can remember this is only the second instance of return of lip epithelioma in an experience of more than 40 years in a decidedly cancerous district.

were affected by the disease at the same time, the rash being noticed simultaneously in both cases. Desquamation the second time was more profuse than the first.

There was another child in the house—a rickety unhealthy-looking girl—who was being treated at the time for bow-legs. She had never had scarlatina, and though coming frequently in contact with my two patients during the desquamation period, she fortunately escaped the disease.

Aston.

ALFRED W. M. ROBSON,
L.R.C.P. Edin., L.R.C.S. Edin.

COEXISTENCE OF MEASLES AND SCARLATINA.

AFTER a few days of general *malaise* and sore throat, F. B., aged 8½ years, on October 2nd, 1890, presented a well-marked scarlatinal rash. On the same day her twin sister, B., developing febrile symptoms, was put in bed with the former, her parents believing she had the same complaint. Much to my surprise, on visiting them on the following day (October 23rd), I found B. with an unmistakable measles eruption. The scarlatinal rash of F. ran its usual course, and had in fact disappeared when, on October 6th, or four days after the appearance of the scarlatinal eruption, the measles rash appeared in her case. Both children quickly got over the febrile stage of their complaint, and were allowed to play about in their room, which was kept at a constant temperature. Desquamation proceeded in the usual way in F.'s case, and, to complete the story, B. was covered with a scarlatinal rash on October 18th.

Now, in the case of F., the accepted period of incubation in measles forbids our supposing that she caught this fever from B., and, having developed the typical rash of both scarlatina and measles within four days, we have no option but to allow that the specific poison of both fevers coexisted in her system before the eruption of either. I may say that in every instance the rash was well developed and unmistakable, and the symptoms in no way modified by the previous illness except in the scarlatinal attack of B., in which instance the rash appeared without any preliminary *malaise* or sore throat.

Falmouth.

E. HEAD MOORE, L.R.C.S., L.S.A.

A SIMPLE METHOD OF REDUCTION IN BACKWARD HIP DISLOCATIONS.

AN adult Arab was admitted with an old dorsal dislocation of right hip. He had fallen from a camel quite a month before on the outer side of the limb. Thus the displacement was probably direct, and produced by forcible adduction. Hence, possibly, the failure to reduce it by the orthodox manipulations, based on the assumption of all cases being conversions of primary thyroid dislocations. Manipulations and pulleys were alternately tried for quite an hour under chloroform; but the pulleys were practically of no use, owing to the thigh band being too large. At the end of this time the limb could be abducted freely, though scarcely at all at first; and when the limb was pulled vertically upwards there was considerable movement of the head of the bone grating on the ileum. Still we quite failed with the regular movements; so, while an assistant seizing the limb below the bent knee pulled forcibly upwards, with the thigh fully abducted and flexed at rather more than a right angle, I kneeling on the sound side of the patient wrapped my arms round the limb near the hip, and, leaning my weight on the inside of the knee, so levered the head of the bone up into the acetabulum. The reduction has been permanent. The great ease with which the bone went in suggests that this method may be of somewhat general application. In old cases it probably needs free preliminary movements to break up adhesions. The extension may, of course, be made with pulleys. The essential thing is the maintenance of full abduction, while the head of the bone is pressed up into position.

H. HERBERT, Surgeon I.M.S.,
Acting Civil Surgeon, Aden.

VAGINAL HYSTERECTOMY.

IN the BRITISH MEDICAL JOURNAL of October 11th you inserted some brief remarks by Dr. Clement Godson on a case of vaginal hysterectomy. *Apròpos* of this, will you permit me to mention my last case, in order that I may indicate a method of operating which seems to me a great improvement on Dr. Godson's plan? I read Dr. Godson's memorandum when on my way to visit my

thirty-first case of vaginal hysterectomy, and I found the patient, as I expected, in the condition of a normal puerpera of the same period, namely, four days. The case was extremely favourable, as the uterus was quite movable. The bladder was first so separated from the uterus that there was no danger of wounding it, special care being taken with the lateral extension of the separation. The large vessels which enter the sides of the uterus low down were then tied, and finally Douglas's space was opened. The broad ligaments were now tied step by step low down with silk, higher up with strong catgut, and the uterus was removed. Three sutures of catgut were now introduced from before backwards, so as to close the large chasm on the floor of the pelvis. Each suture entered the edge of the cut vaginal wall in front, caught up a little here and there of the broad raw surface left by separating the uterus from the bladder, and took a good hold of the peritoneum at the edge of the inner wound—the vesico-uterine fold. It was then made to enter the peritoneum behind where it had been reflected at the bottom of Douglas's space, and passing through the posterior raw surface as through the anterior, it emerged at the edge of the posterior vaginal wall. These sutures when tied almost completely closed the opening in the floor of the pelvis, and left a vaginal *cul-de-sac*. The ligatures of the broad ligament, which had been left about six inches long, came down at the angles, forming drains. The vaginal dressing was of the simplest description—a tampon of iodoform gauze.

This is a typical case. The operation is done once for all, and the patient can then be left for several days in comfort, undisturbed by dressing.

I shall find another opportunity of publishing the cases in detail, but I may say here that in the last twenty-one cases there has been only one death, and that from an accident to the bowels of a sort which should be easily avoidable. I refer to the last twenty-one because I have already published an account of my first ten cases.

Manchester.

W. J. SINCLAIR.

THE VALUE OF IGNIPUNCTURE IN THE TREATMENT OF HYPERTROPHIED CERVIX UTERI.

THE length of time occupied by the usual routine treatment of hypertrophied cervix uteri can be considerably shortened by the judicious use of ignipuncture. The usual plans of treatment, namely, tampons of glycerine, copious syringing with hot water, painting the cervix with Churchill's tincture of iodine, etc., occupy a very considerable time, which treatment (unless the patient is willing and able to pay for) "is better kept in the breach than in the observance." Superficial firing by caustics or smouldering pieces of carbon (held in contact with cervix by forceps) is not sufficient in well-marked cases of chronic hypertrophy, at least to obtain the result wished for within a reasonable time; and having seen the good results of ignipuncture in enlarged tonsils, I have given it a trial, and can recommend it as a useful adjunct in these cases.

A thermo-cautery of small size and fine point (Paquelin's) will be found the best, but those who do not possess this valuable instrument can obtain equally good results with a copper rod sharp at the point and a solid bulb about half an inch from the point, so as to retain the heat while the necessary number of punctures are made through a wooden cylindrical speculum. This cautery can be heated in an ordinary spirit lamp till red hot, held in the tissue for a few seconds, when each puncture—¼ inch—is made, and then withdrawn. There should be no bleeding observed if the operation is properly done, such being caused by the cautery being either too hot or too cold.

My practice is to blow in a little boric acid (with my vaginal insufflator) over the punctured surface, and make no examination for a week, when the operation can be repeated if necessary.

I have also found ignipuncture of considerable value in lacerations of the cervix when hardly bad enough to demand Emmet's operation. Very little pain, if any, is produced unless the operator is unwise enough to allow the patient to observe the preliminaries.

ALEX. DUKE, F.R.C.P.I., Ex-Assistant Master
Rotunda Hospital, Dublin; Gynaecologist Stevens's Hospital.

IS CONCUSSION OF THE LUNGS A CAUSE OF PNEUMONIA?

IN 1885 I attended two children, of different families, at an interval of about a week. They were boys, aged about 7 and 9 years. They both suffered from pneumonia of one lung, presenting the

usual symptoms, and the history of the cases was strangely identical. They were described to me as having been in the best of health two or three days before, when, in the course of play, they both received falls on the pavement, sufficiently severe to stop their play and make them go home and tell their parents. Within at any rate twelve hours they were seized with feverishness, etc. In both cases the pneumonia was well marked, but not severe.

FITZGERALD ISDELL, A.B., M.B.Dub.

Great St. Andrew Street, W.C.

REPORTS

ON

MEDICAL & SURGICAL PRACTICE IN THE HOSPITALS AND ASYLUMS OF GREAT BRITAIN, IRELAND, AND THE COLONIES.

ST. MARY'S HOSPITAL.

A DEATH UNDER CHLOROFORM.

(For the notes of this case we are indebted to Mr. H. COLLIER, Resident Obstetric Officer at St. Mary's Hospital.)

At a time when the relative merits of anæsthetics are being investigated, a record of the following fatal case will be of interest, especially because, in the opinion of all present, the death was the result of syncope, and not of respiratory failure, and because, though the state of the patient was instantly recognised and artificial respiration at once commenced, there was no real attempt at rallying.

J. T., a labour, aged 36, a well nourished man with a florid complexion, was admitted on October 11th, having a recent fracture of his left patella. It was decided to wash out the distended knee-joint, and to approximate the fragments with pins (Mayo Robson's method).

On October 15th the patient was taken to the theatre for this purpose. Auscultation of the heart showed no murmurs and good heart sounds, though the first was somewhat too clear. The patient appeared very nervous. Chloroform was given by me in a flannel inhaler, with plenty of air. During the early minutes he struggled a good deal, called out, and two or three times he held his breath momentarily. The pulse was at this time frequent and irregular in force, but the patient's colour was good, and there was no suspicion of danger. Suddenly, and just after a very short spasm of glottis and masseters, his temporal pulse ceased. Artificial respiration was immediately begun, injections of ether and strychnine were given, and faradism tried; and a superficial vein in the neck was opened. During the first half-minute of the artificial respiration there were three inspiratory gasps, but no other evidence of reaction. The heart ceased to act at about four or five minutes from the time of commencing the anæsthetic, and half a minute before death the conjunctival reflex was present. The pupils remained somewhat contracted during the whole period, and after death.

The *post-mortem* examination showed that the lungs were engorged, and that there was much fat under the epicardium. The right heart was distended with liquid blood, and the left heart empty. The substance was pale and friable, and the muscle fibres showed under the microscope advanced fatty degeneration. There was some early atheroma of the root of the aorta. The liver was very soft, but not markedly fatty. The kidneys were of normal size, the capsules adherent in part. There was some increase of intertubular tissue, and numerous fat globules were seen in the tubal epithelium.

NOTE BY MR. PAGE.—This patient was mine, and I should like to add one or two remarks. There was not the smallest suspicion of carelessness in the chloroform administration. Mr. Collier is a man of exceptional judgment and experience, and I would readily again entrust to him the administration of anæsthetics to my patients. Secondly, I had not at the time, nor have I now, the least doubt that the death in this case was due to sudden heart failure. Waiting to begin the operation, my eyes were upon him at the moment; the first sign of danger was seen, and instantly, without the shortest delay, I myself began artificial respiration. The three deep inspiratory gasps which followed were like the inspirations of the dying, and bore no likeness to

the breathing which comes in response to artificial respiration. I felt sure, and then remarked, that the man was dead, and there never was the trace even of a response to the various efforts at restoration which were kept up for half an hour. That danger under anæsthetics is much more frequent on the respiratory than on the cardiac side I feel little or no doubt, from my own experience and observation. I have long made it a practice at once to begin artificial respiration, and I am confident that in several instances—some of them most alarming—life has been saved in this way. I am convinced, however, that, as in this case, death may in rare instances be the result of heart failure. The observations of Dr. McWilliam show how this may arise,¹ but if in the main the results of experiment's point to respiratory rather than circulatory danger in the administration of chloroform, it should not be forgotten that there is all the difference in the world between a healthy rabbit and a diseased man, and that even in experiments the results might be occasionally different had the animals only been addicted to alcohol, and their hearts had become dilated, and soft and degenerated with fat.

WEST RIDING ASYLUM, WAKEFIELD.

FOLIE À DEUX—A CASE, WITH REMARKS.

(By EDWIN GOODALL, M.D.Lond., B.S., M.R.C.P., Pathologist and Assistant Medical Officer to the Asylum.)

M. V., male, aged 31, single, farmer; admitted on September 23rd, 1890. Mental disorder had existed for a period of one week. The earliest symptoms are said to have shown themselves "quite suddenly" one night. On going to bed he appeared to be in his ordinary state of mind, but in the middle of the night his sister was aroused by shouts proceeding from his room; she ran to him, and found him raving and gesticulating wildly. She hastened to rouse the nearest neighbours; on her way back she was met by her brother, who threw her down, and was endeavouring to strangle her when the neighbours arrived on the scene. Up to date of admission he was watched at home, and this sister was constantly with him.

On admission the mental state was found to be one of acute mania, characterised, however, by an unusual degree of fear; so that, though he was occasionally discovered whistling, laughing, and chattering inconsequently, at other times he showed great agitation, shouting "murder," "justice," and refusing food under the belief that it was poisoned. He appeared to hear threatening voices, and complained of bad tastes and smells, which he attributed to poison. Called those around him by strange names. Was restless and unclean.

On the 9th of the following month (October) the sister above-mentioned was admitted. According to the history received, she also became "suddenly" insane, and, curiously enough, the onset was much the same as in the brother's case. On the night of October 3rd she jumped out of bed, screaming and calling out for her brother; ever since she has remained excited and noisy. The further account (for which I am indebted to my colleague, Dr. Birt) describes her state of emotion on the outburst of disorder in her brother, when she received a great shock, and upon this she was heard to dwell on subsequent occasions. The account was furnished by a relative who stayed with her after her brother's removal. Her state on admission was one of simple acute mania.

With regard to the further history of these two persons, it may be said that the existence of insanity in the family was explicitly denied, as also were epilepsy and all other neuroses, phthisis, and intemperance, whether in patients or their relatives. The mother died some years after a "stroke," but, though hemiplegic, never gave evidence of mental disorder. Neither patient had previously been insane. The sister had lived with her brother constantly since the death of their parents. Their farm had been unprofitable, and the anxiety accruing was the only cause that could be assigned for the brother's attack.

It is only to be expected that each supposed case of folie à deux should be subjected to scrutiny, particularly by those who refuse to the term such an extensive application as is granted to it by certain authors, especially French; but I think that the above-described case may fairly come under this heading. *F. à deux*, as at present defined by French authors, includes *F. imposée*, *F. communiquée*, and *F. simultanée*. Now many writers are agreed that the distinction between the first two terms is unnecessary. This matter cannot be now entered into; but it may fairly be asked

¹ See BRITISH MEDICAL JOURNAL of October 18th, 1890, *et seq.*

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.

BRANCH MEETINGS TO BE HELD.

WORCESTERSHIRE AND HEREFORDSHIRE BRANCH.—A meeting of this Branch will be held at Hereford on Friday, November 21st. Members having papers to read are requested to communicate with the Honorary Secretary before November 14th.—**GEO. W. CROWE**, Honorary Secretary.

SOUTHERN BRANCH.—An ordinary meeting will be held at the Grosvenor Hotel, Queen's Gate, Southsea, on Thursday, November 13th. The chair will be taken by the President, Dr. A. M. Garrington, at 4.30 P.M. 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 will be provided at 6.30 P.M.; charge, 5s., exclusive of wine, etc.

METROPOLITAN COUNTIES BRANCH: EAST LONDON AND SOUTH ESSEX DISTRICT.—The next meeting will be held at the Hackney Town Hall on Thursday, November 20th, at 8.30 P.M. It will be devoted to papers, not exceeding ten minutes in length, by local practitioners. Members wishing to read papers will kindly communicate with the Honorary Secretary, Dr. J. W. HUNT, 101, Queen's Road, Dalston, N.E.

SOUTH-EASTERN BRANCH: EAST AND WEST KENT DISTRICTS.—A conjoint meeting of the above Districts will be held at the West Kent General Hospital, Maidstone, on Thursday, November 20th, at 3.30 P.M.; Mr. A. H. B. Hallowes, in the chair. Communications:—Mr. Malcolm Morris: Ringworm of the Scalp: its Nature and Treatment. Dr. T. Eastes: Anæmia of Adolescents. Mr. T. Raven: The Diagnosis of Scarlet Fever. The chairman will be pleased to receive members and visitors to lunch at his residence, 11, King Street, Maidstone, at 1.30 P.M. The dinner will take place at the Star Hotel, at 6 P.M.; charge 6s. 6d., exclusive of wine. To facilitate the arrangements, gentlemen who intend to dine are particularly requested to signify their intention to the chairman not later than November 18th. All members of the South-Eastern Branch are entitled to attend this meeting and to introduce professional friends. No conjoint meeting of these Districts having been held since 1884, it is earnestly hoped by the chairman and district secretaries that the proposed meeting will be largely attended.—**W. J. TYSON**, Langhorne Gardens, Folkestone; **A. W. NANKIVELL**, St. Bartholomew's Hospital, Chatham, Honorary Secretaries of the Districts.

SOUTH-EASTERN BRANCH: EAST SUSSEX DISTRICT.—The next meeting will be held at the Queen's Hotel, Eastbourne, on Thursday, November 20th, at 3.30 P.M., Mr. J. H. Ewart in the chair. Dinner at 5.30 P.M.; charge 6s., exclusive of wine. Dr. Adams will read a paper on Congenital Occlusion of the Urethra.—Notice of papers or cases should be sent to the Honorary Secretary, T. JENNER VERRALL, 97, Montpelier Road, Brighton.

LANCASHIRE AND CHESHIRE BRANCH.—The autumn meeting of this Branch will be held in the Assembly Room, Town Hall, Macclesfield, on Friday, November 14th, at 1.30 P.M. Agenda: Dr. R. R. Rentoul will read a paper on the Amended Midwives Registration Bill. Dr. Carter will present a Statement from the Parliamentary Bills Committee on the Amended Midwives Registration Bill, and lay a copy of the Bill before the meeting. Dr. Walter will show a patient from whom he removed a Kidney fixed in the hollow of the Sacrum. Mr. Taylor will exhibit a Uterus from a successful case of Cesarean Section, and remark on the case. Mr. Stanmore Bishop will read a paper on Modern Methods of Treatment in Morbus Coxæ, with demonstration of a new Cot. Dr. Kingsbury will read a paper on the Dangers of Hypnotism and How to Avoid Them, followed by a demonstration of Therapeutic Hypnotism. Dr. McNaught will read a paper on Acid Dyspepsia. Mr. Dambrell-Davies will read a communication on a case of Strangulated Hernia. Dr. Brooke will read a paper entitled a Modern Conception of Eczema. Luncheon.—A light luncheon, kindly provided by the members of the profession resident in Macclesfield and district, will be served in No. 1 Committee Room, Town Hall, from 12.30 to 1.30 P.M. Dinner.—Arrangements have been made for a dinner in the Town Hall at 5 P.M. Tickets, wine not included, 7s. 6d. each. As no more than fifty persons can be comfortably seated, it is specially requested that early applications be made for tickets.—**CHARLES ED. GLASCOTT**, Honorary Secretary, 23, St. John Street, Manchester.

OXFORD AND DISTRICT BRANCH.

A GENERAL meeting of this Branch was held on Friday, October 31st, at 3 P.M., in the Radcliffe Infirmary, Oxford, the PRESIDENT (Mr. Mallam) in the chair. Thirty members and four visitors were present.

The minutes of the last meeting were read and confirmed.

President's Address.—The PRESIDENT read an address on Work-

house Administration.—Mr. BAKER proposed, Dr. BATT seconded, and it was carried unanimously, "That a vote of thanks be given to the President for his able, interesting, and instructive address."

New Members.—Mr. E. Denning, M.R.C.S., L.R.C.P.E., of Stow-in-the-Wold, and Dr. Stark, of Oxford, were elected members of the Branch.

Cases.—Dr. BROOKS showed a case of Lymphadenoma.—Mr. SYMONDS showed a patient in whom an iliac Aneurysm had been successfully treated by compression of the abdominal aorta, an interesting feature in the case being that inflammation of the parotids followed. Mr. Symonds also showed a case of Compound Fracture of the Elbow-joint, cured with almost perfect movement.

Specimens.—Mr. WINKFIELD showed two pathological specimens—1. The Stomach in a case of Gastrotomy. 2. A large Cyst of the Broad Ligament, removed by operation.

Midwives Registration Bill.—It was carried "That this meeting approves of the Midwives Registration Bill as amended by the Council of the Association."

BATH AND BRISTOL BRANCH.

THE first ordinary meeting of the session was held at the Museum and Library, Bristol, on October 29th, A. B. BRABAZON, M.D., President, in the chair. There were present forty-five members.

New Members.—G. E. Bloxam, M.R.C.S., L.R.C.P.Lond., of Bath, was elected a member of the Branch.

Communications.—Dr. J. M. CLARKE read a paper on "Hysteria in the Male."—Drs. WEATHERLY and AUST LAWRENCE commented on the subject.—Dr. P. W. WILLIAMS read "Notes of a Case of Epithelioma of the Oesophagus with unusual Complications," and showed the specimen.—Remarks were made on the subject by Dr. WALDO, the PRESIDENT, and Mr. HARSANT.—Dr. J. G. SWAYNE read a paper on "A Case of Puerperal Convulsions," which gave rise to an interesting discussion in which Drs. AUST LAWRENCE, W. H. C. NEWNEAM, WALDO, C. ELLIOTT, J. M. CLARKE, the PRESIDENT, and Messrs. H. PRITCHETT and EWENS took part.

MIDLAND BRANCH: LINCOLNSHIRE DISTRICT.

A MEETING was held at the Guildhall, Boston, on October 23rd, at 3 P.M. Mr. PILCHER, President, in the chair.

New Members.—The following members of the Association were elected members of the Branch: Dr. H. H. Ashdown, Coningsby; Dr. W. B. Ransom, Nottingham; Dr. J. W. Travell, Nottingham; Mr. W. H. Smith, Boston.

Midwives Registration Bill.—This Bill, together with a statement thereon from the Chairman of the Parliamentary Bills Committee, was placed before the meeting, and the following resolution was unanimously passed: "That this meeting desires to express its perfect confidence in the action of the Parliamentary Bills Committee and leaves the matter of the Midwives Registration Bill in their hands."

Papers.—The following papers were read: The PRESIDENT, Remarks on some Recent Proposals for Medical Education.—Mr. SYMPSON, some Remarks on American Surgery.—Dr. ADAM, the Treatment of Diabetes.—Dr. NEWMAN, on the Points of Diagnosis between Acute Suppurations and Rheumatic Affections.—Dr. MANSEL SYMPSON, 1, Notes of a Case of Vitiligo with Photographs; 2, an Improved Tracheotomy Dilator.—Mr. TUXFORD, the Radical Cure of Hernia.

New Splint.—Dr. FREE showed a model of a splint for treating fractures and dislocations at the elbow-joint in the extended position with the hand prone, and photographs comparing the results of this method of treatment with those of the flexed position.

Luncheon.—Over 20 members sat down to luncheon in the Guildhall previous to the meeting.

Excursion.—Through the kindness of the President a large party went out in the morning by steamer to the Witham Outfall.

STIRLING, KINROSS, AND CLACKMANNAN BRANCH.

THE autumn meeting of this Branch was held in the Station Hotel, Stirling, on October 28th, at 3.15 P.M. Dr. LEWIS presided, and there were also present Drs. Linton, Macpherson, Galbraith, Peake, Mackintosh, Highet, and Skeen. The minutes of the last meeting were read and approved.

Midwives Registration Bill.—The SECRETARY read a letter from the General Secretary of the Association, enclosing a memorandum of the Parliamentary Bills Committee regarding the Midwives Registration Bill, as amended by the Select Committee. Upon the motion of Dr. PEAKE, seconded by Dr. LINTON, it was resolved

"that this Branch approves of the Midwives Registration Bill, as amended by the Select Committee."

Letter from Dr. Rentoul.—The SECRETARY read a circular letter from Dr. Rentoul, of Liverpool, containing suggested resolutions as to the educational standard of midwifery among medical students, the registration of midwives, and the increase of the number of direct representatives on the General Medical Council.—The letter was allowed to lie on the table on the understanding that the question of the increase of direct representation on the General Medical Council should come up at a future meeting for the consideration of the Branch.

Cortical Cell Degeneration in Insanity.—A microscopical demonstration of cortical cell degeneration in various forms of insanity was then given by Dr. MACPHERSON, who described in detail the different degenerations to which these cells were liable, and explained their microscopical characters, illustrating his remarks by numerous specimens.

Tubercle Bacillus.—Dr. MACKINTOSH exhibited specimens of the tubercle bacillus, prepared for the microscope by staining with carbol-fuchsin and methylene blue, and explained the method of preparation.

Vote of Thanks.—A vote of thanks to Drs. Macpherson and Mackintosh was proposed by Dr. LINTON, and cordially agreed to.

Notification of Infectious Diseases.—Dr. LEWIS read a paper on the Infectious Diseases Notification Act, 1889, and a discussion followed, in which Drs. PEAKE, LINTON, MACPHERSON and MACKINTOSH took part.

SPECIAL CORRESPONDENCE.

BIRMINGHAM.

Hospital Reform Inquiry.

ON October 29th Mr. Lawson Tait gave evidence. He condemned alike admission of patients to hospital by registration fee and by governors' letters—the former as keeping away the really deserving and suffering poor, the latter because patients were admitted for social reasons and not because of medical exigencies. In his hospital experience financial abuse was very exceptional, and he thought that instead of a preliminary inquiry as to the patient's means, it would be better to place the sole responsibility on the medical staff. At the Women's Hospital the Committee allowed the staff perfect liberty in the selection or rejection of all cases. He should be disposed to place all hospitals, so far as the in-patient departments were concerned, in such a position defined by statute that it should be practically impossible to obtain admission to a hospital save after the applicants had been filtered through a dispensary or an out-patient department. He should not be disposed to affiliate particular dispensaries to particular hospitals. The workhouse infirmary—a magnificent institution supported out of the public money—ought to be used for the public benefit, and its vast material should be made available for the medical school. In this infirmary the student would see a large number of cases which would be of more use to him than the bulk of those he saw in general or special hospitals. He considered it an advantage and altogether beneficial to have students in a hospital; they were the keenest possible critics, and their presence was a safeguard against abuses. It was undesirable for the in-patient staff of a hospital to be enlarged, because the experience value of the hospital practice would be correspondingly diminished. Mr. Tait then gave a history of the provident dispensary movement started in 1877. He described the difficulty there was in securing co-operation between the three existing medical charities, and how two branch dispensaries were opened about 1880. The two principal lines which should be observed in the working of the provident dispensaries were payment during health to provide for medical attendance during sickness, and the widest possible choice by the patient of medical attendants. After giving the reasons why he believed that this provident scheme had not been a success, he stated that a series of bogus provident dispensaries had been started by a syndicate of financiers in London, who made a handsome profit out of the low fees charged by supplying the most inferior drugs and employing medical labour of the lowest kind at starvation prices. It was extremely difficult to devise a test of fitness for membership, but he thought that perhaps the best standard would be the amount of rent a man paid.

Mr. Elvis, secretary of the Hockley Provident Dispensary, gave an account of the working of that institution. It was found that the system of choice of medical attendants by the patients did not answer, as the popularity of a doctor depended largely upon his surgery being in such a situation as to be easy of access to the patients. As a result of this, the rest of the staff became indifferent, and some of them actually joined other dispensaries in opposition to the provident, while themselves remaining on its staff. It was therefore determined to have a medical officer devoted entirely to the dispensary, and this system, which had been in operation for twelve months, had been a great success.

SHEFFIELD.

Smoke Abatement.—Middens or Water Carriage?—The Public Hospital and Dispensary.

REFERENCE has already been made to the action taken by the profession respecting the smoke nuisance. It is satisfactory to note the appreciation expressed of this action by members of the Town Council when the resolutions adopted at the recent meeting of the profession came before them. The resolutions were referred to the Health Committee, and expression was given to the feeling that the medical profession had conferred a great benefit on the public by the disinterested action they had taken. Allusion was also made to the assistance they had rendered the town in the important question of the water supply and its contamination with lead.

In his report the medical officer of health (Dr. Thomson) has strongly recommended the adoption of the water carriage system. He condemns severely the privy midden system, and says that extended acquaintance has "only strengthened his previously expressed opinions as to its disgustingly insanitary nature and its entire unsuitability for a densely populated district such as Sheffield." To such underground sloughs of filth, as these middens he asserts often are, he believes that even imperfectly managed waterclosets would be infinitely superior, and he sees no reason why, when once accustomed to waterclosets, the people of Sheffield will treat them more unintelligently than the inhabitants of other large towns. He thinks the question is ripe for solution. On the other side, it is urged that the plan would involve a very large expenditure, and that, even if it proved to be that best adapted to Sheffield, there are other matters, such as the water supply and the increased consumption, which will need consideration.

From the proceedings at the quarterly meeting of the governors of the Public Hospital and Dispensary on October 29th it would seem that good progress is being made as to the new buildings. The cost of the new out-patient department is to be generously defrayed by Mr. B. Wake, who has generously given over £600 for that purpose. It was believed that the residuary bequest by the late Miss Ray would turn out to be more than it was at first expected, amounting to between £10,000 and £11,000. More money will be needed to do all that is proposed.

CORRESPONDENCE.

SICK NURSING IN ASYLUMS.

SIR,—The remarks of Dr. Reginald Farrar on sick nursing in public asylums are not to be dealt with by the contemptuous contradictions of interested persons.

The nursing in asylums varies greatly; in some it is good, in a few very good, in many very defective. Speaking generally it is very far below the nursing in public hospitals; the nurses are drawn from an inferior class, and in very few asylums have the sick nurses had any special training.

In a very few asylums the nurses have systematic instruction from the medical staff, but even the members of the staff have in many cases seen little of general sick nursing after their student days.

Many superintendents openly repudiate trained nurses, on the grounds of an experience limited to a few pretentious and insubordinate women. The fact is, asylum superintendents have a hard task in this as in many other departments.

Women of a higher class, that is women of refined feelings and habits and of gentler and wider sympathies, have "taken up"

of the property, situated at Forest Hill, denied that there had been any misrepresentation, and counterclaimed for a year's rent of £34. The plaintiff's family, after being in the house for a short time, were attacked with scarlatina, and afterwards with diphtheria, of which one of the children died. Medical evidence attributed the diphtheria, if not also the scarlatina, to the insanitary state of the house, and this was found on investigation by the sanitary inspector to be due to the system of connecting the waste water pipes with the soil pipes. The defendant's case was that he did not, as alleged by the plaintiff, absolutely guarantee the house to be in a perfectly good sanitary condition, but only expressed his belief that it was in such a condition, and that he did so from the fact that no complaint was made by the previous tenant, and that the house was under the inspection of a competent builder. The jury found a verdict for the plaintiff for £35 on his claim, and also found for the plaintiff on the counterclaim. Judgment accordingly, with costs.

A NOMINAL PARTNER.

J. writes: A medical man, X., takes a qualified assistant, Y., at a fixed salary under a nominal partnership for one year. The nominal partnership consisted in both names being on each dooplate. There was no written agreement made and no premium paid. An equal partnership was to follow at the end of the first year. After nine months and a half X. dies suddenly. The practice is offered on reasonable terms to Y., but negotiations fail, Y. preferring to start on his own account. A qualified *locum tenens* is placed in charge of the practice by the administrators. Y. is requested to deliver up the visiting list by the administrators, but he refuses. Is Y. justified in so doing either by medical etiquette or law? What steps can be taken?

*. It does not appear upon what evidence the above statement is based. The agreement, it is said, is not in writing, and one of the parties to it is dead. What, then, is the proof? If the facts as stated could be clearly proved or are admitted by Y., he could, we think, be compelled to deliver up the visiting list. If, however, the relation of master and servant between X. and Y. could not be established, we are doubtful if legal proceedings would be productive of any good result. Cannot the matter be amicably arranged?

INDIA AND THE COLONIES.

INDIA.

THE *Indian Medical Gazette* for October states that a very large and influential committee has been appointed to carry out the scheme for the housing of homeless lepers in Bombay. The first subscription list published amounts to Rs.12,000, the list being headed by Lord Harris and Sir Dinshaw Petit with Rs.1,000 each.

THE Bombay Leper Fund now exceeds Rs.40,000. A further sum of Rs.20,000 is required.

A LEPROSY hospital was, on October 1st, opened by the Maharajah Sayajirao, Gaekwar of Baroda, at Ansuva, on the Nerbudda.

TETANUS NEONATORUM AT CALCUTTA.—Kadumbini Ganguli, a native medical woman, has addressed a letter to the health officer of Calcutta, in which she points out that nearly half the deaths among infants are due to tetanus, caused by the unhygienic condition of the lying-in room. She suggests that if a number of lying-in cottages were built on sound sanitary principles in different parts of the city they would be largely taken advantage of by the poorer classes. If this scheme is thought too costly she proposes that the commissioners should grant her Rs.200 a month for one year for the establishment of two cottages, one in the northern, the other in the southern part of the town, and a further sum of Rs.600 for the necessary equipment.

MEDICAL EDUCATION OF WOMEN.—Mr. Pestonjee Hormusjee Cama, founder of the Cama Hospital, has offered to the Bombay University a donation of Rs.25,000, in furtherance of the cause of female medical education, on the following conditions: Out of the interest of Rs.20,000 a scholarship is to be awarded every year, tenable for the whole course of study, to a Parsee, Hindu, or Mohamedan female student studying for a medical degree. Out of the interest on Rs.5,000 a gold medal is to be awarded to the female student who distinguishes herself most in surgery or midwifery.

NEW SOUTH WALES.

LEPROSY AMONG EUROPEANS.—Two additional cases of leprosy in white natives of New South Wales have recently been discovered, one in the Richmond River district in the person of a man, aged 28, the other in a boy of 14, who for some time previously had attended the Balmain public school. Both patients were sent to Sydney, and removed to the lepers' quarters at the Coast Hospital. There are now, as was recently stated, four European lepers segregated at the Leper Hospital for New South Wales. The Tirrani public school, in the Richmond River district, has been closed by direction of the Minister of Public Instruction, in consequence of reports that some of the children are develop-

ing symptoms of leprosy. A Leper Bill, legalising the detention of persons afflicted with leprosy, will shortly be introduced by the Government. At present there is no law empowering the removal from their homes and the confinement of lepers, and that such measures are at present adopted is due to the firmness and tact of Dr. Norton Manning, the medical adviser of the Government, and Dr. Ashburton Thompson, the Chief Inspector of the Board of Health.

THE MEDICAL BILL.—When the Medical Bill introduced into the Legislative Council of New South Wales came on for the second reading, it was, on the motion of the Hon. H. J. Tarrant, F.R.C.S., referred to a Select Committee, to be remodelled and in particular to be made more definite in its provisions. The members of this Committee are the Hon. Messrs. Bowker, Creed, Jacob, Mackellar, O'Connor, Pigott, F. B. Suttor, and W. H. Suttor. Dr. Bowker has been elected chairman.

NEW ZEALAND.

LEPROSY AMONG MAORI.—Dr. Ginders, of Rotorua, has been investigating the subject of leprosy among the Maories at Taupo and Rotorua. He has come to the conclusion that the disease known to the Taupo and east coast tribes as "ngerengere," to the Ngapuhi and northern tribes as "puhipuhi," and to the Wanganui and western tribes as "tuwhenua" are in fact one and the same disease, namely, leprosy. The opinion generally held by the Maories that the disease first appeared on the north island, at Hauraki, some time in the latter half of the seventeenth century may, Dr. Ginders thinks, be regarded as true. It was probably introduced by the "marooning" of a leper from a ship, possibly a whaler, near Hauraki. The term "wero ngerengere" denotes the art of communicating the disease by puncture or inoculation.

SOUTH AFRICA.

CAPE TOWN.—In continuation of a Government notice of September 12th, a memorandum is published in the *Government Gazette*, containing notes on small-pox, and how to prevent it from spreading; typhoid fever, its cause and prevention, with instructions for its management in the absence of medical aid; scarlet fever and measles, symptoms and directions for treatment in the absence of medical aid; and croup.

OBITUARY.

ROBERT BATH WYBRANTS, M.A.CANTAB, M.R.C.S.,
L.R.C.P.I.

ROBERT WYBRANTS died on October 24th at Wincanton, Somerset, aged 42, of tuberculosis. He was a son of the late Jonathan Wybrants, M.D., many years coroner for the Eastern Division of Somerset. He graduated at Cambridge at the early age of 19, and soon after went to Dublin. He became M.R.C.S. in 1871, and in 1873 was appointed House-Surgeon to the Coventry and Warwickshire Hospital, which office he held for two years. In 1875, he obtained the appointment of medical officer to the Wincanton Union Infirmary and District, and commenced practice. He was a good surgeon and a most bold and skilful operator, performing frequently and successfully operations not often undertaken by other than hospital surgeons. He was of a most kindly and generous disposition, and this and his jovial manner, and keen and ready wit, endeared him to a large circle of patients. He had apparently a bright future before him, but, owing to failing health, he was recently obliged to resign his appointments, and soon after suffered a chill while attending the funeral of a patient, which caused a rapid break up of his already enfeebled constitution. He was most assiduously and kindly attended during his last illness by Drs. Roe and Wood, of Wincanton.

UNIVERSITIES AND COLLEGES.

CAMBRIDGE.

ELECTION TO FELLOWSHIPS.—At St. John's College, on November 3rd, the following students of medicine were elected to Fellowships: Mr. L. E. Shore, M.A., M.B., B.C., Senior Demonstrator of Physiology in the University; and Mr. E. H. Hankin, B.A., George Henry Lewes Student in Physiology. Mr. Shore obtained a first-class in both parts of the Natural Science Tripos in 1884-85, and

Mr. Hankin the like distinction in 1888-89. Both were formerly students at St. Bartholomew's Hospital. Mr. Shore has since published papers on the Physiology of the Sense of Taste, the Transformation of Peptone, and the Influence of Peptone on Coagulation. Mr. Hankin has twice been awarded a grant by the Scientific Grants Committee of the British Medical Association, and his brilliant researches on Artificial Immunity and on Defensive Proteids have more than once been the subject of articles in the BRITISH MEDICAL JOURNAL.

MEDICAL EXAMINATION.—The Registry has issued the following scheme of dates with reference to the medical examinations this term:

		Names Sent In.	Final List of Candidates.	Certificates Received.	Examinn. Begins.
First M.B.	I	Nov. 19	Nov. 28	Nov. 27	Dec. 2
	II	" 19	" 29	" 28	" 3
Second M.B.	I	" 19	Dec. 4	Dec. 3	Dec. 8
	II	" 19	Nov. 28	Nov. 27	" 2
Third M.B.	I	" 26	Dec. 5	Dec. 4	" 9
	II	" 24	" 5	" 4	" 9
M.C.		" 26	" 9	" 8	" 12

BALFOUR STUDENTSHIP.—Mr. Walter Heape, M.A., of Trinity College, has been elected to the Balfour Studentship in Animal Morphology in succession to Mr. W. Bateson, Fellow of St. John's College.

CRANE'S CHARITY.—The distributors of Crane's Charity, who give grants for medical attendance and nursing to "poor scholars," meet on November 18th. Applications for aid are to be made through the College tutors.

SCHOLARSHIPS IN SCIENCE.—*Clare*: Scholarships of from £20 to £40 for one year; subjects, Chemistry, Physics, Elementary Biology, Botany, and Geology. Examination begins March 17th, 1891. Applications to be sent to the Senior Tutor by March 7th, 1891. *King's*: Scholarships of £20, and exhibitions of £70 to £10. Examination begins December 8th, 1890. Applications to be sent to the Reverend the Provost by December 1st, 1890. *Jesus*: Scholarships of £20 for two years. Examination begins December 9th. Apply to the Tutor.

EDINBURGH.

GENERAL COUNCIL.—The statutory half-yearly meeting of the General Council of the University of Edinburgh was held on Friday, October 31st; Principal Sir William Muir presided. The nature of the business before the Council was sufficiently indicated in the BRITISH MEDICAL JOURNAL of last week. To what then appeared in these columns there need only be added that the committee appointed for the consideration of communications to be made to the Universities Commissioners felt and urged the enormous importance of a well-organised system of teaching apart from the professoriate. It was a matter of detail afterwards to be arranged either by the Commission itself or by the University Court whether this extra teaching was to take the form of well-paid assistants with a perfectly definite status, or whether it was to be distinctly in competition with the professoriate; but it was essential that there should be an immense extension in all the Faculties of the system which has been found to work so well in the Medical Faculty, although even there the extension has been greatly limited in its scope. The Committee hoped that they would carry with them the approval of the various Faculties so as to give full weight to their suggestions to the Commission.

GLASGOW.

UNIVERSITY GENERAL COUNCIL.—The statutory half yearly meeting of the Glasgow University General Council was held on October 29th. Professor McKendrick was appointed Convener of the Business Committee. Dr. McVail's motion that the pathologist of the Western Infirmary for the time being should, *ex officio*, be Professor of Pathology in the University, and as such be a member of the Senate, and that this be a representation to the University Court, came up for discussion. Dr. McVail pointed out the disadvantages under which the Professor of Pathology would lie if he had not the command of the material of the *post-mortem* room of the infirmary. Dr. Hector Cameron thought that vesting the patronage of the Chair of Pathology in the managers of the Western Infirmary would lead to difficulties, and possibly to the suggestion that the pathologists of other infirmaries in Glasgow should also be eligible. Dr. Coats, while sympathising with Dr. McVail's object, expressed the opinion that his proposal was not a satisfactory one. The arrangements in Glasgow had led to the cultivation of pathological anatomy to the exclusion of experimental pathology and bacteriology; but when a Chair of Pathology was established care should be taken that both departments were included, and to provide a laboratory for experimental pathology as well as for pathological anatomy. On that

ground it was a mistake to consider that the pathologist to an infirmary was necessarily exactly the person to be Professor of Pathology. The office of pathologist should rather be linked to the professorship. The Committee, which had for so long acted in the endeavour to found a chair, had come to the conclusion that a Board of Curators should be appointed jointly by the University and infirmary, with whom should rest the appointment to the chair, and that the person appointed should be also pathologist to the infirmary. Dr. Coats thought also that the University and the infirmary should jointly make arrangements for the establishment and equipment of a laboratory. Finally, a motion was unanimously carried, "That the attention of the University Court be drawn to the position of the study of pathology in the University, and that the Court be respectfully asked to take steps by conferring with the managers of the Western Infirmary and otherwise, for the purpose of instituting a Chair of Pathology, and making any arrangements for a laboratory in connection therewith." It was subsequently, on the motion of Dr. E. Duncan, decided to represent to the University Commissioners that the diploma in public health should be abolished, and that a bachelorship and doctorate of science (in the department of public health) should be instituted, and that a lectureship in hygiene and public health should be founded in the University.

ROYAL COLLEGE OF PHYSICIANS OF LONDON.—The following candidates, having conformed to the by-laws and regulations, and passed the required examinations, have been admitted Licentiate of the College:

Alderson, F. H., Durham & Middlesex	Kirton, C. I., London
*Almas, W. E., Toronto	Knapp, G. H., Guy's
Anderson, R. W., University College	LeQueune, C. P., St. Bartholomew's
Andrew, H., St. Thomas's	Levick, G. D. B., Middlesex
Ash, A. B., Manchester	Littler, R. M., Manchester
Bale, W. B., Manchester	Lys, G., London
Bell, W. K., Charing Cross	Mantell, H. F., St. Mary's
*Bickerstaff, G. R., St. Mary's	Mason, H., Birmingham
Blindoss, A. H., St. Mary's and Cambridge	Mawson, S. F., Manchester
Brodie, T. G., King's College	Mole, H. F., Bristol
Bushnell, F. G., University College	Molson, J. E., Middlesex
Caley, H. A., St. Mary's	Monier-Williams, M.S.F., St. George's
Campbell, D. McD. L., St. Mary's	Morpheus, E. M., University College
Cardew, H. B., St. Bartholomew's	Morton, W. B., University College
Carney, A., St. Bartholomew's	Nelson, H. A. de B., St. Bartholomew's
Carstairs, H. J., St. Thomas's	Ohlmus, W. T., Ceylon
Charlton, F. J., University College	*Osborn, E. C., Westminster
Coles, C., St. Bartholomew's	*Panting, J., Cambridge & Middlesex
Colvin-Smith, R. C. M., St. George's and Cambridge	Pennell, T. L., University College
Cooper, C. D., University College	Pethick, C. S., St. Bartholomew's
Crocker, J. M., Leeds	Phillipotts, H. McD., St. Mary's
*Crompton, A., St. Bartholomew's	Pooler, H. W., Birmingham
Dent, L. W., King's College	Reilly, F. B., Charing Cross
Emlyn, C. W., St. Bartholomew's	Revill, G. L. H., Charing Cross
*Farr, F. W., Guy's	Richards, R. W., St. Bartholomew's
Fowler, C. H., St. Bartholomew's	Roberts, L., St. Bartholomew's
*Gaster, A., Bucharest	*Ryall, E. C., Westminster
Goddard, B., St. Thomas's	Sayres, A. W. F., St. Thomas's
Gossage, A. M., Oxford & Westminster	Scott, J. R., St. Thomas's
Griffith, W. S., St. Thomas's	*Shaw, J. H., Liverpool
Gummow, J. F., Charing Cross	Shortt, W. R., St. George's
Hall, J. B., Leeds	Smith, H. A., Guy's
Hamilton, R., Manchester	Stott, W. A., Leeds
Harper, J. R., St. Thomas's	*Stuart, R., St. George's
*Harris, F., Liverpool	Tempest, H., Leeds
Hawkes, C. S., London	Tizard, H. J., St. George's
Henning, T. I., Galway and St. Bartholomew's	Umney, W. F., St. Thomas's
*Henshaw, W. H., Manchester	Vernon, C. M., Bristol
*Hichens, W., London	Wainwright, L., London
Holt, R. H. E. G., St. Mary's	Walford, R. M. H., St. George's
Horsfield, W., Manchester	Walfredson, K. S., London
Hunter, G. Y. C., St. George's	*Wedgwood, W. B., King's College
Jackson, H. S., Bristol	Williams, A. J., King's College
John, H. W., Guy's	Wilson, J. G., London
Jones, D. J., Charing Cross	Winter, G. M., St. Mary's
Keats, W. J. C., St. Bartholomew's	Wood, G. E. M., University College
	Worley, Philip, Manchester
	Zeldan, S., St. Thomas's

* Candidates who have not presented themselves under the regulations of the Examining Board.

IS LEPROSY HEREDITARY?—The United States Consul in Venezuela states that in the island of Maracaibo, which serves as a leper colony, marriages are permitted amongst lepers. During the last fourteen or fifteen years there have been two births amongst the lepers. Neither child has shown any symptom of leprosy, and one of them, having lived to the age of fourteen in the Leper Island, has been allowed to leave and to enter society on the certificate of a competent board of inspectors that he is perfectly healthy.

MEDICAL NEWS.

Mr. HENRY E. CLARK has been elected Treasurer of the Glasgow Medico-Chirurgical Society.

A PHARMACEUTICAL chemist of Woronesh in Russia has been condemned to six months' imprisonment for selling adulterated quinine.

MR. T. B. BOLITHO, M.P., has intimated his intention of establishing a convalescent home in connection with the West Cornwall Dispensary.

DR. CHRISTIAN LUDWIG PRÆTORIUS, editor of the *Medizinisch-chirurgischen Centralblatt*, died suddenly of heart disease at Vienna on October 16th.

DR. DAHL, Director of the Medical Association of Christiania, who presided at the International Temperance Congress recently held in that city, is dead.

ACCORDING to the *St. Petersburger medicinische Wochenschrift*, the statutes of an Association of Female Medical Practitioners for Mutual Aid were confirmed on November 1st.

THE Council of the Russian Society for the Preservation of Public Health has arranged for the delivery of a series of popular lectures on hygiene in St. Petersburg during the present winter.

THE Duke of Westminster has expressed to the governors of the Chester Infirmary his intention of forwarding a cheque of £500, the proceeds of the charge made for admission to the hall and gardens at Eaton.

A COMPLIMENTARY banquet was recently given to Dr. J. G. Hall to celebrate his attainment of the jubilee of his practice as a surgeon in Swansea. There was a large gathering of his professional and other friends.

ARTHUR SMITH, a member of the Cobham Football Club, died at Kingston-on-Thames on November 3rd, from injuries received while playing in a football match against the Kingston Warriors on Saturday, November 1st.

DR. KOBERT, Ordinary Professor of Pharmacology in the University of Dorpat, has received the Order of St. Stanislaus, second class, from the Czar in recognition of the share he has taken in drawing up the new Russian Pharmacopœia.

A THIRD Medical Clinic has been established in the University of Vienna, of which Professor Leopold Schrötter von Kristelli has been appointed head, with the rank and title of Ordinary Professor of Special Medical Pathology and Therapy.

CAMBRIDGE PHILOSOPHICAL SOCIETY.—Dr. Alexander Hill, Master of Downing, University Lecturer in Advanced Anatomy, and Dr. A. Sheridan Lea, University Lecturer in Advanced Physiology, have been elected members of the Council of the Society.

THE annual presentation of prizes at the National Dental Hospital and College will take place on Friday, November 21st, on which occasion a dinner will be given by the medical officers and lecturers at the Holborn Restaurant, Dr. B. W. Richardson in the chair.

ASSOCIATION OF PUBLIC SANITARY INSPECTORS.—On Saturday, November 1st, Dr. B. W. Richardson, who has succeeded the late Sir E. Chadwick as President of the Association of Public Sanitary Inspectors, delivered his inaugural address on Sanitary Reformers at Carpenters' Hall, City.

MEDICAL DEFENCE UNION: METROPOLITAN DIVISION.—The annual meeting of this Division will take place at the offices of the British Medical Association on Thursday, November 13th, at P.M. Members of the profession interested in the objects of the Union are invited to attend.

THERE is to be, it is reported, a keen contest for the coronership, vacated by the death of Mr. Alderman George Thomas, of Carmarthen. Among the candidates are Mr. Lloyd, surgeon, Newcastle Emlyn, and Dr. W. Bowen-Jones, Carmarthen. The election is in the hands of the Carmarthenshire County Council.

MANCHESTER EDINBURGH UNIVERSITY CLUB.—The annual dinner of the Manchester Edinburgh University Club was held last week in the Queen's Hotel, Manchester. Dr. T. Lauder Brunton was invited as the guest of the club on this occasion, but he was unable to be present. Mr. Hardie, F.R.C.S., was elected President for the year.

HAY FEVER IN AMERICA.—Professor Samuel Lockwood, President of the Hay Fever Association, states that there are about 200,000 sufferers from hay fever in the United States. Cousin Jonathan is universally recognised as being *homo emunctæ naris*, and the fact just referred to would seem to show that there are physical as well as intellectual reasons for his being so.

INFIRMARY MEDICAL SUPERINTENDENTS' SOCIETY.—A meeting of this Society was held on Saturday, November 1st, at the Kensington Infirmary; Dr. T. Savill presiding. Under the guidance of Mr. Percy Potter, medical superintendent, the members inspected the admirable lying-in wards recently erected at the infirmary, and later discussed a number of interesting cases at present in the infirmary.

THE prize of one hundred dollars offered by the American Association for the Study and Cure of Inebriety for the best original essay on the pathological lesions of chronic alcoholism capable of microscopic demonstration has been awarded to Dr. P. F. Spaink, Baarn, Holland. An abstract of Dr. Spaink's paper was given in our columns in a report of a meeting of the English corresponding society recently.

THE National Health Society has organised a course of six lectures on Home Nursing, to commence on November 14th. The lectures, which will be accompanied by demonstrations, will be given in the new offices of the society, at 53, Berners Street. A course of lectures on Superior Cooking will commence on the same day at the Albert Institute, Windsor. Full particulars of both courses may be obtained from the secretary, at 53, Berners Street, W.

SMALL-POX IN FRANCE.—MM. Brouardel and Proust wish to see a law passed rendering revaccination compulsory. In Brittany small-pox epidemics are frequent and severe. In Finistère within the last few years there have been twenty outbreaks. In the Morbihan department small-pox is endemic; not only is revaccination unknown, but the vaccination of infants is neglected. Dr. Bourneville urges that revaccination should be made compulsory for medical students.

BIRMINGHAM TRADES COUNCIL AND THE GENERAL HOSPITAL.—The following resolution was moved at a recent meeting of the Birmingham Trades Council:—"That a committee be formed, consisting of members of this Council and other gentlemen, to be called 'The Proposed New General Hospital Committee,' with a view of issuing collecting sheets (or by any other means) to the working classes of Birmingham, so that this Trades Council can assist in a practical manner to carry out the conditions on which the late Miss Ryland made her munificent bequest."

EDINBURGH HEALTH SOCIETY.—The eleventh session of the Edinburgh Health Society was opened on Saturday evening, November 1st, with a lecture by Percy F. Frankland, Ph.D., B.Sc., Professor of Chemistry in Dundee University College, on "Our Invisible Friends and Foes, and how to Meet them." The lecture was illustrated by limelight views. Eight lectures, to which admission is free, will be given during the session. The second, on "Importance of Ideals of Health, Beauty, etc., towards Race Progress," will be delivered by Dr. Berry Haycraft on the evening of November 8th.

AN INSANITARY AREA IN SALFORD.—The death-rate of Manchester has long been an opprobrium to the city. The neighbouring Royal borough of Salford has made an excellent start—rather, is about to do so—in clearing away a large number of unhealthy dwellings. It was stated by the Chairman of the Health Committee that there were courts which would hardly do for the Zoological Gardens, much less for human beings. The scheme will cost about half a million before it is completed. In one block of this insanitary property the death-rate was 56 per 1,000, and in another it was actually 78 per 1,000.

At the annual dinner of the Bristol Medical School, on Saturday, November 1st, nearly 100 sat down to dinner, consisting of members of the staff and a very large number of old Bristol students and present members of the school. Mr. F. Richardson Cross was in the chair. "The Health of the Bristol Medical School, Royal Infirmary, and General Hospital," was proposed by Mr. Henry C. Burdett. Dr. Markham Skerrett responded for the Medical School, Dr. J. E. Shaw for the Royal Infirmary, and Dr. J. Michell Clarke replied for the General Hospital. "The Health of the President" was proposed by Dr. Swayne.

THE Royal Colleges of Physicians and of Surgeons and the Apothecaries' Society have recently decided to accept the certificates in operative surgery of the School of Anatomy and Physiology, directed by Mr. Thomas Cooke, 40, Brunswick Square, W.C. The school has already been recognised for this purpose by the University of London and by the War Office for several years. This further recognition by the three corporations in London will probably be a great convenience to many students in London, who, we understand, sometimes find considerable difficulty in obtaining the necessary facilities at their own schools.

At the recent annual meeting of the governors of Taunton and Somerset Hospital the following resolution was adopted: "That the governors accept with sincere regret the resignation of Dr. Kelly of his position as one of the honorary physicians of this hospital, and tender to him their grateful thanks for the skilful professional service which he has, during upwards of thirty years, gratuitously rendered, and for his able assistance as a member of the Hospital General Committee, and of the committee of the Victoria Jubilee Nursing Institute, and also for his kind and liberal pecuniary gifts in aid both of the hospital and the institute."

THE NURSING QUESTION IN PARIS.—Those opposed to the "laicisation" of the French hospitals have frequently asserted that the expense of nursing by lay attendants is greater than when sisters of charity had charge of the wards. The statistics given by Dr. Bourneville in the *Progrès Médical* show that, on the contrary, lay nursing is considerably less costly than religious. The fear that gifts and legacies to the Assistance Publique would be fewer under the lay system is also unfounded. During the eleven years preceding the laicisation, the Assistance Publique received from legacies and gifts an average annual sum of 1,659,183 francs, while from 1878 to 1889 the yearly average amounted to 3,898,766 francs.

EDINBURGH MEDICO-CHIRURGICAL SOCIETY.—The first ordinary meeting of the seventieth session of the Edinburgh Medico-Chirurgical Society was held on Wednesday, November 5th, when the following gentlemen were appointed office-bearers for the ensuing year:—*President*: Professor A. R. Simpson. *Vice-Presidents*: Dr. Brakenridge, Dr. P. H. MacLaren, Mr. A. G. Miller. *Councillors*: Dr. John Smith, Dr. Strachan, Dr. Alexander Bruce, Dr. George Hunter, Dr. David Menzies, Dr. J. H. Balfour, Dr. R. M. Johnston, Dr. R. H. Blackie. *Treasurer*: Dr. Francis Troup. *Secretaries*: Mr. F. M. Caird, Dr. Wm. Russell. *Editor of Transactions*: Dr. William Craig.

PREVENTION OF "BLACK EYES."—Practitioners who number many football players or members of the Pelican Club among their patients may be glad to know of the following remedy which an American contemporary vaunts as the "soverain thing on earth" for bruises of all kinds. The preparation consists of the tincture or a strong infusion of capsicum annuum, with an equal bulk of gum arabic, to which a few drops of glycerine are added. This should be painted over the injured surface with a camel's hair pencil and allowed to dry on, a second or third coating being applied as soon as the first one is dry. If this is done as soon as the injury is inflicted, we are assured that the blackening of the bruised tissue will "invariably" be prevented. The same remedy is recommended as having "no equal" in rheumatic stiff neck.

THE LATE PROFESSOR VOGEL.—Dr. Alfred Vogel, the well-known professor of children's diseases in the University of Munich, died on October 9th. He was born at Munich in 1823, and studied in the university of that city, and afterwards at Berlin and Würzburg. He began his career as a teacher at Munich, and in 1865 was appointed Professor of Children's Diseases at Dorpat, where he remained till 1886, when he was recalled to Munich. He was a most popular teacher, and his *Textbook of Children's Diseases*, the eighth edition of which is now in the press, made his name known throughout the medical world. He died, as the necropsy showed, of chronic partial aneurysm of the heart, there being a dilatation as large as a goose's egg at the apex and part of the front wall of the left ventricle.

"CONDENSED MILK."—Mr. W. Truster, of Robert Street, Oxford Street, was summoned on November 3rd, by the Vestry of St. George's, Hanover Square, for having sold a tin of condensed milk, labelled "Exhibition Brand" and "prepared in Lombardy," from

which, according to the certificate of the public analyst, at least 90 per cent. of the fat, or cream, had been abstracted. The label stated that the milk was pure, that it was of excellent quality, and that it was specially recommended for children and invalids, "a small portion only of the cream having been removed." In the course of the case it was pointed out that the directions for dilution given on the tin would, if followed, result in the production of a sugary liquid of very little value, and that injury to the health of infants and children depending for sustenance upon such a mixture would result by its regular use. Mr. Hannay, in giving his decision, said that certain defendants in Liverpool had been convicted of a similar offence. He did not, however, consider that the defendant in this case—Mr. Truster—had been personally guilty of fraud, although he had sold the article. He should have protected himself by a warranty from the wholesale dealers, and he would be fined £1 and costs.

BOTANICAL LABORATORIES AT UNIVERSITY COLLEGE, LONDON.—During the past long vacation the accommodation at the disposal of the botanical department in the University College, London, has been very greatly augmented. The laboratory in the north cloister has been entirely refitted, and serves admirably the double function of a museum and general elementary botanical laboratory; it affords accommodation for forty-five students. In the adjacent Birkbeck building a large room has been fitted up as an advanced laboratory. There is a room for physiological and chemical work, a dark chamber, and a private laboratory for the professor. By the construction of a conservatory on the roof, with appropriate heating apparatus, great facility is given for special work on the physiological properties of plants, as well as for the raising of seedlings and the cultivation of a few selected plants for lecture-room demonstration. In the carrying out of these improvements, in the botanical department, a generous use has been permitted by the trustees of the funds placed in their hands under the will of the late Richard Quain, F.R.S.; so that, as regards equipment and opportunity for study and research, botany can take its place beside the other branches of biology already so well provided for in the college.

AMBULANCE WORK AMONGST RAILWAY MEN.—Mrs. W. Birt (wife of the General Manager of the Great Eastern Railway) recently distributed a large number of certificates of the St. John Ambulance Association to *employés* of the Great Eastern Railway Company. The meeting was held in the Locomotive Works, Stratford, and was very numerously attended. Mr. Holden, Locomotive Superintendent, occupied the chair, and the Mayor of West Ham, Mr. W. Birt, and other gentlemen connected with the railway company were present. Previous to the distribution, a demonstration was given by the members of the Railway Ambulance Corps, wounded men being taken from the compartments and from beneath a railway carriage, and conveyed away in stretchers. The work was very smartly and efficiently done, and was highly commended by the officials of the St. John Ambulance Association who were present. At the conclusion of the meeting an illuminated address was presented to Dr. Louis Parkes (medical officer to the railway company), who had gratuitously given five courses of lectures and demonstrations at Stratford on behalf of the men who had attended his classes; and the honorary life membership of the St. John Ambulance Association was also conferred upon him. A similar honour was conferred by the Association upon Dr. Dickinson, of Stratford, who had rendered much valuable assistance to the railway ambulance classes.

MEDICAL VACANCIES.

The following Vacancies are announced:

APPLECROSS DISTRICT OF THE PARISH OF APPLECROSS.—Medical Officer and Vaccinator. Salary, £25 per annum, with free house and garden. Applications to Mr. D. Bain, Estate Manager, Applecross, Ross-shire, by November 10th.

BELGRAVE HOSPITAL FOR CHILDREN, 79, Gloucester Street, S.W.—Surgeon. Candidates must be Fellows of the Royal College of Surgeons of England. Application, endorsed on envelope "Surgeon," to the Honorary Secretary by November 15th.

BRISTOL DISPENSARY, Castle Green.—Two Members on the Medical Staff; double qualifications. Applications to the Secretary, Edward Stock (from whom full particulars as to salary, etc., can be obtained) by November 18th.

CAPE OF GOOD HOPE.—Bacteriologist, to investigate diseases of domestic animals, supposed to be caused by germs. Salary, £500 a year. Free first class passage. Applications, with copies of any scientific publications, to Charles Mills, Agent-General, Cape of Good Hope Government Agency, 112, Victoria Street, London, S.W., by November 15th.

CAPE OF GOOD HOPE.—Toxicologist, to attend forensic cases and investigate South African plants. Salary, £400 a year, and free first class passage. Applications, with copies of any scientific publications, to Charles Mills, Agent-General, Cape of Good Hope Government Agency, 112, Victoria Street, S.W., by November 15th.

CARNARVONSHIRE AND ANGLESEY INFIRMARY, Bangor.—House-Surgeon; double qualifications; must be acquainted with the Welsh language. Salary, £100 per annum, with board and lodging. Applications to the Secretary by November 15th.

COUNTY BOROUGH OF SOUTH SHIELDS.—Medical Officer of Health. Salary, £280, and £20 for attending patients at the Infectious Hospital. Must devote his whole time. Applications endorsed "Application for Appointment of Medical Officer of Health," to J. M. Moore, Clerk, 35, Market Place, South Shields, by November 24th.

DEVON AND EXETER HOSPITAL, Exeter.—House-Surgeon; double qualifications, unmarried. Salary, £120 per annum, increasing £10 per year up till £150, with board and lodging, not including alcoholic drinks and aerated waters. Applications to the Secretary, George A. Townsend, by November 22nd.

EDINBURGH DEAF AND DUMB INSTITUTION.—Oculist and Aurist. Applications up to December 1st to the Secretary, William Robertson, S.S.C., 14, Young Street, Edinburgh.

GLAMORGAN AND MONMOUTHSHIRE INFIRMARY, Cardiff.—Assistant House-Surgeon. Board, lodging, and washing provided. Applications to the Secretary, George T. Coleman, by November 11th.

GLASGOW MATERNITY HOSPITAL.—Assistant Obstetric Physician. Applications to the Secretary, Arthur Forbes, 145, Buchanan Street, Glasgow, by November 19th.

HER MAJESTY'S PRISON SERVICE.—Dispensers; must hold diploma of Pharmaceutical Society, aged 24 to 30. Salary, £120 per annum, rising £2 per annum to £140, with uniform, and medical attendance and medicines. Information to be obtained on personal application to the Governor of the nearest prison in England or Wales, or to the Governor, Her Majesty's Prison, Wandsworth.

LONDON COUNTY ASYLUM, Colney Hatch.—A Fifth Assistant Medical Officer; doubly qualified; aged 23 to 30. Salary, £120 per annum, rising to £150, with board, furnished apartments, and washing. Applications on the special forms by November 20th to R. W. Partridge, London Asylums Committee Office, 40, Craven Street, Strand, W.C.

LONDON HOSPITAL, Whitechapel Road, E.—Surgical Registrar; will be required to take part of the duties of out-patient department in the months of August and September, and also on emergency at other times. Salary, £100 per annum. Applications to the Secretary, G. Q. Roberts, by December 4th.

RADCLIFFE INFIRMARY, Oxford.—House-Surgeon. Salary, £80, with board, lodging, and washing; double qualifications. Appointment tenable for two years. Applications to the Secretary by November 14th.

ROYAL ORTHOPÆDIC AND SPINAL HOSPITAL, Birmingham.—Honorary Surgeon. Applications to E. J. Abbott, Honorary Secretary, 77, Colmore Row, Birmingham, by November 22nd.

UNIVERSITY COLLEGE, London.—Jodrell Professorship of Comparative Anatomy and Zoology. Applications to J. M. Horsburgh, M.A., Secretary, up to November 17th.

UNIVERSITY COLLEGE, London, Gower Street, W.C.—Curator of the Anatomical Museum. Salary, £150 per annum. Applications to J. M. Horsburgh, M.A., Secretary, by November 20th.

VICTORIA HOSPITAL FOR SICK CHILDREN, Chelsea.—Assistant-Surgeon in charge of out-patients. Fellows or Members R.C.S.Eng. Applications to Commander W. C. Blount, R.N., Secretary, by November 12th.

VICTORIA HOSPITAL FOR SICK CHILDREN, Chelsea.—Assistant-Physician. Fellows or Members of one of the British Colleges of Physicians. Applications to Commander W. C. Blount, R.N., Secretary, by November 12th.

VICTORIA UNIVERSITY, Manchester.—Examiners in Surgery, Obstetrics, Pathology, Forensic Medicine and Hygiene, Anatomy, and Physiology. Appointments for three years. Applications to A. T. Bentley, M.A., Registrar, by November 29th.

WESTERN DISPENSARY, Rochester Row, Westminster.—Resident Medical Officer, unmarried, double qualifications. Salary, 100 guineas per annum, with furnished apartments, coals, gas, and attendance. Applications, stating age, etc., to the Secretary by November 10th.

WILTS COUNTY ASYLUM.—Assistant Medical Officer, unmarried, and duly qualified and registered. Salary, £100 per annum, with board, residence, attendance, and washing. Applications, endorsed "A. M. O.," to the Medical Superintendent, Wilts County Asylum, Devizes, by November 11th.

MEDICAL APPOINTMENTS.

BRODIE, C. Gordon, F.R.C.S., L.R.C.P., appointed Assistant-Surgeon to the North-West London Hospital, Kentish Town Road, *vice* Chas. H. Jennings, resigned.

BRODIE, T. G., L.R.C.P., M.R.C.S., appointed Assistant House-Physician to King's College Hospital.

BUTLER-SMYTHE, A. C., F.R.C.S.Édin., appointed Surgeon to the Out-patient Department of the Samaritan Free Hospital for Women and Children, *vice* W. A. Meredith, M.B.

CARGILL, L. V., M.R.C.S., L.R.C.P., L.S.A., appointed House-Surgeon to King's College Hospital, *vice* F. W. Gunn, resigned.

CAVAN, John J., M.B. and C.M.Édin., appointed Assistant Medical Officer Roxburgh District Asylum, Melrose.

CHEPMELL, Charles, M.D.Brux., M.R.C.S.Eng., appointed Honorary Medical Officer to the Brighton, Hove, and Preston Dispensary.

COWAN, John J., M.B.Édin., appointed Assistant Medical Officer to the Roxburgh District Asylum, Melrose, *vice* Dr. A. F. C. Clark, resigned.

CUTFIELD, A., B.A.Camb., B.Sc.Lond., M.R.C.S., L.S.A., appointed Medical Officer for the Sollershop District of the Ross Union, *vice* Dr. Fernandez.

D'ARCY, Samuel Algernon, L. & L.M. K. & Q.C.P.I., L. & L.M. R.C.S.I., L.M. Rotunda, etc., ex-Assistant-Master National Lying-in Hospital, Dublin, appointed Medical Officer of Rosslea Dispensary District, Clones Union, and Medical Officer of Health of same district.

DAVIES, Albert Barnes, L.R.C.P.Lond., M.R.C.S.Eng., appointed Medical Officer for the Stroud District of the Stroud Union, *vice* C. Wethered, resigned.

DENT, L. W., M.R.C.S., L.R.C.P., appointed House Surgeon to King's College Hospital, *vice* R. H. Thomason, resigned.

DICKSON, Joseph Hy., M.B.Glasg., appointed Medical Officer to the Whitehaven and Preston District of the Whitehaven Union.

DISTIN, H., L.R.C.P., M.R.C.S., appointed House-Accoucheur to King's College Hospital, *vice* E. D. Rees, resigned.

DUNN, H., M.B., B.A., C.M., appointed Medical Officer to the North-West London Hospital, Kentish Town Road, *vice* J. M. Rees.

FOWLER, C. H., M.R.C.S.Eng., L.R.C.P.Lond., appointed Assistant Medical Officer to the North-West London Hospital, Kentish Town Road, *vice* H. Dunn.

GRAHAM, John Thomas, M.D.Glasg., M.R.C.S.Eng., appointed Medical Officer to the Perth County Council.

GORDON, Dr. William, appointed Physician to the Devon and Exeter Hospital, *vice* Dr. Shapter, resigned.

GREEN, Arthur, M.B., M.R.C.S., appointed Honorary Officer to the Gateshead Dispensary.

GREEN, Dr., appointed Assistant House-Surgeon to the Sheffield Public Hospital and Dispensary.

HARDY, Chas. Maurice, M.B.Durh., appointed Medical Officer for the Herghington District of the Darlington Union, *vice* J. G. Hardy, resigned.

HEATCOTE, B.A., M.B. and C.M.Aberd., appointed Medical Officer for the Sandal Magna District of the Wakefield Union, *vice* A. R. Steel.

HEWLETT, R. T., M.R.C.S., L.R.C.P., appointed House-Surgeon to King's College Hospital, *vice* H. L. Lack, resigned.

HOOPER, Gordon, L.D.S.R.C.S.E., appointed Consulting Dental Surgeon to the Bolingbroke House Pay Hospital, Wandsworth Common.

HUTTON, James Alfred, M.B., B.S., M.R.C.S., L.R.C.P., etc., appointed Junior Assistant House-Surgeon to the Sheffield Public Hospital and Dispensary, *vice* Dr. Green.

JACOMB-HOOD, Charles John, L.R.C.P.Lond., M.R.C.S.Eng., appointed Honorary Medical Officer to the Brighton, Hove, and Preston Dispensary.

JAPP, Dr. Fras. R., F.R.S., appointed Professor of Chemistry in the University of Aberdeen, *vice* Dr. Thomas Carnelley, deceased.

LACK, H. Lambert, M.R.C.S., L.R.C.P., appointed House-Surgeon to the Paddington Green Children's Hospital, *vice* Arthur S. Hanson, M.R.C.S., L.R.C.P.

LOWNDS, Henry Arthur, L.R.C.P. and L.R.C.S.Édin., appointed Medical Officer of Health for the Whitley Upper Urban Sanitary District of the Huddersfield Union.

MACARTNEY, Duncan, M.A.Édin., M.B.Glasg., D.P.H.Cantab., appointed Surgeon to the Dispensary of the Glasgow Western Infirmary, *vice* Mr. A. E. Maylard, M.B., B.S.Lond.

McELPATRICK, J., L.R.C.P., L.R.C.S.Édin., appointed Medical Officer for the First District and Workhouse of the Mere Union, *vice* Dr. M. M. Loudon.

MURPHY, W. E. C., M.R.Dub. and B.Ch., appointed Medical Officer of Health to the Llanfrehfa Urban Sanitary District of the Pontypool Union, *vice* R. Edmunds.

PARRY, William Harrop, M.B. and C.M. Glasg. Univ., appointed Resident House-Surgeon to the Flintshire Dispensary, *vice* Lewis Vaughan Parry.

PLAYFAIR, H. J. M., L.R.C.P., M.R.C.S., appointed Assistant House-Accoucheur to King's College Hospital.

RAMSAY, E. C. A., L.R.C.P.I., L.F.P.S.Glasg., appointed Medical Officer for the Fleetwood District of the Fylde Union, *vice* John A. Orr, deceased.

RANSOM, W. B., M.D., M.R.C.P., appointed Honorary Physician to the General Hospital, Nottingham, *vice* Dr. W. H. Ransom.

READ, Stanley, L.D.S.Eng., appointed House-Surgeon to the National Dental Hospital of London.

REES, E. D., L.R.C.P., L.S.A., appointed Ophthalmic Assistant to King's College Hospital, *vice* L. V. Cargill, resigned.

SANDIFER, H. S., L.R.C.P., M.R.C.S., appointed House-Physician to King's College Hospital, *vice* H. T. Hewlett, resigned.

SANTI, Philip R. W., F.R.C.S.Eng., appointed Demonstrator of Anatomy to the University of Durham College of Medicine, Newcastle-on-Tyne.

SCOTT, Richard Arthur, L.R.C.P. & S.E., appointed Medical Officer of Health for the Rural Sanitary District of the Pickering Union.

WATSON, W. R. K., M.A., M.B., C.M., appointed Assistant Medical Officer to the Lancashire County Asylum, Rainhill, *vice* R. A. Beaven, M.B., M.R.C.S.

WILLIAMS, H. H., L.R.C.P. and L.R.C.S.Édin., appointed Medical Officer for the 4th District of the Chipping Sodbury Union, *vice* R. W. Collett, resigned.

DIARY FOR NEXT WEEK.

MONDAY.

LONDON POST-GRADUATE COURSE, Royal London Ophthalmic Hospital, Moorfields, 1 P.M.—Mr. W. Lang: On External Diseases of the Eye. New Infirmary, Paddington, 4 P.M.—Mr. Frederick Treves: Clinical Lecture on Modern Surgical Procedure. 5 P.M.—Dr. Savill: Pathological Demonstration.

MEDICAL SOCIETY OF LONDON, 8.30 P.M.—Dr. Samuel West will open a discussion on the Relation of Asthma to Other Diseases.

TUESDAY.

LONDON POST-GRADUATE COURSE, Hospital for Diseases of the Skin, Blackfriars, 4.30 P.M.—Dr. Payne: On Impetigo and Contagious Suppuration.

ROYAL MEDICAL AND CHIRURGICAL SOCIETY, 8.30 P.M.—Dr. W. G. Spencer: Soot in Cells of Chimney-sweep's Cancer. Mr. A. Marmaduke Shield: Suppurative Affections of the Testicle and Epididymis.

WEDNESDAY.

LONDON POST-GRADUATE COURSE, Hospital for Consumption and Diseases of the Chest, Brompton, 4 P.M.—Dr. Percy Kidd: On Tubercular Affections of the Throat, with Laryngoscopic Demonstration. Royal London Ophthalmic Hospital, Moorfields, 8 P.M.—Mr. R. Marcus Gunn: Ophthalmoscopic Cases.

HUNTERIAN SOCIETY, 8 P.M.—Clinical Evening: Dr. A. T. Davies and Dr. R. Hington Fox: Cases of Incipient Graves's Disease. Mr. Mark Hovell: Cases of Papillomata of Larynx. Dr. F. J. Smith: Universal Shedding of Nails. Mr. F. R. Humphreys: Case of Raynaud's Disease. Mr. G. B. Stevens: Note of Case of Syphilitic Sore of Finger. Dr. F. J. Smith will show a case of Kaposi's Cutaneous Sarcomata of the Hands.

BRITISH GYNÆCOLOGICAL SOCIETY, 20, Hanover Square, 8 P.M.—Council. Ordinary Meeting, 8.30 P.M.—Dr. R. Smith: On a case of Tubercular Pelvic Abscess. Adjourned discussion on Mr. Jessett's paper on Some Points in the Surgery of the Intestines. Dr. Bantock: Specimens.

THURSDAY.

LONDON POST-GRADUATE COURSE, National Hospital for the Paralysed and the Epileptic, 2 P.M.—Dr. Bastian: Demonstration of Selected Cases. Hospital for Sick Children, Great Ormond Street, 4 P.M.—Dr. Octavius Sturges: On the Acute Lung Affections of Childhood.

OPHTHALMOLOGICAL SOCIETY OF THE UNITED KINGDOM, 8.30 P.M.—Patients and Card Specimens at 8 P.M.—Dr. Berry (Edinburgh): (1) Remarks on Operations for Ptosis; (2) On Convergence as Affected by Accommodation and Upward and Downward Positions of Fixation. Messrs. H. R. Swanzy and L. Werner: Peculiar Field of Vision in a case of Cerebral Disease. Mr. R. Williams: (1) Case of Hemianopsia; (2) Case of Alexia. Dr. Benson: Neuro-retinitis with High Tension simulating Intracocular Tumour. Card Specimens.—Mr. Frost: Recurrence of Sensation in Area of Supra- and Infra-orbital Nerves after Section. Messrs. Orichett and Juler: Epithelioma of Cornea. Mr. Stanford Morton: Detachment of Vitreous. Mr. Stephenson: Bifurcating Retinal Veins.

FRIDAY.

LONDON POST-GRADUATE COURSE, Hospital for Consumption and Diseases of the Chest, 4 P.M.—Dr. Percy Kidd: On Tubercular Affections of the Throat, with Laryngoscopic Demonstration.

CLINICAL SOCIETY OF LONDON, 8.30 P.M.—Dr. Edwin Harris: A Case of Aneurysm of the Arch of the Aorta, for which the left common carotid was tied. Dr. Bastian: (1) A case of Tubercular Meningitis in a man past middle age in whom no old Tubercular Focus was discovered; (2) a case of Tumor Cerebri with Incipient Tubercular Meningitis. Dr. Stephen Mackenzie: A case of Negro Lethargy or Sleeping Sickness, with exhibition of patient.

OPHTHALMOLOGICAL SOCIETY OF THE UNITED KINGDOM, 9 P.M.—Mr. J. W. Hulke, F.R.S.: Sketch of the part Sir W. Bowman has taken in the Advancement of Ophthalmology in this Country.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 5s. 6d., which sum should be forwarded in Post Office Order or Stamps with the notice not later than Wednesday Morning, in order to insure insertion in current issue.

MARRIAGES.

DUCKWORTH-FULLER.—On the 4th instant, at St. Peter's, Cranley Gardens, by the Rev. Canon Duckworth, D.D., the Rev. W. R. Lloyd, M.A., Vicar of Westcott, brother-in-law of the bride, and the Rev. R. A. C. Bevan, B.A., cousin of the bride, Sir Dyce Duckworth, M.D., LL.D., to Ada Emily, youngest daughter of G. Arthur Fuller, of the Rookery, near Dorking.

HINDE-EGERTON.—On October 28th, at the Parish Church, Bloxham, by the Rev. Vernon T. Green (Vicar of Littlemore, Oxon.), assisted by the Rev. F. S. Bolsair (Head Master of All Saints' School, Bloxham) and the Rev. G. F. Bullock (Vicar of King's Sutton), Francis Richard Berthon Hindle, M.D. Edin., M.R.C.S. Eng. (second surviving son of the late Major-General John Hindle, C.B.), to Ellen ("Nellie"), only child of the Rev. Philip Reginald Egerton (Warden of All Saints' School, Bloxham).

NEVILL-KNOX.—October 30th, at the Parish Church, New Ross, Ireland, W. N. Nevill, B.A., M.D., Southville, Bristol, to Amy, youngest daughter of John Knox, Esq., of New Ross.

ROWNEY-CURRIE.—On the 30th October, at the Parish Church, Windlesham, Surrey, Surgeon William Rowney, M.D., Army Medical Staff, Aldershot, to Kate Ffolliott Fendall, eldest daughter of Colonel Fendall Currie, Commissioner, Sitapur, India.

SCOTT-EVANS.—October 28th, at St. Peter's Church, Woolton, Liverpool, by the Rev. G. H. Spooner, M.A., Rector, assisted by the Rev. E. E. Roberts, B.A., Sidney Jebb Scott, B.A., M.B., of Woolton, elder son of William Scott, 16, Charleston Road, Rathmines, Dublin, to Kate, second daughter of the late Josiah Evans, J.P., of the Heyes, Haydock, Lancashire.

DEATH.

TURNBULL.—At Dunbar, on the 31st ult., James Turnbull, M.B., C.M., aged 36 years.

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, answers, and communications relating to subjects, to which special departments of the BRITISH MEDICAL JOURNAL are devoted, will be found under their respective headings.

QUERIES.

NIGHT BELL asks where he can procure a luminous plate for a night bell.

INSTITUTION FOR NEUROPATHIC PATIENTS.

W. H. writes: Can you inform me whether there is an institution in London or the country which would admit a case of locomotor ataxy in an advanced stage? Only a very small payment could be made.

* * Some nursing homes in London range from two or three guineas upwards a week, medical fees in addition; and some London hospitals private wards for paying patients, terms from three guineas a week, inclusive of attendance by the resident medical officer. Perhaps some of our readers know of permanent homes where the terms are lower.

STUDENTS' MICROSCOPES.

S. T. asks: What microscope or microscopes are most recommended at present for students of physiology and pathology?

* * * Our correspondent does not state what price he is prepared to give for a microscope. Expensive instruments are sold by Baker and Co., High Holborn, who are agents for Zeiss's objectives. Zeiss's objectives are also sold by E. Wanthack, 174, Charing Cross Road. For a student there are no better microscopes than those made by Beck, Cornhill; and Swift, Tottenham Court Road. Beck's Star microscope (£3 3s.) is an excellent instrument; Swift's are a little more expensive, but are better finished, and fulfil all the ordinary requirements of a physiologist or pathologist. The five-guinea microscope of this maker is fitted with a $\frac{3}{4}$ and $\frac{1}{2}$ objective. His £6 15s. microscope has a $\frac{3}{4}$ and a $\frac{1}{2}$.

ANSWERS.

A. B. C.—The diploma of F.R.C.P. is granted by co-optative election to consulting physicians only. We cannot undertake to appraise the relative value of degrees and diplomas.

CHLORAL ADDICTION.

B. should consult an experienced physician and frankly state the facts to him.

HOME FOR INVALID LADY.

MISS PRAKE, Lady Superintendent of the Victoria Home for Invalid Ladies, Broomfield Crescent, Headingley, Leeds, writes to say that the Home receives ladies of limited means who are disqualified for the duties of life by disease, accident, or deformity, and the charges range from 10s. to £1 a week.

DISINFECTION: CORROSIVE SUBLIMATE.

MICROBE.—Corrosive sublimate vaporises at a temperature of 295° C. An excessive heat is not likely to decompose the salt as the perchloride is very stable, but on this point further research is needed. Disinfection with sublimate vapour could be carried out in the same way as sulphur fumigation by placing a vessel containing the salt over a pan of live coals. It is not likely to be used practically in the disinfection of rooms owing to the very poisonous nature of the substance. It would be exceedingly dangerous for anyone to enter a closed room where the vapour of corrosive sublimate had been evolved in considerable quantities.

ULCERATIVE ENDOCARDITIS.

A MEMBER will find references to most papers upon ulcerative endocarditis in the Index Catalogue of the Library of the Surgeon-General's Office of the United States Army up to the date of appearance of the volume containing this subject, and subsequent papers are noted in the *Index Medicus*, both publications being edited by Dr. Billings. He will also find references to English papers in Dr. Neale's *Medical Digest*. Dr. Osler's Gulstonian Lectures on the subject, published in the BRITISH MEDICAL JOURNAL for 1885, vol. 1, p. 467

ERGOT IN LINGERING LABOUR.

DR. WILLIAM H. DAY (Norwich) writes: It is gratifying to find a man of Dr. More Madden's reputation and experience giving so confident an opinion as to the value of ergot in lingering labour, and to its harmlessness when administered with judgment. Neither Dr. Madden or any skilled obstetrician advises its use in obstructed labour; but where there is a roomy pelvis, a dilatable os, and simple inertia, I agree with him that ergot is an invaluable aid to the completion of labour, and in these cases its action is too active to be foeticidal. But its value, according to my experience, is still greater in those cases where heavy *post-partum* hemorrhage is habitual; over and again have I given it when I have had previous experience of this serious tendency, and been gratified by most successful results.

If consultants who compile textbooks had to undergo the tedious experiences of country practitioners, I think they would be tempted to give ergot a fair trial, and would probably find their opinion of its value considerably modified. I believe there is no preparation equal to the simple infusion, which will keep good for many days by the addition of a little chloric ether.

"PLUMBER AND PLUMBISM."

DR. C. E. GREY STALKART (Southsea) writes: My night bell rang alarmingly loud about 2 A.M. Starting out of a sound sleep, and inquiring through the speaking tube the reason thereof, and anticipating a summons to some urgent case, the following answer reached my ear: "Oh! doctor, doctor! my sister's burst. Will you come quickly?" "To what address?" asked I. "At General Nemo's, Lady Grove." Replying, "I'll be there as soon as possible," straightway I hasten to perform a scanty toilet; but ere time elapses sufficient to step into unmentionables, a furious ring reminds me of impatient anxiety at the delay. Rushing to the speaking tube, I hear, "Doctor, come quickly!" and answer, "Am coming; go on ahead." With but a decent toilet arranged, I hasten downstairs. Seizing hat and pocket case, as the thought arises, "What manner of case is this, and what shall I take with me," I hurry to the rescue, trusting to be yet in time to save the unfortunate one from the perils of a "burst" (whatever that may be). On reaching the door, husband and wife and servants are there to greet me with scared countenances, but my attention is arrested by observing a flood of water on all sides, water dripping rapidly through the roof of the entrance hall, and water running down the staircase. The silence is broken by, "Oh! doctor, I am sure you can stop this." Then a feeling of intense relief arises as it slowly dawns on the mind that "my sister's burst" is "my cistern's burst;" and a sensation akin to being April-fooled reigns but for a moment, when the answer given, "This is not quite in my line," brings forth the indignant retort, "Then you ought to know," and forces me to acquit my midnight disturbers of levity of conduct, and to acknowledge their genuineness of purpose in attributing to the doctor an infinite capability.

Oh! ye rising generation of "medicals," see that ye confine not your energies to studying "plumbism," but learn that henceforth it behoves you to make yourselves competent as plumbers! for ye know not the hour nor the day (let alone the night) when your talents may be called into requisition.

COMMUNICATIONS, LETTERS, etc., have been received from:

Mr. R. G. Naylor, Audlem; Mr. R. S. Jaynes, Hull; Dr. F. J. Hart, Much Wenlock; Dr. Campbell Pope, London; B.; Mr. F. W. Underhill, Moseley; Dr. J. Mackenzie, Burnley; Dr. R. Maguire, London; Mr. H. Heald, Ormskirk; Mr. Skene Keith, London; Dr. J. H. Hemming, Kimbolton; Mr. J. Lawrence-Hamilton, Brighton; Surgeon F. P. Nichols, Alderney; Mr. E. T. Thompson, Shipston-on-Stour; Mr. E. H. Ryan-Tenison, Bexhill-on-Sea; The Director-General of the Medical Department of the Navy, London; Mr. D. H. Thomas, Swansea; Mr. W. H. Day, Norwich; Dr. Fletcher Beach, Dartford; Dr. James Knox, Dunbar; Mr. L. Mark, London; A. B. C.; Punjab; Indian Medical Service; Dr. A. Money, London; Dr. G. Thin, London; Mr. H. Herbert, Aden; Mr. J. R. Whitaker, Edinburgh; Mr. A. Outfield, Moss; Dr. F. R. B. Hinde, Worcester; Dr. C. J. Lewis, Stirling; Mr. E. McKay, Portsmouth; Mr. P. H. Banks, Risleigh; Our Birmingham Correspondent; Our Paris Correspondent; Dr. C. J. Cullingworth, London; Dr. Richard Neale, London; Mr. H. Distin, London; Messrs. Ewart and Son, London; Mr. J. C. Johnstone, Melrose; Dr. A. M. McAlldowe, Stoke-upon-Trent; Dr. R. F. Starker, London; Mrs. E. L. West, Ipswich; Dr. M. Berdoe, London; Mr. H. Cooper, Newcastle; Mr. F. W. Smith, Folkestone; Mr. H. F. O. Eagle, London; Mr. Lawson Tait, Birmingham; Dr. O. Wood, London; Mr. S. Read, London; The Publishers of the *Argus*, Brighton; A. H. Rideal, M.B., Southborough; Dr. R. D. Batten, London; Dr. Campbell Black, Glasgow; A. C. Dutt, M.B., Scarborough; Enquirer; Dr. D. Bower, Bedford; Anti-junkerism; A Correspondent; Lieutenant-Colonel B. H. B. Kennett, London; Dr. Thomas Laffan, Cashel; Dr. W. W. Ireland, Prestonpans; Mr. Rolf Creary, Winslow; Mr. J. F. Palmer, London; Dr. Willoughby, London; Dr. W. L. Morgan, Oxford; Dr. W. Sykes, Mexborough; Mr. G. Hooper, London; Mr. G. P. Field, London; Mr. W. H. Michael, Q.C., Baden; Staff-Surgeon C. W. B. Hamilton, Exmouth; Surgeon S. G. Allen, London; Miss S. M. Lovegrove, Falmouth; Mr. G. E. May, London; L. I.; Mr. G. P. Adamson, Dublin; Messrs. Street and Co., London; Mr. J. M. Horsburgh, London; Dr. C. E. Hetherington, Londonderry; Mr. G. Light, London; Dr. E. M. Sympton, Lincoln; Mr. Edward Bellamy, London; Mr. S. A. d'Arcy, Dublin; Mr. E. Greenwood, London; Dr. P. McBride, Edinburgh; Dr. F. P. Wightwick, London; Dr. J. W. Cook, Colchester; Our Liverpool Correspondent; Mr. H. May, Ware; Mr. K. Roberts, London; Mr. W. Browne, Leeds; Mr. H. W. Allingham, London; Mr. C. B. Meller, Cowbridge; Dr. T. Oliver, Newcastle-on-Tyne; Mr. E. T. Collins, Cambridge; G. Michie, M.B., Scarborough; Dr. G. Thin, London; Mr. E. O'Brien,

London; D.M.A.; Antihumbbug; Dr. J. B. Maurice, Marlborough; Messrs. Lynch and Co., London; Our Vienna Correspondent; Messrs. Reynolds and Branson, Leeds; Mr. J. Brindley James, London; Dr. John Hurley, Queen Camel; Mr. A. H. Robinson, London; Dr. Leslie Phillips, Birmingham; Dr. D. C. Junk, Manchester; D. Macartney, M.B., Partick; Mr. J. T. Jones, Hull; Dr. J. M. Ross, Edinburgh; Miss A. Maconnell, London; Dr. W. H. Fenton, London; Mr. J. J. Langton, Sittingbourne; Dr. C. H. Catt's, Nottingham; Messrs. W. and C. Davis, Brighton; Dr. Ralph, London; Mr. H. W. Mackenzie, Shoreham; Dr. J. W. Byers, Belfast; The Secretary of the University of Cambridge; Mr. G. Q. Roberts, London; Mr. R. Bevan, Lydd; Dr. R. J. H. Scott, Bath; Dr. C. E. Paget, Salford; Mr. T. E. Williams, Brecon; Our Manchester Correspondent; Dr. J. Anderson, Ulverston; Dr. Oppenheimer, Berlin; Dr. Philip, Edinburgh; Mr. B. Walker, Kirkby Stephen; Surgeon-General Hassard, Dublin; An Old Subscriber; Mr. C. A. Balance, London; Dr. W. A. Cox, Sutton; Mr. W. H. McFadyen, Lochinver; Mr. W. H. F. Young, Wimbledon; Mr. C. Richardson, Leeds; Mr. W. Blair, Jedburgh; Dr. D. M. Serjeant, London; Mr. A. W. Nankivell, Chatham; Mr. John Poland, London; Dr. Clifford Allbutt, London; Dr. James Maughan, London; Mr. Adams Frost, London; Messrs. W. B. Hilliard and Sons, Glasgow; Dr. L. Parkes, London; Mr. S. Gurnley, Greenwich; J. W. Reddie, M.B., Culross; Mr. C. E. D. Maille, Dedham; Dr. Beddoes, Aberystwith; Mr. F. H. Hudson, Clifton; Dr. E. Haughton, Upper Norwood; Dr. A. Anderson, Mirfield; Mr. J. Richardson, Dunbar; The Medical Director West Riding Asylum, Wakefield; L.R.C.P.; Mr. Thomas Cook, London; Messrs. Street and Co., London; Mr. E. Child, New Malden; etc.

BOOKS, ETC., RECEIVED.

- Epidemics: their Origin and Prevention. By J. Foster Palmer, L.R.C.P. London: Cousins and Co. 1890.
The Secret of the Old House. By Evelyn Everett-Green. London: Blackie and Son. 1890.
A Rash Promise. By Cecilia Selby Lowndes. London: Blackie and Son. 1891.
By England's Aid; or the Freeing of the Netherlands. By G. A. Henty. London: Blackie and Son. 1891.
A Chapter of Adventures. By G. A. Henty. London: Blackie and Son. 1890.
A Rough Shaking. By George Macdonald. London: Blackie and Son. 1890.
Twist School and College. By Gordon Stables, C.M., M.D., R.N. London: Blackie and Son. 1890.
A Handbook of the Diseases of the Eye, and Their Treatment. By Henry R. Swanzy, A.M., M.B. Third edition. London: H. K. Lewis. 1890.
Proceedings of the Staffordshire Branch of the British Medical Association 1874 to 1890. Stoke-upon-Trent: J. G. Fenn. 1890.
Golden Bullets; a Story in the Days of Akbar and Elizabeth. By W. W. Ireland, M.D. Edinburgh: Bell and Bradfute. 1890.
The Dignity of Woman's Health, and the Nemesis of its Neglect. By Robert Reid Rentoul, M.D. London: J. and A. Churchill. 1890.
Transactions of the Association of American Physicians. Vol. V. Philadelphia: Published by the Association. 1890.
The Bath Thermal Waters and Treatment. By T. Pagan Lowe, M.R.C.S.Eng., L.R.C.P.Ed. With Historical Notes by Herbert Bentley Freeman, M.A. London: Simpkin, Marshall, and Co. 1890.
Stammering: its Treatment. By B. Beasley. Twelfth edition. Birmingham: Hudson and Son. 1890.
A Synopsis of Diseases of the Skin and Hair. By R. Glasgow Patteson, M.B. London: Baillière, Tindall, and Cox. 1891.

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