

Indian thread, offers a good substitute, and can easily be obtained in any quantity. The disposition of these fibres is parallel, and it is one of the strongest structures of the body; they are taken from the freshly killed animal, sun dried, and kept dry until prepared for use. I have tried many methods, but prefer, on the whole, that of Sir Joseph Lister.

It should be our purpose to occlude the vessel, and not necrose the tissues constricted. This I believe to be a common fault in the ligation of vessels. The vitalisation of the surrounding parts should be disturbed as little as possible; the wound should be kept aseptic; it should be closed layer by layer with buried tendon suture, and then sealed with iodoform collodion. This enables us to do away with the drainage tube, which in aseptic wounds must be now considered not only unnecessary, but positively detrimental, and even an element of danger. The wound closed with a germ proof dressing is safe in any surroundings, does away with clumsy and troublesome dressings, and, if aseptic, will undergo rapid primary repair. Leucocytes are rapidly effused and bury the ligature, little by little; these are transformed into connective tissue cells, and become vascular. The ligature is slowly infiltrated by them, and itself replaced by living cells—a vitalised constricting band. These processes are not so very unlike the changes which ensue in the repair of fracture of the long bones. It may safely be determined that in such a wound secondary hæmorrhage never occurs. When this takes place there has been an arrest of the reparative processes, usually by bacterial development. When the wound has become septic, and ulceration or breaking down of the tissues follows, causing hæmorrhage, it is very unwise to attempt a secondary ligature in the wound, since the elements which caused the hæmorrhage are ever present to produce its repetition. It is better to ligate in healthy structures higher up with all possible aseptic care, and, if these conditions are maintained, there is every reason to expect a good result.

In Mr. Holmes's review of the subject he has quite overlooked a number of diligent students and honoured original observers who laboured in the elucidation of this problem in America, at the same early period as Hunter, Cooper, Jones, and Lawrence. Dr. Jameison, of Baltimore, a most distinguished surgeon, published a detailed account of experimental studies upon animals with the buried animal ligature as early as 1827. To this essay a prize was awarded by one of our learned societies. The material used was thin flat strips of buckskin, tanned after the Indian method. His work, for acumen and discriminating judgment, challenges admiration even to the present time. Drs. Physick and Dorsey, of Philadelphia, used such ligatures with the best results, as also most of the leading surgeons of the time in America. Dr. McDowell tied the pedicle in his first case of ovariectomy with a buckskin ligature, and closed the wound. Sir Astley Cooper also used them with satisfaction, and wrote approvingly of their value. In the hot discussion of the subsequent years, over the then great unknown problem of infection, under the various names of irritation, inflammation, etc.—terms which covered ignorance and buried yet deeper from sight the true factors of wound treatment—this good work was forgotten, only now to be reviewed in a clearer light, teaching with emphasis that science is only pure and single truth, and that facts, well substantiated, are ultimately never to be lost in the progress of the ages.

VII.—PROFESSOR C. T. PARKES, M.D.,

Chicago.

I DEEM it a great honour to be called upon to make any remarks upon this occasion. My natural modesty would lead me to say nothing whatever, but I am constrained to set it aside because I see about me a large number of my American friends, as, well do I know, that it is usual for us to be happily supported by our friends in England. I have been very much edified and instructed by listening to the remarks of Mr. Holmes, and that is natural, for everyone is interested by every word he utters or writes. I must admit that the profession in general are not at one as to the material to be used. My practical experience has shown me that it makes very little difference what kind of material, either silk or catgut, is made use of so that suppuration is avoided. Certainly we must all agree with Mr. Holmes that the manner of performing the operation should be such as to avoid irritation of the artery and lesions at the site of the ligature. This I certainly believe, and hence agree with the proposition that a single ligature is the best procedure.

VIII.—AUGUSTIN PRICHARD, F.R.C.S., Consulting Surgeon Bristol Royal Infirmary.

MR. AUGUSTIN PRICHARD stated that his experience was antique before the time of antiseptics and catgut ligatures. It was satisfactory to agree with other speakers as to the safety of ligature of the femoral artery for popliteal aneurysm. All his own operations had been with a silk ligature, and had all been successful, although suppuration occurred in many.

IX.—T. H. BARTLEET, F.R.C.S., Surgeon Birmingham General Hospital.

MR. T. H. BARTLEET confined himself to the treatment of secondary hæmorrhage from large trunks after ligature. He said this could only be a matter of experience, and could not be settled by theorising. Mr. Bartleet alluded to the opinions of well-known surgeons, and said that he was opposed to the views of many surgeons who consider that amputation of the thigh was the best treatment. Mr. Bartleet detailed two cases in which he had ligatured the external iliac artery when placed in what the late Sir William Fergusson called the "eventful dilemma" of secondary hæmorrhage after ligature of the femoral. In each case the operation resulted successfully, and Mr. Bartleet hoped they might in some small degree tend to modify the expressed opinion of some surgeons that ligature of the external iliac for secondary hæmorrhage was a useless operation.

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

INCISED WOUND OF THE KNEE-JOINT WITH TRANSVERSE DIVISION OF THE PATELLA—RECOVERY WITH PERFECT USE OF JOINT.

D. S., aged 5, on April 9th fell on some sharp shingle on the beach under the Plymouth Hoe. She was seen soon after the accident by Dr. Wey, who found that she had a clean incised transverse wound over the right knee-joint extending from the outer condyle over the front of the joint about four inches, opening the joint freely and exposing the right condyle. In addition to this wound the patella was completely divided transversely, as if it had been cut through with a knife. The case was seen at the child's residence by me on the same afternoon. The child was placed under the influence of methylene, and the wound thoroughly washed out with carbolic solution. The patella was then drilled in three places and securely wired together. A few vessels were ligatured with fine chromic gut, and the edges of the wound accurately brought together with carbolic silk. A drainage tube was inserted, and the limb, dressed with carbolic gauze, was placed on a back splint. The child suffered no pain after the operation.

April 10th. Slight discharge having come through the dressings the limb was redressed; temperature, 99.6°.

April 19th. The wound dressed and sutures and drain tube removed. Normal temperature daily.

May 5th. Wound again dressed. Slight discharge from the surface. All the dressed parts healed. One of the silver sutures presented on the surface of the wound, and was removed. The limb was now placed in a poroplastic splint, and the patient allowed to walk about.

July 15th. Passive motion has been used for some time. The joint is now flexible and the patient in all respects well.

PAUL SWAIN, F.R.C.S.,
Surgeon South Devon and East Cornwall Hospital.

CYANIDE OF POTASSIUM POISONING.

J.R., aged 32 years, photographer, took cyanide of potassium, between the hours of 12 A.M. and 2 P.M., on October 9th. I made the *post-mortem* examination at 10 P.M. on the same day. The following notes of the case may prove of interest:

The skin was pale, except the sides and back, which were livid; there was much frothy mucus escaping from the mouth, and on wiping the froth away I found the lower lip red and corroded; the mucous membrane inside the mouth was white, and easily stripped off. The hands were clenched, and the finger nails of a deep blue colour; the toe nails presented a similar appearance.

On removal of the skull cap, the dura mater was found adherent to the arachnoid; the membranes and surface of the brain were deeply congested; on section, a few minute red points were observed. The right side of the heart was found dilated, and contained dark blue clotted blood; the left side was contracted, and practically empty. There was a large deposit of fat; otherwise the heart was normal.

The lump, on removal, presented a dark, congested, and mottled appearance. On section, frothy exudation followed; the lung tissue was crepitant all over; there was no disease of the lungs.

The peritoneal surface of the stomach was of a claret colour; on cutting the organ open it was found empty; the mucous membrane was thickened and congested in patches, especially towards the pyloric end; these patches were observed at intervals almost throughout the small intestine. The liver weighed $7\frac{1}{2}$ pounds. The kidneys were enlarged. The remaining organs were normal. The washing of the stomach presented the usual tests from cyanides.

REMARKS.—Cases of poisoning by cyanide of potassium are of rare occurrence. The salt was used largely by photographers, and the few cases of poisoning which have occurred have done so in connection with this trade; it was so in this case. The salt is usually adulterated with carbonate of potash—probably this caused the signs of corrosive poisoning—whilst the cyanide of potassium itself was the immediate cause of death by paralysing the respiratory centre.

There was a history of alcoholism of two years' duration; this intensified the congestion of the membranes of the brain, and would also account for the enlarged state of the liver, and disease of the kidneys.

FREDK. A. HESLOP, L.R.C.P., L.R.C.S. Ed.
Police Surgeon, Blackpool.

NEURALGIA IN ADDISON'S DISEASE.

On July 6th I was called to see a young man, aged 19, suffering from severe headache. The pain was limited to the area supplied by the left supraorbital nerve. He also complained of nausea and slight pain in the lumbar muscles. Cardiac area normal. First sound weak at aortic cartilage. Pulse 65; temperature 98.6°. Lungs normal. Liver and spleen dullness normal. No abdominal tenderness. Urine contained no albumen nor sugar, casts nor corpuscles. Next day the lumbar pain was better, but the neuralgia persisted. On the 8th, at 9 A.M., his mother said he had been in "an agony of pain all night with his head." Morphine was given hypodermically. Stupor soon set in, and at 8 P.M. deepened into coma. He died at 3 A.M. the following day. There was slight twitching of the fingers of the left hand, also of the eyes to the left. Twelve hours before death he vomited a "green stinking stuff," which was thrown away without my having seen it. The temperature rose to 103° just before he died, and the pulse ran up to 130. I was fortunate enough to get a *post-mortem* examination. This I performed, in the presence of two medical men, twelve hours after the lad's death. The left suprarenal was adherent to the cardiac end of the stomach, and on opening the latter a perforation, the size of a shilling, was found, establishing a connection between the cavity of the stomach and a vomica in the left adrenal. The peritoneum was normal. The right suprarenal was advanced in tubercular degeneration, and, like its fellow, contained cheesy pus. All the other organs were healthy.

The case is of interest on account of the neuralgia being the only symptom the patient complained of. The skin was muddy, but presented no signs of bronzing. In the right eye there were traces of an interstitial keratitis, which came, his mother said, when he was two years old. For about nine months before his death he had wasted, sweated at night, and complained of general weakness. In May last he fainted while a poultice was being put on a festering finger. There was no history of consumption in the family. His neuralgia was treated with *sod. salicyl.*, *pot. brom.*, *cannabis indica*, *tonga*, and morphine, but to no effect. It commenced in the left supraorbital region, and thence spread over the whole scalp and forehead. The case was a difficult one to diagnose. Though the wasting and night-sweats indicated tubercle, the supraorbital neuralgia was the only guide to its seat.

Regent's Park, N.W.

JAMES MAUGHAN, M.D. Brux.

HYSTERICAL FACIAL PARALYSIS.

MRS. R., aged 37, who had been under my care for some time for retroversion of the uterus and erosion of the os, sent an urgent

message for me one morning, requesting my immediate attendance, as she had been taken suddenly ill.

Upon my arrival, I found her greatly excited, with paralysis of the muscles of expression on the right side. Her mouth was drawn to one side, more especially if she attempted to talk or smile. There was oedema of the lower eyelid and inability to close the eye completely or to form the mouth as in the act of whistling. Her speech was thick and indistinct. She told me she went to bed the night before in her usual health, and on waking up early in the morning was alarmed to feel her face "twisted," as she expressed it, and a difficulty in talking.

I diagnosed the case as one of hysterical facial paralysis, by my previous knowledge of the woman's history and the absence of any other symptoms indicating either extravasation of blood within the skull or direct implication of the portio dura. The subsequent rapid disappearance of the paralysis helped to confirm my diagnosis. The treatment consisted of a brisk purge, followed by large doses of the bromide of potash. By the end of the third day the paralysis had completely disappeared, the face regained its normal expression, and the speech was quite clear and distinct.

As I have seen very few cases of hysterical facial paralysis recorded, and as indicating the apparently serious symptoms occasionally appearing in hysterical cases, I consider the case sufficiently interesting for insertion in the *BRITISH MEDICAL JOURNAL*.
L. GORDON LAWSON, L.R.C.P. & S. Edin.
Jemima-ville, Invergordon, N.B.

REPORTS

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

GENERAL INFIRMARY, LEEDS.

CASES OF ATROPINE POISONING IN IRITIS.

(Under the care of JOHN NUNNELBY, M.B. Lond., M.R.C.S., Senior Ophthalmic Surgeon to the Infirmary.)

[Reported by J. G. McCANDLISH, L.R.C.P., L.R.C.S. Edin., Senior House-Surgeon.]

In the cases given below—both of iritis—besides the general signs and symptoms of atropine poisoning, as thirst, nausea, dryness of throat, etc., there was in the one case low muttering delirium, in the other noisy and violent, showing, no doubt, the second and third stages of atropine poisoning. However, a better idea will be obtained by giving the cases almost verbatim from the notes.

CASE I.—H. S., aged 43, an upholsterer, was admitted on September 16th, 1890, suffering from iritis in the right eye. All the usual signs and symptoms of iritis in a subacute form were present; adhesions having taken place, the following treatment was adopted: *Guttæ atropiæ fort.* (gr. iv ad $\bar{3}$) alt. hor. seq.; artificial leech daily. On the following day the atropine was instilled every four hours.

On September 18th the patient had slight, low, muttering delirium, with lucid intervals, during which he complained of thirst, sickness, and a feeling of suffocation. The skin was harsh, dry, and hot. During the day the delirium was quite complete but never noisy; in the evening, however, the patient appeared much quieter and the incessant chattering had ceased. The iris was now in the same condition as on admission, but with no photophobia and very little pain. The acute inflammation had almost disappeared.

September 19th. During the night the skin began to act and the patient's body was covered with profuse perspiration. He slept well for about four hours, and the delirium had quite gone when seen two hours afterwards.

September 20th. Atropine resumed; no return of delirium.

September 21st. As the adhesions had not at any time shown signs of breaking down with atropine, it was replaced by eserine.

CASE II.—G. W., aged 66, a labourer, was admitted on September 26th, 1890, suffering from acute iritis in the left eye. Twelve months ago the right eye was extirpated for injury; three months ago the patient had an artificial eye fitted. Soon after this he had pain, headache, and some photophobia. The treatment was as follows:

THE HISTORY OF THE MICROSCOPE.

THE first meeting of the present session of the Scottish Microscopical Society was held in Edinburgh on Friday, November 7th, when Professor Rutherford, F.R.S., the President for the present session, delivered an address on the Tercentenary of the Compound Microscope. After emphasising the important part the instrument had played in scientific research, he dwelt on its early history. Although the origin of the simple microscope was obscure, the compound microscope dated from 1590, as nearly as could be ascertained. The telescope was invented some eighteen years later, both of them in Holland. After referring to the work of Hooke and Martin, he dwelt in some detail on Dollond's experiments on the refraction and dispersion of light, his discovery of the disparity between refraction and dispersion in crown and flint glass, and his invention of achromatic lenses, in which spherical and chromatic aberrations were to a large extent corrected. Dollond's lenses were made for the telescope in 1758, but similar lenses do not appear to have been used in the microscope until some 70 years later.

The work of Selligie, Chevalier, Tully, Lister, Ross, and Powell was referred to, and the invention of immersion lenses by Amici, in 1840. The remainder of the address was devoted to the remarkable progress which the instrument has made within the last 15 years, since Abbe turned his attention to microscopical optics and provided Zeiss with formulæ for the construction of his lenses. The elaborate experiments of Abbe and Schott on glass-making were referred to, and the invention of new crown and flint glass, which, with glass containing borates and phosphates, has enabled Abbe to devise his apochromatic objectives and compensating oculars; in these, spherical and chromatic aberrations have at length been entirely overcome, and a high degree of perfection attained, especially for the important work of microphotography, which, with the aid of these lenses, is destined to play a more important part in microscopy than hitherto.

The diffraction and interferences of light, Abbe's theory of microscopic vision, and his explanation of the limitation of the power of the microscope, were explained, and illustrated by diagrams and experiments. The difference between the diffraction bands of ordinary and of monochromatic light was experimentally shown, in illustration of the importance of utilising rays of short wave length in resolving microscopical appearances with the highest magnifying powers.

A hearty vote of thanks was accorded to Professor Rutherford for his comprehensive and instructive address, and the hope was expressed that it would be published.

TYPHUS FEVER AT BIRKENHEAD.

INADEQUATE HOSPITAL ACCOMMODATION.

[FROM OUR LIVERPOOL CORRESPONDENT.]

THERE is little doubt that the fever hospital at Birkenhead has not been maintained in a proper state of efficiency to cope successfully with an outbreak of an epidemic. Hitherto few cases have been admitted to it—only 18 in 1889—and frequently for months together there have been no patients in the wards. The building was first used for its present purpose in 1876. Two villa residences in Livingstone Road, belonging to the Corporation, for which tenants could not readily be obtained, were at a small cost converted into a hospital; a ward containing ten beds was added in 1883, and a similar one two years later. These wards are well constructed, well lighted, and with 2,000 cubic feet for each bed. The most recently erected has never been in use until the present epidemic, and the former, which was injured by the construction of the tunnel of the Mersey Railway, was practically re-erected last year. The two villas have fallen into a dilapidated state, and the main drain passes under the building. For some years the hospital has been in charge of a pensioner and his wife, who are over 60 years of age. They have had the assistance of their two married daughters, who helped in the wards in the daytime, and went home to sleep.

Dr. Vacher, the Medical Officer of Health, has frequently drawn the attention of the Health Committee to the inadequate provisions of the hospital, and has urged upon them the necessity of providing a new one in a more suitable locality and constructed on approved principles; but nothing has been done.

The present outbreak of typhus fever appeared first on August

27th, when two cases were admitted to the hospital. Both patients came from St. Anne Street, and all cases that have occurred subsequently, except one, have been traced to infection from them. At this time the medical officer of health was unable to attend the fever hospital, and he had delegated his duties at the hospital temporarily to Dr. Brewer, a practitioner residing not far from the institution. Dr. Brewer attended the two cases admitted on August 27th, as well as those that came in subsequently, until he was himself stricken down by the disease. Up to the time of writing, 51 cases of typhus have occurred in the borough, all but 8 or 9 have been admitted to the hospital, and 10 have proved fatal. It is alleged that the early cases were attended by the caretaker and his wife and daughters, one of whom caught the fever, until October 10th, when the help of two trained nurses was first obtained. Both nurses contracted the disease, and one of them, Nurse M'Coy, has died. At first there was some difficulty in replacing them, but at present there are four trained nurses in the institution.

Dr. Brewer, we are happy to be able to state, is now safely over the crisis. Dr. Pinkerton, who succeeded him in his charge of the hospital, also contracted the fever, but we believe he is going on well.

We understand that a searching inquiry will be made into the condition and management of the hospital, and we trust that the outcome of it will be not useless recriminations, but the provision of an infectious hospital that will be in structure and management altogether above suspicion.

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.

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. Hallows, in the chair. Communications:—Mr. Malcolm Morris: Ringworm of the Scalp: its Nature and Treatment. Dr. T. Bastes: 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.

STAFFORDSHIRE BRANCH.—The first general meeting of the present session will be held at the Railway Hotel, Stoke-upon-Trent, on Thursday, November 27th, at 3 P.M.—GEORGE REID, Honorary Secretary.

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.

METROPOLITAN COUNTIES BRANCH: SOUTH LONDON DISTRICT.—The next meeting will be held at Bethlem Royal Hospital, at 8.30 P.M., on Wednesday, November 19th. Papers will be read by Dr. F. Pollard, on Some Cases of Septic Poisoning of Obscure Origin; and by Dr. Fletcher Little, on Some Forms of Functional Neurosis. A communication from Dr. Rentoul, on the subject of the Midwives' Registration Bill, will be brought before the meeting.—**HECTOR W. G. MACKENZIE, M.D.**, Honorary Secretary, 77, Lambeth Palace Road, S.E.

WEST SOMERSET BRANCH.

THE autumnal meeting of this Branch was held at the Railway Hotel, Taunton, on Thursday, November 6th, at 5 P.M., Mr. H. M. KEMMIS, President, in the chair. There were present thirteen members and two visitors.

Minutes.—The minutes of the last meeting were read and confirmed.

Letters.—A letter was read from Mr. Prankerd resigning his membership of the Branch on account of his having taken up his residence in London. Letters from several members who were unable to attend, and sundry letters from Dr. Rentoul, were reported and laid on the table.

Ergot in the Second Stage of Labour.—After dinner the question for discussion, as settled by the Council—namely, "What is your opinion respecting the use of ergot in the second stage of labour?"—was put from the chair. Mr. WINTERBOTHAM, in opening the discussion, forcibly advocated its use, giving statistics from his practice of thirty years showing its value. He could recall no case in which injury either to the mother or child had resulted. Written answers sent by Mr. ALFORD and Mr. CORNWALL (read by the SECRETARY) gave strong testimony of a similar character.—Dr. CURRIE, Mr. LIDDON, and others also spoke of having used it advantageously.—Dr. CORNWENT (who was not present, but sent a written answer) very decidedly negatived the employment of ergot in the second stage of labour.—Dr. ADAMS, Mr. OLIVER, and others expressed disappointment in their experience of its use, and several junior members had not ventured to use it, having been taught that risk and danger attended its employment during the stage of labour specified in the question.—The PRESIDENT, in winding up the discussion, stated that for himself he had constantly used ergot in his midwifery practice during the second stage, and had faith in it.

Midwives Registration Bill.—This Bill, as amended by the Select Committee, and ordered by the House of Commons to be printed in July last, together with a statement of the proceedings of the Parliamentary Bills Committee of the Association at a meeting held on July 30th when this Bill was considered, was laid before the meeting by the Honorary Secretary (Dr. KELLY), in accordance with a request made to him in a letter from Mr. Fowke, dated October 6th, which he read. Explanations on the above were given by Dr. Kelly, and some discussion took place, but the meeting broke up before any resolution could be come to.

BORDER COUNTIES BRANCH.

THE autumn meeting of this Branch was held at the Tower Hotel, Hawick, on Friday, October 3rd, 1890. The chair was taken by Dr. ABLETT, of Whitehaven.

Prize of £10.—It having been decided at the previous meeting that a prize of £10 be again offered for competition among the members of the Branch, the following resolution was unanimously adopted—namely, "That in the event of no essay being sent in which the subcommittee consider of sufficient merit, the prize shall not be awarded." Full particulars will be given on application to the Honorary Secretary, Dr. Altham, Penrith.

Exalgine.—Dr. BAYDON, of Hawick, read a paper upon a Recent Analgesic—Exalgine. In a large proportion of the cases recorded, the results of its exhibition had been unsatisfactory and uncertain. In the discussion which followed similar opinions were expressed as to the uncertainty of its action.—Dr. BAYDON replied.

Loss of Sight after Childbirth.—Dr. SOMERVILLE, of Galashiels, read a case of loss of sight after childbirth, which gave rise to considerable discussion.

Case.—Dr. HAMILTON, of Hawick, showed a patient suffering from some obscure abdominal disease, and narrated the case.

Dinner.—The members subsequently dined together in the hotel.

[The publication of this report has been accidentally delayed.]

It is probable that the total collection this year of the Hospital Saturday Fund will amount to £20,000. The Distribution Committee will at once make their awards to the extent of £16,000.

SPECIAL CORRESPONDENCE.

EGYPT.

Provincial Hospitals.—Surgery at Tantah.—General Health.—Drainage of Cairo.—The Coming Season.

HIS Highness the Khedive, who lately went on a tour of inspection through Lower Egypt, made a point of always visiting the Government hospitals, and was pleased to express to Dr. Greene Pasha, who was his guest during a portion of the time, his great satisfaction at the cleanliness and efficiency he everywhere observed. It was true that many of the buildings were extremely defective, but he saw that everything possible was done to keep them in good order; and His Highness expressed the hope, now that the finances of the country were in a more prosperous condition, that funds would be forthcoming for further improvements.

The hospital at Tantah attracted special commendation. It is a comparatively new detached building, standing in a well kept garden, where convalescents can take the air. Dr. Yacoub Wardah, the medical officer in charge, is a most accomplished surgeon. Last year he performed 54 major operations with the following results: successful, 47; partially successful, 6; death, 1. This record would be hard to beat.

Dengue is said to be prevalent in Cairo, but, if so, it does not add to the mortality. The death-rate for the week ending October 24th was 37 per 1,000, against 47, average of preceding four years. It must be noted that this rate is calculated on a population of 374,000 only, whereas the number of inhabitants is probably not far short of half a million.

The drainage of Cairo is still engaging the attention of the financial authorities, who seem to be in favour of applying the scheme submitted by Mr. Baldwin Latham. The difficulty is how to raise the money by imposing a special rate, the proceeds of which shall not be at the mercy of the Commissioners of the Public Debt. To secure a tax from the claims of these officials, the assent of the Powers must be obtained; and this, unfortunately, is by no means an easy proceeding, for, in their opinion, the interests of the bondholders are paramount. The difficulty of carrying out any reform in Egypt, under its many masters, is enormous; and, in the case of sanitary reform, almost insuperable.

The danger of cholera making its entrance into Egypt may now be said to have for the present completely disappeared. Visitors may with every confidence elect to winter on the Nile. Already the hotel lists are filling up; and at Mena House, which has been enlarged and greatly improved, among the arrivals appears the name of the Princess Royal of Sweden, who has come to Egypt to seek relief from a chronic bronchitic attack.

LIVERPOOL.

Report of the Committee on Hospital Abuse.—Annual Dinner of the Royal Southern Hospital.

THE Committee of the Liverpool Medical Institution appointed to consider the best means of checking hospital abuse has reported, and its recommendations have, with some slight modifications, been accepted by the Institution. The Committee was originally appointed to draw up a report on the following points: A. To decide on the best means of checking the abuse of public medical charities. B. To consider what classes shall be eligible for charitable relief. C. To consider by what means such classes as are ineligible shall be provided with efficient medical treatment. D. To make suggestions regarding the general working of the medical charities. The Committee met twenty times. Dr. W. Carter was appointed chairman, and Dr. Alexander Stookes secretary. The recommendations as finally accepted by the Institution are as follows: A. I. Under the head of checking abuse of medical charities, they suggest that all hospitals and other public medical charities adopt some uniform system of inquiry into the pecuniary circumstances of all patients seeking or receiving relief, and that each medical charity appoint an officer to make such inquiry. Further, that a notice be placed in one or more conspicuous places, to the following effect, namely, that the institution is for the benefit of the sick poor only, and that inquiry will be made into the pecuniary circumstances of those applying for relief, but that urgent cases and accidents may receive first treatment before

THE VOLUNTEERS.

MR. GEORGE ALFRED EDSSELL is appointed Acting-Surgeon to the 2nd Volunteer Battalion Oxford Light Infantry (late the 2nd Oxfordshire), November 8th.

Acting-Surgeon P. P. WHITCOMBE, M.B., 13th Middlesex (Queen's Westminster), is promoted to be Surgeon, November 8th.

Acting-Surgeon R. R. SLEMAN, 20th Middlesex (Artists'), is also promoted to be Surgeon from November 8th.

CONFUSION CONFOUNDED.

A CORRESPONDENT points out that, in a report of a medical meeting in Ireland, in the *Irish Times*, the President of the Royal College of Surgeons is described as "Surgeon Croly," the same title as the last-joined army medical officer; the toast of "The Army and Navy" was responded to by "Dr. Riordan, Army Staff Service." A more absurd jumble of titles and designations it would be hard to conceive, but it is the inevitable result of army medical officers possessing no clear and easily understood military titles.

MEDICO-LEGAL AND MEDICO-ETHICAL.

MEDICAL PATIENTS AND MEDICAL FEES.

AN OLD SUBSCRIBER writes: I have read with interest your correspondent's letter in the *BRITISH MEDICAL JOURNAL* of November 1st, under Medical Patients and Medical Fees, and I should like to add a few remarks under this heading. The case related may have been a single case, for I fancy had the consultant in question known who his patient really was or thought for a moment he would have refused the fee. I have been in practice twenty-five years and have had, like other medics, the good fortune of being able to render assistance to my medical brethren, their wives, and families. I have always been glad to do so and should never think of accepting any fees on philanthropic principles. The services I have been enabled to render have been requited me threefold. Both at home and abroad I have received the greatest kindness from the profession. Recently I have been laid up with glaucoma needing the operation of iridectomy on both eyes. The operator, to whom I shall always feel most grateful, who was most successful and gave me the greatest attention, declined to take any fee. One of my medical neighbours who attended some of my patients for me declined also to take any fees. This will show that the medical profession still retains its reputation of often being willing to lend a helping hand to a medical brother in trouble.

CORONERS AND MEDICAL EVIDENCE.

NO NAME.—There is no legal obligation on the coroner to summon medical evidence. In the case to which attention is drawn, the only point on which medical evidence could have been of value was as to whether the case was one of suicide or murder, and this was easily decided from the circumstantial evidence. It would, of course, have been more courteous in the coroner to have summoned the medical attendant, but one must not of necessity expect courtesy from a coroner.

UNIVERSITIES AND COLLEGES.

CAMBRIDGE.

COUNCIL OF THE SENATE.—At the biennial election to the Council of the Senate on November 7th the following were successful: Masters of Colleges: Dr. Atkinson, Clare, and Dr. Ferrers, Caius. Professors: Dr. Cayley, Trinity, and Dr. Sidgwick, Trinity. Members of the Senate: Dr. Donald MacAlister, St. John's; Dr. Forsyth, Trinity; Mr. Whitting, King's; and Mr. R. T. Wright, Christ's. Dr. MacAlister headed the poll as a member of the Senate. Dr. Hill, Master of Downing, and Dr. Lea, of Caius College, were unsuccessful. The newly elected members hold office for four years, and the result is a considerable gain of strength to the "University Liberals."

DEMONSTRATORS.—Mr. R. S. Cole, of Emanuel College, is appointed an additional Demonstrator of Physics. The General Board of Studies propose to found a third Demonstratorship of Physiology under Professor Foster.

NATURAL SCIENCE EXAMINATIONS.—The annual intercollegiate examination in Natural Science, on the results of which foundation scholarships and exhibitions are awarded to members of Caius, King's, St. John's, and Trinity Colleges, will be held from December 8th to December 16th.

MEDICAL DIRECTOR.—Mr. E. H. Hankin, Fellow of St. John's College, has been appointed Director of Medical Studies at Clare College.

EDINBURGH.

STUDENTS' REPRESENTATIVE COUNCIL.—The annual general meeting of the Students' Representative Council of the University of Edinburgh was held on the evening of Friday, November 7th. The most important business that had been before the Council during the past year was the preparation of a statement to be presented to the Scotch Universities Commission representing, among other things, the view of students on modifications and changes in the curriculum of study.

GLASGOW.

THE ENTRIES AT THE MEDICAL CLASSES.—There is a slight fall in the number of entries in the medical classes at the University this session. In junior anatomy the number is 160, in the senior class 216; in the physiology class the students number 150. It is probable that after this week there will be some increase in the numbers as the rectorial election takes place on Saturday, and in an election year it is difficult to get the students to settle down to work until the election is over. The candidates for the rectorship are: On the Liberal side, Lord Aberdeen; and on the Unionist side, Mr. A. J. Balfour. It is expected that the latter will be elected.

VICTORIA.

THEOLOGICAL DEGREES.—At the recent meeting of the court of governors of Victoria University, Manchester, there was an animated discussion on the proposal to establish, in connection with the University, a system of degrees, examinations, and courses of study in theology. On a division, the motion was rejected by 18 votes to 14.

BISHOP BEEKELEY AND HONORARY RESEARCH FELLOWSHIPS IN OWENS COLLEGE.—As will be seen from our advertising columns, the Council of Owens College offer at least two Bishop Berkeley Fellowships, to be awarded in December next. These fellowships are given to the College by an anonymous donor, and are of the value of £100 for one year, and renewable a second year. The holder must give evidence of ability to prosecute original research in (*inter alia*) any of the following subjects: chemistry, zoology, physiology, pathology, and pharmacology. A limited number of Honorary Research Fellowships will be awarded at the same time.

EXAMINERSHIPS.—We also call attention to the fact that a considerable number of examinerships in connection with the medical department of Victoria University are advertised vacant.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—The following gentlemen having passed the necessary examinations were at an ordinary meeting of the Council on Thursday, November 13th, admitted Members of the College:

Alderson, Fred. Herbert, L.R.C.P.Lond., Grentham Road, Hammersmith
Anderson, Richard Walker, L.R.C.P.Lond., Gulladuff House, Moville, co. Donegal

Andrew, Henry, L.R.C.P.Lond., 18, Southernhay, Exeter
Ash, Alfred Edwin, L.R.C.P.Lond., Barnes Convalescent Hospital, Cheadle
Bale, William Barker, L.R.C.P.Lond., Birch House, Stockport
Bell, William Ker, L.R.C.P.Lond., The Glen, East Liss
Bickerstaff, George Roger, L.R.C.P.Lond., Norman Lodge, Leamington
Bindloss, Arthur Henry, L.R.C.P.Lond., 1, Porteus Road, W.
Brodie, Thomas Grigor, L.R.C.P.Lond., 15, Penge Road, South Norwood
Bushnell, Frank George, L.R.C.P.Lond., Sutton Court Road, Cheswick
Butterfield, Nathaniel Augustus, L.R.C.P.Lond., Richmond, Yorks
Caley, Henry Albert, L.R.C.P.Lond., 5, Clarence Villas, Windsor
Campbell, Duncan McD. Lochnell, L.R.C.P.Lond., Warwick Villa, Acton
Cardew, Henry Boyd, L.R.C.P.Lond., 20, Lee Park, Blackheath
Carney, Ambrose, L.R.C.P.Lond., 90, Shardeloe Road, S.E.
Carstairs, Herbert James, L.R.C.P.Lond., 46, Carleton Road, N.
Charlton, Frederick John, L.R.C.P.Lond., 51, St. Mary's Hill, Hornsey
Coles, Charles, L.R.C.P.Lond., 54, Montague Road, Uxbridge
Colvin-Smith, Robert Curzon Mollison, L.R.C.P.Lond., 5, Cresswell Gardens, S.W.

Cooper, Charles Dudley, L.R.C.P.Lond., 33, Wimpole Street, W.
Costine, William Courter, L.S.A., 235, Boundary Street, Liverpool
Crocker, James Meadmore, L.R.C.P.Lond., Albion House, Bingley, Yorks
Crompton, Alfred, L.R.C.P.Lond., St. Leonard's Villa, Exeter
Dent, Louis William, L.R.C.P.Lond., Bellevue House, Woolwich
Emlyn, Charles Willmore, L.R.C.P.Lond., 122, Inverness Terrace, W.
Evans, Evan, L.S.A., 3, Upper Rock Gardens, Brighton
Fowler, Chappell Hodgson, L.R.C.P.Lond., 18, Belgrave Road, S.W.
Goddard, Bertram, L.R.C.P.Lond., North Lynn, Highbury New Park
Gossage, Alfred Milne, L.R.C.P.Lond., Penlee, Brondesbury Park, N.W.
Gray, Albert William, L.R.C.P.Lond., 14, Islington Row, Birmingham
Griffith, William Stokes, L.R.C.P.Lond., 4, Bramham Gardens, S.W.
Gummow, James Freeman, L.R.C.P.Lond., 23, Gerrard Street, W.
Hall, John Basil, L.R.C.P.Lond., Moorham, Headingley, Leeds
Hamilton, Richard, L.R.C.P.Lond., 146, Upper Brook Street, Manchester
Harper, John Robinson, L.R.C.P.Lond., Bear Street, Barnstaple
Hawkes, Claude Somerville, L.R.C.P.Lond., 43, Winston Road, N.
Henning, Thomas Irwin, L.R.C.P.Lond., 90, Hill Street, Newry
Henshaw, William Henry, L.R.C.P.Lond., 6, Talbot Street, Fallfield
Hichens, William, L.R.C.P.Lond., Redruth, Cornwall
Higgins, Thomas Francis, L.R.C.P.Lond., 134, Embden Street, Manchester
Holt, Robert Hughtrade Edward George, L.R.C.P.Lond., Royal Marine Barracks, Chatham

Horsfield, William, L.R.C.P.Lond., Trinity Vicarage, Gateshead
Hunter, George Yeates Cobb, L.R.C.P.Lond., 48, Philbeach Gardens, S.W.
Jackson, Herbert Soames, L.R.C.P.Lond., Coombe Rd., Weston-super-Mare
John, Howell Walter, L.R.C.P.Lond., Ammanford, S. Wales
Jones, David John, L.R.C.P.Lond., 24, Burton Crescent, W.C.
Keats, William John Charles, L.R.C.P.Lond., Maryon Road, Charlton

Kirton, Charles Imray, L.R.C.P.Lond., 26, Doughty Street, W.C.
 Knapp, George Harvey, L.R.C.P.Lond., 19, Wroughton Road, Anerley
 Lendrum, William Henry, M.D.Q.U.I., 109, Herbert Road, Woolwich
 Le Quene, Claude Philip, L.R.C.P.Lond., St. Helier's, Jersey
 Levick, George David Baker, L.R.C.P.Lond., The Elms, Harlesden
 Littler, Robert Meredith, L.R.C.P.Lond., Parkside, Higher Broughton
 Lys, George, L.R.C.P.Lond., Bere Regis, Wareham
 Mahood, Allan Edward, M.B.R.U.I., Queen's College, Birmingham
 Mantell, Hugh Fraser, L.R.C.P.Lond., Hanwell, N.
 Mason, Harold, L.R.C.P.Lond., Arley House, Leamington
 Mawson, Samuel Francis, L.R.C.P.Lond., 68, Derby Street, Bolton
 Mole, Harold Frederic, L.R.C.P.Lond., 4, Aberdeen Terrace, Clifton
 Molson, John Eldale, L.R.C.P.Lond., Bath Cottage, Hampstead
 Monier-Williams, Montagu S. F., L.R.C.P.Lond., 88, Onslow Gardens, S.W.
 Morphew, Edward Maudslay, L.R.C.P.Lond., Thorpe Rise, Norwich
 Morton, William Britain, L.R.C.P.Lond., Gayes Hall, Richmond, Yorks
 Nelson, Harry Augustus de B., L.R.C.P.Lond., 24, Ovington Street, S.W.
 Ohlmus, Walter Theodore, L.R.C.P.Lond., 1, Fairbridge Road, N.
 Panting, John, L.R.C.P.Lond., 32, Great Ormond Street, W.C.
 Pennell, Theodore Leighton, L.R.C.P.Lond., 5, Gordon Street, W.C.
 Pethick, Charles Stuart, L.R.C.P.Lond., 7, St. John Street, W.C.
 Philippotts, Herbert McDonald, L.R.C.P.Lond., 31, D'Israeli Road, Ealing
 Pooler, Harry William, L.R.C.P.Lond., Queen's Hospital, Birmingham
 Reilly, Frederick Bradshaw, L.R.C.P.Lond., 68, Victoria Park Road, E.
 Revill, George Leslie Howard, L.R.C.P.Lond., 2, Chatsworth, Barnes
 Rhodes, Hugh, M.B. Glasgow, General Infirmary, Sheffield
 Richards, Norman Lloyd, L.R.C.P.Lond., 19, Brook Street, Tavistock
 Richards, Richard Walter, L.R.C.P.Lond., 23, Percy Circus, W.C.
 Roberts, Llewelyn, L.R.C.P.Lond., 68, Myddelton Square, E.C.
 Sayres, Alex. Ward Fortescue, L.R.C.P.Lond., 23, Vincent Square, S.W.
 Scott, John Robinson, L.R.C.P.Lond., St. Mary's Square, S.E.
 Shaw, John Hepworth, L.R.C.P.Lond., 21, St. James Road, Liverpool
 Shortt, William Rushton, L.R.C.P.Lond., 166, Lewisham High Road, S.E.
 Smith, Herbert Austen, L.R.C.P.Lond., Guy's Hospital, S.E.
 Stott, William Atkinson, L.R.C.P.Lond., Hall Lane, Armley, Leeds
 Stuart, Robert, L.R.C.P.Lond., 57, Bassett Road, W.
 Tempest, Henry, L.R.C.P.Lond., 3, Boro Gate, Otley, Yorks
 Tizard, Henry John, L.R.C.P.Lond., Bracondale House, Wimbledon
 Umney, William Francis, L.R.C.P.Lond., Bardley House, Sydenham
 Vernon, Claude Martin, L.R.C.P.Lond., Olveston Vicarage, Almondsbury
 Wainwright, Lennox, L.R.C.P.Lond., Alfred House, Ashford
 Walford, Reginald Manwood H., L.R.C.P.Lond., 120, Finchley Road, N.W.
 Walfridsson, Karl Simon, L.R.C.P.Lond., 49, Highbury Park, N.
 Williams, Alfred John, L.R.C.P.Lond., 17, Onslow Gardens, S.W.
 Wilson, Charles William, M.D. McGill, Ontario, Canada
 Wilson, John Gratton, L.R.C.P.Lond., 135, Lordship Road, N.
 Winter, George Mitchell, L.R.C.P.Lond., Waterloo Street, Leicester
 Wood, Guy Edward Mills, L.R.C.P.Lond., University College Hospital
 Worley, Philip, L.R.C.P.Lond., Highnam Crescent, Sheffield
 Zeidan, Selim, L.R.C.P.Lond., Cairo, Egypt

The following gentleman having previously passed the necessary examinations, and having now attained the legal age (25 years), was admitted a Fellow of the College:

G. C. Rennie, M.B. Melb., Kyneton, Victoria, Australia; Member, February 12th, 1889.

The following gentlemen passed the First Professional Examination for the diploma of Fellow at a meeting of the Board of Examiners on November 10th:

A. J. Chalmers and J. Evans, of University College, Liverpool; A. W. Hughes, of Edinburgh University; T. W. Iddon, of Owens College, Manchester; M. L. Hepburn, of St. Bartholomew's Hospital; C. P. Childie, of King's College; R. B. Mahon, of Dublin; and J. Johnstone, of Otago and Aberdeen Universities.

Eight candidates were referred.

Passed on November 11th:

F. P. S. Cresswell, of Guy's Hospital; B. Charles, of St. Bartholomew's Hospital; G. D. E. Jones, of Middlesex Hospital; E. Deansley, of University College; and A. McKenzie, of Edinburgh University.

Eleven candidates were referred.

ROYAL COLLEGES OF PHYSICIANS AND SURGEONS, IRELAND.—The following is the official statement of the results of the Conjoint Examinations held in October, 1890:

Results of Examinations, October, 1890:

| Examination. | No. of Entries. | Absent or Withdrew. | Total No. Examined. | Passed. | | Rejected. | |
|---------------------|-----------------|---------------------|---------------------|---------|-----------|-----------|-----------|
| | | | | No. | Per Cent. | No. | Per Cent. |
| 1st Professional... | 25 | 1 | 24 | 15 | 62.5 | 9 | 37.5 |
| 2nd " | 67 | 6 | 61 | 26 | 42.6 | 35 | 57.4 |
| 3rd " | 64 | 9 | 55 | 27 | 49.0 | 28 | 51.0 |
| Final " | 28 | 3 | 25 | *14 | 56.0 | 11 | 44.0 |
| TOTALS | 184 | 19 | 165 | 82 | 49.7 | 83 | 50.3 |

* Of these 3 presented themselves in a portion of the examination only.

ROYAL COLLEGE OF PHYSICIANS OF IRELAND.—The undermentioned gentlemen, being of age and having been successful at the recent Final Professional Examination under the Conjoint Scheme with the Royal College of Surgeons in Ireland, were duly admitted to the Licences in Medicine and Midwifery of the Royal College of Physicians of Ireland on Friday, November 7th, 1890:

N. G. Cookman, R. Dalton, G. W. Dawson, H. W. Devlin, D. M. Ffrench, W. J. L. Ffrench, P. J. Flanagan, G. J. A. Hall, M. O'Driscoll.

CONJOINT EXAMINATIONS IN IRELAND BY THE ROYAL COLLEGES OF PHYSICIANS AND SURGEONS.—October, 1890. First Professional Examination. The following have passed in all subjects:

H. Carre, H. G. F. Dawson, F. Hayes, C. A. Hayman, T. Hennessy, W. S. J. Lee, J. M. Longford, D. J. Lynch, R. S. Maguire, H. M'Avoy, F. J. W. T. O'Rourke, H. Schlegel, H. G. Thompson, J. S. Watson, W. A. Woodside.

Passed in Anatomy, Chemistry, and Pharmacy:

H. H. A. Carter, G. W. Simpson.

Passed in Chemistry and Pharmacy:

A. T. Benson.

Passed in Anatomy, Physics, and Pharmacy:

T. I. Considine.

Passed in Anatomy and Pharmacy:

R. Hassard.

Passed in Anatomy:

J. C. Lloyd.

Second Professional Examination. The following have completed this examination:

Miss M. S. Bell, M. Brich, A. S. L. Burke, E. Cairns, E. R. Cotter, O. W. Elms, G. A. Fleming, F. M. Golding, J. V. Griffin, J. T. Harold, T. C. Harte, R. H. H. Hayden, H. H. Hayes, E. L. Hunt, H. Hunt, P. Monaghan, P. A. Murray, W. F. A. M'Cann, J. G. M'Lannahan, F. W. Perry, W. F. Pigott, C. M. Richards, R. R. Smith, J. C. Woodside.

The following have passed in one or more of the subjects in which they presented themselves:

H. C. Beasley, W. Burke, R. A. Chartres, C. F. Comber, W. J. Coneys, T. E. Cotter, J. G. Crozier, M. J. Cuffe, T. C. Cummins, R. C. Fisher, J. E. Fox, R. F. Harding, T. A. Hartigan, H. V. Jacob, R. D. Jephson, W. P. Lapin, H. B. Ludlow, J. F. Maguire, A. J. Moran, C. E. Murphy, W. O'Donnell, M. J. M'Mahon, J. E. Sheppard, C. Skelly, E. Smith, E. A. Stubbs, V. B. Taylor, A. R. F. Twigg.

Third Professional Examination:

A. J. Arthur, J. G. Boon, H. K. Bentley, M. J. Chevers, R. P. Connell, M. G. Dobbly, J. Dowling, W. J. Green, W. C. Hamilton, H. P. Jones, W. J. Keane, M. Keay, E. W. Lynch, J. K. Macnamara, F. A. Madden, R. R. More-Madden, J. M. Mangan, T. F. M'Donnell, J. O'Donoghue, R. W. E. Roe, W. Russell, W. W. Scarlett, J. P. Sexton, H. E. Stone, A. W. Tabuteau, W. P. Walsh, S. W. Wilson.

The following have passed in one or more of the subjects in which they presented themselves:

E. H. Beaman, W. Butterly, J. J. Cullen, V. Doyle, M. Ferguson, H. Flynn, P. J. Garland, A. A. Hargraves, E. A. Malcomson, C. A. Molony, H. M'Dermott, V. E. J. McDonagh, J. T. B. O'Brien, A. W. Power, J. S. Proctor, G. H. Russell, J. A. Smullan, T. Smyth, T. Wilson.

Fourth, or Final Qualifying, Examination in Medicine, Surgery, and Midwifery. The following have completed the examination:

N. G. Cookman, R. Dalton, G. W. Dawson, H. W. Devlin, D. M. Ffrench, W. J. L. Ffrench, P. J. Flanagan, G. J. A. Hall, A. J. M'Munn, M. O'Driscoll, R. B. Wright.

Passed in one or more subjects:

R. A. Crawford, T. G. Dillon, G. N. D. Oakes, J. Pim, J. G. R. Symes, J. A. Thompson.

Supplementary Preliminary Examination. Passed in all subjects except Physics:

H. E. Atkinson, C. Black, G. E. Creighton, W. H. Croly, W. J. Harold, H. T. J. Kennedy, L. C. W. Lett, S. J. Scott, M. G. Sterling (passed Physics also), R. H. Walpole, F. Wise.

Passed in Mechanics:

T. P. Conlan, T. J. Crean, J. A. Neary.

Passed in Physics:

F. J. Coyne, C. J. Fallon, J. P. G. Griffin, D. J. O'Brien.

Passed in Physics, Algebra, Euclid, Mechanics:

E. Bourke.

SOCIETY OF APOTHECARIES OF LONDON.—Pass-list. October, 1890. The following candidates passed the First Examination in Chemistry, Materia Medica, Botany, and Pharmacy:

P. H. Best, B.A. Cantab., Cambridge E. J. Dodson, Royal Free Hospital
 University and University College A. Harding, Royal Free Hospital
 A. H. A. Boyle, Royal Free Hospital S. E. H. Martin, Royal Free Hospital

The following passed in Materia Medica, Botany, and Pharmacy:

M. E. Bowlby, Royal Free Hospital

The following passed in Pharmacy:

H. Greenwood, London Hospital J. K. H. Smyth, St. Mary's Hospital

The following passed in Anatomy:

W. A. King, Charing Cross Hospital

The following passed the Second Examination in Anatomy, Physiology, and Histology:

K. Anderson, St. Bartholomew's Hospital
H. C. Cadman, Owens College, Victoria University
R. H. Calvert, Yorkshire Coll., Leeds, and Durham University
H. W. Clarke, St. Mary's Hospital
H. F. Baland, St. Mary's Hospital
J. Edwards, London Hospital
A. C. Fenn, St. Bartholomew's Hospital
S. Firth, Yorkshire College, Leeds, and Anderson's College, Glasgow
The following passed in Physiology and Histology:

A. H. Grace, Bristol Medical School
E. Grange, Edinburgh University
The following passed the examination in Surgery:

P. C. De Wet, St. Thomas's Hospital
J. R. Fuller, St. Mary's Hospital
H. W. John, Guy's Hospital
P. A. Shore, Queen's College, Birmingham
A. M. Van Ingen, L.M.S., Madras University
C. F. Graves, St. Mary's Hospital
F. S. Hogg, Charing Cross Hospital
R. E. T. Ingram, Guy's Hospital
A. N. V. Johnson, Royal Free Hospital
T. L. Johnston, Edinburgh University and University College
F. B. Lewis, London Hospital
B. J. Macaulay, Middlesex Hospital
D. K. McDowell, St. Thomas's Hospital
R. E. Nichols, St. Mary's Hospital
E. B. Pellatt, Royal Free Hospital
J. T. T. Ramsay, Royal College of Surgeons, Edinburgh
W. Wood, Yorkshire College, Leeds
W. S. Whitcombe, Glasgow University
E. E. Wilbe, St. Bartholomew's Hospital
W. Wright, St. Bartholomew's Hospital
W. S. Wright, Bristol Medical School and St. Mary's Hospital

The following having previously passed in Medicine at this Hall received the Diploma of the Society qualifying for registration:

J. R. Fuller and H. W. John
The following passed in Medicine, Forensic Medicine, and Midwifery:

T. H. Adams, London Hospital
J. M. Bennett, Liverpool and Sheffield School of Medicine
A. B. Blomfield, London Hospital
M. B. Dumaresq, London Hospital
R. A. Irvine, Royal University, Ireland, and Glasgow University
E. W. Livesey, St. Thomas's Hospital
G. Wilkinson, Cambridge University and Middlesex Hospital
The following passed in Medicine and Midwifery:

E. A. R. Covey, St. Bartholomew's Hospital
The following having previously passed in Surgery at this Hall received the Diploma of the Society qualifying for registration:

A. B. Blomfield
M. B. Dumaresq
E. W. Livesey
H. L. Morgan
R. H. Mackay, Aberdeen University
H. L. Morgan, Westminster Hospital
C. E. Reinhardt, London Hospital
N. A. A. Trenow, St. George's Hospital
A. M. Van Ingen, L.M.S. Madras University
F. W. Welstead, Guy's Hospital
W. S. Whitcombe, Glasgow University
C. E. Reinhardt
N. A. A. Trenow
A. M. Van Ingen
W. S. Whitcombe

OBITUARY.

PROFESSOR VON NUSSBAUM,
Munich.

JOHANN NEPOMUK VON NUSSBAUM, one of the makers of modern surgery in Germany, was born at Munich on September 2nd, 1829. He began the study of medicine in the university of his native city in 1849, and in 1852 was appointed "Assistant" in the surgical section of the General Hospital. In 1857 he qualified as *Privat-docent* in surgery and ophthalmology, and in the same year was appointed "First Operator" in the Hauner Children's Hospital. In 1860 he became Ordinary Professor of Surgery in the University of Munich, a post which he continued to hold till his death. In addition to a vast hospital and private practice, Von Nussbaum served as a surgeon in three bloody campaigns, namely, that of Italy in 1859, the Austro-Prussian war of 1866, and the Franco-German war of 1870-71. For his services in the last named campaign he was appointed Surgeon-General of the Bavarian Army.

Von Nussbaum's surgical tastes seem to have lain originally in the direction of ophthalmology. One of his earliest works (which appeared in 1856, and which is termed "epoch-making" by an Austrian contemporary) was on diseases of the eye. His literary activity was very great throughout his career, the number of monographs which he published being about eighty. The subjects treated of covered almost the whole domain of surgery. He wrote on cancer, nerve-stretching, transplantation of bone, herniotomy, transfusion of blood, artificial cornea, chloroform, facial neuralgia, resection of nerves, lithotomy, treatment and pathology of ankylosis, resection of the knee-joint, formation of an artificial ureter, wounds of the abdomen, etc. He also published several works on the antiseptic treatment of wounds, first help in

injuries, new remedies for diseases of the nerves, etc. This list, which is far from exhausting the catalogue of Professor von Nussbaum's publications, will give some idea of the extent and variety of his scientific work.

He was one of the most strenuous champions of the antiseptic system, and was largely instrumental in its being generally adopted by German surgeons. He was accustomed to say that no medical man could now disregard antiseptics without rendering himself liable to punishment by law. He was also one of the pioneers of ovariectomy in Germany, and he was one of the first to practise nerve-stretching and the radical treatment of hernia in that country.

Von Nussbaum was not less admirable as a man than as a surgeon. He was universally beloved, and his loss is bewailed by rich and poor alike, not only in Munich, but throughout Bavaria. Though he had one of the largest private practices in Germany, he did not amass wealth, but gave away with one hand what he received with the other. He is said to have practised transfusion of blood from his own person no fewer than seventeen times. For the last ten years of his life he was himself a great sufferer; he had to be wheeled about in a chair, and suffered much from an affection of the nerves, but however ill he might be he seemed to be able to put aside his own pain when he had to perform an operation.

As a teacher he was very successful, not only in imparting knowledge, but in winning the affection and reverence of his pupils. The public rejoicings with which his return from France in 1871 was hailed, and the demonstrations in his honour on the various jubilees and other anniversaries which are celebrated with such quasi-religious observance in Germany, bear eloquent testimony to his popularity with his colleagues and his fellow-citizens.

As has been more than once announced in the *BRITISH MEDICAL JOURNAL*, Professor von Nussbaum never quite recovered from a severe attack of influenza which he had in the early part of the winter. In obedience to his own express injunction, a *post-mortem* examination was made, and the immediate cause of death was found to be disease of the heart, which was the seat of fatty degeneration with dilatation and hypertrophy. In addition to this, there was an extremely fatty condition of the liver, and chronic pachymeningitis with marked hyperostosis and thickening of the cranial vault. In other parts of the skeleton a very rare form of fragilitas osium, to which the term "idiopathic osteopsathyrosis" has been applied, was present. In the right femur there were the marks of three spontaneous fractures, two of which were consolidated with an enormous hyperplastic formation of callus, while one (through the neck of the femur) had given rise to a false joint.

ADOLPHUS BEVAN, M.R.C.S., L.S.A.

OLD Guy's men will be sorry to hear of the premature death of Adolphus Bevan, who died on October 30th, after a few days' illness, at the early age of 40. The deceased, who was the youngest son of the late Dr. Bevan, of St. Ives, Cornwall, entered Guy's in 1870, and became L.S.A. in 1874, and M.R.C.S. in the following year. He then settled in Rye Lane, Peckham, where he practised till his death. He was very popular both with his patients and with his professional brethren, among whom his readiness to help in any difficulty and his chivalrous sense of honour made him greatly valued as a colleague and heartily liked and respected as a man. To crown his many good qualities, Adolphus Bevan had that tender consideration for the feelings of the poor and active sympathy with their sufferings which should be "the badge of all our tribe."

ALEXANDER CRERAR, F.R.C.S. EDIN., J.P.

DR. CRERAR, late medical officer of Rannoch, died recently at his residence, Ballinloan Cottage, after a severe illness which had lasted the greater part of the year. For thirty-four years he had efficiently discharged his professional duties over the extensive and sparsely peopled district of Rannoch, and it has been publicly stated that during that time he was never a week off duty. Dr. Crerar is described as being a skilful and highly respected physician as well as a sincere and worthy man. He will be especially remembered for his kindness and attention to the poor. He was a justice of the peace for the county of Perth. He leaves a widow and family, for whom much widespread sympathy is felt.

HOSPITAL AND DISPENSARY MANAGEMENT.

THE FIRST REPORT OF THE ASYLUMS COMMITTEE OF THE LONDON COUNTY COUNCIL.

THIS report, covering a period of fifteen months, is a valuable compilation of facts and figures. The Committee have very properly continued the system of authorising the medical superintendents' reports to be made up for the calendar year ending December 31st. This report deals with a population of no less than 10,104 insane persons, exclusive of the imbeciles provided for by the Metropolitan Asylums Board, lunatics at the workhouses, and those under the care of friends.

There appears to be serious want of asylum accommodation. For their 10,104 lunatics they have only 7,270 beds, and as out of these 200 belong, by agreement, to Croydon, the Committee state "there is a present deficiency of upwards of 3,000 beds, so that with the addition of the 2,000 beds at the Claybury Asylum, now in course of erection (at a cost of £337,945), and an extension of Cane Hill Asylum, which will give 876 more, the requirements of the county will not be adequately met, and they say that under these circumstances before long they may find it necessary to recommend the Council to consider the question of erecting a sixth asylum. The deficiency is now met by boarding out patients at other county asylums, and the Committee contemplate extending this system to meet the present requirements.

In contemplating the obvious necessity of providing for the insane poor of the county, the Committee have not lost sight of the power given them by recent legislation to provide also for paying patients. The wonder is that there should be any doubt about the propriety of doing so. If the income from 500 paying patients would maintain even the same number of paupers free of cost to the ratepayers, there need be no question about its being a financial success in the County of London, as it has been elsewhere. The cost per head for the maintenance of the patients has now been equalised all round, and is now stated to be 9s. 4d. per week. Probably this will have to be increased.

We earnestly hope the Committee will act upon the reiterated suggestion of the Commissioners in Lunacy, and deal with the medical staff of their other asylums in the same manner as they have at Banstead, where they have increased the number of assistant medical officers, and appointed a pathologist and a dispenser; they say "this will cost more than before, but the gain in power for good work is thought to be well worth the cost."

There are four asylums containing patients under the control of the Committee, namely, Banstead, Cane Hill, Colney Hatch, and Hanwell. The daily average number of patients resident in these institutions during the year 1889 was 7,233, namely, 2,837 males, and 4,396 females, and the total number remaining therein on December 31st, last, was 7,225. The mortality calculated upon the average number resident was 9.8 per cent.; 631 were discharged recovered.

INDIA AND THE COLONIES.

INDIA.

LADY DUFFERIN ZENANA HOSPITAL, CALCUTTA.—The building of the Lady Dufferin Zenana Hospital at Calcutta is now making satisfactory progress. The main hospital of two storeys will contain thirty-six beds, there being separate wards for Hindus and Mohamedans. A ward will also be set apart for children, and a sum of Rs. 25,000 has already been subscribed for its support. Synd Mehdi Hussein Khan, of Patna, recently gave Rs. 1,000 in aid of the building fund of the hospital, but at least Rs. 20,000 is still required to complete the work.

MEDICAL NEWS.

THE medical profession in Louisiana has again failed in its endeavour to induce the State legislature to pass a law for the regulation of medical practice.

THE annual dinner of the Metropolitan Police Surgeons' Association will be held at the Criterion Restaurant on Thursday, November 27th, Mr. A. O. Mackellar, F.R.C.S., in the chair.

THE annual dinner of the staff and past and present students of the Dental Hospital of London will take place at the Holborn Restaurant on November 29th, Dr. Joseph Walker, L.D.S., in the chair.

A COMMITTEE of ladies have succeeded in raising a sum of two hundred thousand dollars for the foundation of a Women's Medical College in connection with Johns Hopkins University, and the fund has been accepted by the trustees of the university.

A REPORT recently issued by the Pennsylvania Board of Health shows that there are 8,318 registered medical practitioners in that State, of whom 641 are of foreign birth, every nation except Spain being represented in the list.

SIR OSCAR CLAYTON, C.B., C.M.G., extra-surgeon in ordinary to the Prince of Wales, has been appointed surgeon in ordinary; and Dr. Alan Reeve Manby, of East Rudham, is gazetted surgeon-apothecary to the Prince and Princess of Wales at Sandringham.

THE Darlington Rural Sanitary Authority have been moved to take steps to adopt the Infectious Diseases Notification Act by the discovery that milk was being supplied to Darlington from a house in which a patient suffering from typhoid fever lay ill.

ACCORDING to the first report of the medical officer of health for the county of Lancashire the county death-rate is "most unsatisfactory." In the rural districts the average is not much lower than in the towns, being 16.6 per 1,000, against 18.4 the urban rate.

LONDON PLAYGROUNDS.—Through the efforts of the Metropolitan Public Gardens Association the London School Board has opened to children, on Saturdays, the playgrounds attached to 163 of its schools, including the 12 grounds successfully maintained by the Association as an experiment for the last three years.

SANITARY PLUMBING.—At the last meeting of the Company of Plumbers, the Clerk reported that the County Council for the West Riding of Yorkshire had passed a resolution deciding that, after a specified date, "no plumbers be engaged on work in connection with county buildings except persons duly registered, as suggested by the Worshipful Company of Plumbers."

PROFESSOR VON PETTENKOFER, of Munich, was recently elected a member of the Sanitary Institute of this country, and has just been appointed President of the Royal Bavarian Academy of Sciences, in the place of Dr. Döllinger. The post carries with it that of General Conservator of all the Scientific Collections belonging to the State. The appointment, which dates from November 1st, is for three years.

AMALGAMATION OF HOSPITALS.—The St. Gabriel's Hospital for Infants is about to be amalgamated with the Victoria Hospital for Sick Children at Chelsea. This is undoubtedly a step in the right direction, as the multiplication of small hospitals in the same neighbourhood is undoubtedly an evil, leading to waste of charitable funds. By this amalgamation a considerable saving will be effected.

It is stated that a new journal, with the somewhat ambitious title *L'Univers Médical*, is about to appear in Paris under the editorship of Dr. Séxéno, a pupil of Dr. Apostoli's. The new periodical, and which is understood to be an outcome of the Berlin Congress, will have for its object the promotion of professional solidarity among medical men of all countries, and the furtherance of international co-operation in matters of hygienic reform.

THE Home Secretary has ordered an inquiry into the immediate requirements of the parish of St. Leonard's, Shoreditch, and the commissioners appointed—namely, Dr. Edward Seaton and Mr. Cubitt Nicholls—sat on Thursday last. The Mansion House Council, at whose instance the inquiry has been granted, will be represented, and the London County Council will be represented by its medical officer, Mr. Shirley Murphy.

NEW MEDICAL JOURNAL.—The first number of a new American periodical, the *Review of Insanity and Nervous Diseases*, has recently appeared. It is to be published quarterly, and will contain abstracts, translations, and selections, with only one original article in each number. The editor is Dr. James H. McBride, of Milwaukee, and the agents are B. Westermann and Co., New York, and W. T. Keener, Chicago. The price is 2 dollars a year.

SANITARY SCHOOLS.—In New York also, as in London, the bad sanitary state of some of the public school buildings is being forced upon the attention of the authorities, who seem to have

been hitherto very inert. Recently the Committee on Hygiene of the Medical Society of the State of New York made a strong report, and it is believed that this will have the effect of arousing public attention and forcing on remedial measures.

SMALL-POX IN LISBON.—There is an epidemic of small-pox in Lisbon. Last week there were forty-seven cases in the San José Hospital, besides numerous others in private houses. Several vaccination stations have been established throughout the city, where persons are vaccinated and revaccinated twice a week. It has been decided to utilise for small-pox cases the infectious hospital recently installed in the Arroios Convent for the reception of cholera patients.

PRESENTATION.—An interesting gathering took place recently in the boiler shops of the Neptune Works of Messrs. Wigham Richardson and Co., shipbuilders and engineers, Low Walker, when the Boiler Works Ambulance Corps, under the superintendence of Dr. H. Frazer Hurst executed a number of practical exercises illustrative of first aid to the injured. Dr. Hurst was afterwards presented, by a member of the firm, with a handsome silver tray.

THE After-Care Association for Poor and Friendless Female Convalescents on Leaving Asylums for the Insane report during 1889-90 a steady progress. During the year 66 cases were considered by the Committee, of which 56 were accepted; 25 were placed in convalescent or cottage homes, and others assisted by grants of clothing and money. Dr. Fletcher Beach (Darent Asylum) is among those added to the Council. The Association is pursuing a difficult and laudable work, and deserves both sympathy and support.

FALMOUTH AS A HEALTH RESORT.—We recently remarked, when speaking of the development of Falmouth as a health resort, that a few houses built at Gyllingvaes, a sheltered bay facing south, close to the town, would constitute it a true English sanatorium for many pulmonary affections now sent to foreign climates. It is satisfactory to note that our suggestions have borne fruit, and that the Earl of Kimberley has approved of plans and designs for the erection of baths and villas, in the form of a crescent, on six acres and a half of land behind Gyllingvaes Beach, and that negotiations for the purchase of land are now in hand.

ADULTERATED "BREAD AND BUTTER."—A new departure has been made by the Battersea Vestry in instructing a policeman to purchase at a coffee shop six slices of bread and butter for the purpose of analysing the material passed off as butter, which proved to be margarine. The idea was a good one, as reaching an adulteration affecting the poor, which the ordinary procedure fails to meet. But our contemporary, who records the case, wonders what the magisterial decision would have been had the constable asked, as the class of customers frequenting these low eating-houses mostly do, for six "slices," or some more slang expression, though expecting to be served with bread and "butter."

DEATHS IN THE PROFESSION ABROAD.—Dr. José Montero Rios, Professor in the Medical Faculty of the University of Madrid Councillor of Public Instruction, formerly Rector of the Universities of Santiago and Havana, died suddenly a short time ago. Dr. Hermann Schwarz, Director of the Gynaecological Clinic at Göttingen from 1862 to 1888, died on October 30th, at the age of 69. Dr. Antonio Maria de Senna, Lecturer on Anatomy in the University of Coimbra, Director of the Conde de Ferreiro Lunatic Asylum, and member of the Permanent Section of the Superior Council of Public Instruction at Lisbon, died on October 15th. He was the author of several works.

DEFECTIVE SIGHT IN SCHOOL CHILDREN.—From statistics recently collected by the Municipal Statistical Office of Munich it appears that in 1889 there were, in the public schools of that city, 2,327 children (996 boys and 1,331 girls), or about 8.25 per cent. of the whole number attending, whose sight was defective. The progressive impairment of vision as the child moves upward in the scholastic hierarchy was very remarkable. Thus, while in the first, or lowest classes, 36 out of every 1,000 boys were short-sighted, the corresponding ratio in the second classes was 49, in the third 70, in the fourth 94, in the fifth 108, in the sixth 104, and in the seventh 108, there being thus three times as many short-sighted children in the more advanced classes as in the lowest. In girls the proportion of the short-sighted ranged from 37 per 1,000 in the lowest to 119 in the highest classes.

THE FIRST INSANE ASYLUM IN CHINA.—A committee has been formed in Canton, under the chairmanship of Dr. J. G. Kerr, to obtain funds for founding an insane asylum for Chinese. At the present time there is no such institution in the whole of China, and at the missionary hospitals considerable embarrassment has from time to time been caused by the application of lunatics for treatment. In many instances these unfortunate persons have been left on the hands of the physicians, who have no suitable accommodation for such cases. Messrs. Deacon and Co., of Canton, will receive subscriptions, and the scheme is strongly advocated by Professor E. P. Thwing, of Brooklyn, New York.

CLINICAL SOCIETY OF MANCHESTER.—At the annual meeting held on November 4th, Dr Simpson, President, in the chair, the following gentlemen were elected officers for the ensuing year:—*President:* C. H. Braddon, M.D. *Vice-Presidents:* T. C. Raiton, M.D.; S. Buckley, M.D. *Treasurer:* C. H. Braddon, M.D. *Librarian:* J. F. Le Page, M.D. *Committee:* B. Addy, M.D.; W. Bain; S. Bishop, F.R.C.S.; H. G. Brooke, M.B.; A. Donald, M.D.; J. Ferguson; A. Hirst, M.D.; J. Holmes, M.D.; A. E. Jones, M.D.; H. Lund, F.R.C.S.; G. Pinde; W. Thornburn, F.R.C.S.; A. Wahlruch, M.D.; G. Wright, F.R.C.S.; H. Boddy, M.D. *Auditors:* T. S. Sheldon, M.B.; H. W. Wise, M.B. *Secretaries:* S. H. Owen, M.D.; A. Hill Griffith, M.D. The retiring President, in replying to a vote of thanks, remarked upon the flourishing condition of the Society, and the excellent work it was doing.

ISLINGTON MEDICAL SOCIETY.—This society held its first meeting this session on October 22nd. Mr. Buckston Browne read a paper on Difficult Catheterism. He referred to a form of stricture not mentioned in the textbooks which occurred in elderly men who used unsuitable or damaged catheters or passed them with unnecessary force. From five to five and a-half inches down the urethra the walls of that canal seemed to be in a state of spasmodic contraction, and a certain amount of inflammatory deposit took place. This condition was frequent in cases in which the urethra had been accidentally lacerated during lithotomy. Mr. Browne recommended that in these cases of catheter stricture periodical dilatation should be performed with well burnished steel sounds, or that a soft rubber instrument should be tied in for a few days. In extreme cases internal urethrotomy might be necessary. At the close of the meeting a handsome silver salver was presented by the members of the society to Dr. Alexander Reid, in recognition of his services as honorary secretary during a period of 14 years. Mr. H. Fraser Stokes was elected honorary secretary in succession to Dr. Reid.

THE MEDICAL DEFENCE UNION.—A meeting of the East Anglian and Midland Division was held at Cambridge on November 8th. Dr. Grove, of St. Ives, President of the Huntingdon County Branch, presided. Mr. W. M. Crowfoot, of Beccles, was appointed a Vice-President for Suffolk. After some discussion and suggestions, the steps already successfully taken for the organisation of the division under the direction of Drs. Barnes (Eye), Dr. Holden (Sudbury), Annington (Cambridge), Abbott (Braintree), Grove (St. Ives), Elliston (Ipswich), C. S. Kilner (Bury St. Edmunds), the Honorary Secretary, and others, were approved. The Honorary Secretary (Dr. Mead, of Newmarket) reported that he had made careful inquiry throughout the greater portion of the district as to the prevalence of unqualified practitioners and quacks, and was pleased to be able to report that very little trouble appeared likely to arise to the Council from that cause. The following gentlemen were requested to act as an Executive Committee for the Division: Drs. Annington, Cowen, Latham; Messrs. Wallis, Wherry, Hughes (Cambridge); Dr. Beckett (Ely), Dr. Grove (St. Ives), Dr. Lucas (Huntingdon), Dr. Balding (Royston), Dr. C. S. Kilner (Bury St. Edmunds), Drs. Shaw and May (Lincoln), with power to add to their number.

THE MUNTZ FUND.—At the meeting of the Birmingham City Council on November 10th, a very generous gift to the Medical Charities was announced from Mr. G. F. Muntz, of Umberslade. He has invested in the most reliable securities £21,000, the income from which is to be divided annually between the charitable institutions of Birmingham. The control of the fund is in the hands of ten trustees, one of whom is to be the mayor of Birmingham for the time being, four are to be chosen by the City Council, and five are to be elective, but all honorary medical or surgical officers or paid officials of any institution qualified under the scheme, are excluded from acting. No institution is to be regarded as

possessing an absolute right to participate in the distribution of the trust income, and some are declared ineligible, as lunatic asylums, convalescent homes, institutions supported by the rates, and institutions carried on for private profit. It is, however, definitely stated that the last provision is not to be taken as excluding institutions which receive paying patients, provided that at the same time arrangements are made for the treatment of the deserving poor, either gratuitously or at a nominal cost. In the selection of the charities to be benefited, attention is to be directed to several points: the average cost of patients, the income from permanent endowments, whether during the financial year further investments have been made, the amount of voluntary subscriptions, as showing that the charity has the public confidence, and whether it supplies the needs of the deserving poor.

CARE OF THE INSANE IN THE STATES OF NEW YORK AND PENNSYLVANIA.—At a meeting of the New York State Commission on Lunacy on September 3rd the State was divided into asylum districts in accordance with the State Care of Insane Act passed in the last session of the Legislature. The districts, each of which comprises from six to ten counties, are as follows: Utica, Hudson River, Middletown, Willard, Binghamton, St. Lawrence, and Buffalo. Until such time as the State assumes full charge of the insane, the various counties will be required to pay for their own lunatics at the rate of 4.25 dollars a week for all patients kept in an asylum for three years or less, and 2.50 dollars a week for those detained for any period exceeding three years. In Pennsylvania the institutions for the care of the insane are at Harrisburg, Danville, Norristown, and Warren, all of which are under the direct control of the State. In addition to these there are the Western Pennsylvania Hospital at Dixmont, the Philadelphia Hospital and the Friends' Asylum at Philadelphia, the St. Francis Hospital at Pittsburgh, and Burn Brae, Clifton Heights. The total number of lunatics under confinement in Pennsylvania is 6,884, of whom 3,510 are males, and 3,374 females. Of the whole number, only 182 are coloured. As regards nationality, 4,352 are natives, 2,287 foreigners, and 245 "unknown." The average weekly cost of each patient was at Harrisburg, 3.97 dollars; at Danville, 3.55 dollars; at Norristown, 3.67 dollars; at Warren, 3.20 dollars; at Dixmont, 4.09 dollars; at the Friends' Asylum, 13.23 dollars; and at the Western Pennsylvania Hospital, 8.975 dollars.

MEDICAL VACANCIES.

The following Vacancies are announced:

- ALNWICK INFIRMARY.**—House-Surgeon; unmarried; restricted from private practice; duties include making up prescriptions. Salary, £120 per annum, with furnished apartments, attendance, coal, and gas. Applications to William T. Hindmarsh, Honorary Secretary, by November 21st; election on December 2nd.
- ANCOATS HOSPITAL, Manchester.**—Honorary Physician. Applications to the Honorary Secretary by November 15th.
- 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.
- BOLTON INFIRMARY AND DISPENSARY.**—Senior House-Surgeon; double qualifications. Salary, £120 per annum, increasing by £10 per annum to £150, with furnished apartments, board, and attendance. Applications to Peter Kevan, Esq., Honorary Secretary, 12, Acresfield, Bolton, by December 4th.
- BRADFORD FRIENDLY SOCIETIES' MEDICAL AID ASSOCIATION.**—Qualified Outdoor Assistant. Salary, £120 per annum. Applications to M. Hayes, 18, Clarendon Street, Manningham, Bradford, Yorks.
- 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 15th.
- 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.
- CENTRAL LONDON SICK ASYLUM DISTRICT.**—Assistant Medical Officer and Dispenser for Cleveland Street Asylum; unmarried; double qualifications; knowledge of dispensing. Salary, £100 per annum, with board and residence. Applications on official printed forms to William Appleton, Cleveland Street Asylum, Cleveland Street, W., by November 22nd.

CITY OF LONDON LUNATIC ASYLUM, Stone, near Dartford, Kent.—Clinical Assistant. No salary, but board, lodging, washing, and attendance provided. Applications, on forms to be obtained, must be sent under cover to Henry F. Youle, Clerk to the Committee, addressed to the Visiting Committee of the City of London Lunatic Asylum, Guildhall, E.C., by November 20th.

COUNTY BOROUGH OF SHEFFIELD.—Resident Medical Officer for the Winter Street Hospital; double qualifications. Salary, £200 per annum, with board, lodging, and attendance. Applications endorsed "Resident Medical Officer," to J. W. Pye-Smith, Town Clerk, by November 25th.

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 to £150, with board and lodging, not including alcoholic drinks and aerated waters. Applications to the Secretary, George A. Townsend, by November 28th.

DORSET COUNTY ASYLUM.—Assistant Medical Officer; unmarried; double qualifications. Salary, £135 per annum, with board, etc. Applications to the Medical Superintendent by November 30th.

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.

ESSEX AND COLCHESTER GENERAL HOSPITAL, Colchester.—House-Surgeon and Apothecary; double qualifications; unmarried. Salary, £100 per annum, with board and lodging at the Hospital. Applications to the Committee by December 3rd.

FEMALE ORPHAN ASYLUM, Beddington.—Medical Officer; double qualifications; married; to live within two miles of the Asylum, and will be required to find drugs and all necessary appliances. Salary, £100 per annum. Applications to the Secretary at the offices of the Asylum, 32, Essex Street, Strand, W.C., by November 19th.

GENERAL HOSPITAL FOR SICK CHILDREN, Manchester.—Junior Resident Medical Officer; double qualifications; must devote his whole time to the service of the charity. Salary, £80, with board and lodging; appointment for one year. Applications to the Chairman of the Medical Board by November 22nd.

GENERAL INFIRMARY, Leeds.—Resident Medical Officer for the Ida Convalescent Hospital. Appointment for six months; honorarium, £25. Applications to Mr. W. H. Brown, Secretary of the Faculty, 19, Queen Street, Leeds.

GENERAL INFIRMARY, Stafford.—Assistant House-Surgeon. No salary, but residence, board, and washing. Applications to the House-Surgeon by November 19th.

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.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.—Resident Medical Officer as House-Surgeon; unmarried; appointment for one year. Salary, £50 per annum, with board and residence in the Hospital. Applications to Adrian Hope, Secretary, by December 2nd.

LEICESTER INFIRMARY AND FEVER HOUSE.—Assistant House-Surgeon; double qualifications. Salary, £80 per annum, with board, apartments, and washing. Applications to T. A. Wykes, Secretary, 24, Friar Street, Leicester, by November 22nd.

LIVERPOOL DISPENSARIES.—Two Assistant Surgeons; unmarried. Salary, £80 per annum, with apartments, board, and attendance. Applications to R. H. Greene, Secretary, Leith Offices, 34, Moorfields, Liverpool, by November 24th.

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.

MANCHESTER ROYAL INFIRMARY.—Assistant Medical Officer at Monsall Fever Hospital; appointment for twelve months. Salary, £100 per annum, with board and residence. Applications to the Chairman of the Board by November 29th.

PENRITH UNION.—Medical Officer for the Workhouse and for the 1st Division of the Penrith District. Salary, £38 per annum, with surgical, midwifery, and vaccination fees; will be required to provide medicines and appliances, except cod-liver oil, quinine, and laudanum; must reside in the district. Applications to W. B. Arnison, Clerk, by November 15th.

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

ROYAL SOUTH HANTS INFIRMARY, Southampton.—Assistant Physician. Particulars as to qualifications, etc., to be obtained of T. A. Fisher Hall, Secretary, to whom applications are to be made by November 23th.

ROYAL SOUTH HANTS INFIRMARY, Southampton.—Dentist. Particulars as to qualifications, etc., to be obtained of T. A. Fisher Hall, Secretary, to whom applications are to be made by November 28th.

ROYAL UNIVERSITY OF IRELAND, Dublin.—Examiners in Chemistry, Theory and Practice of Medicine, and Ophthalmic Surgery. Applications to be lodged with the Secretaries, of whom full particulars can be obtained, by December 1st.

ST. JOHN'S HOSPITAL FOR DISEASES OF THE SKIN, Leicester Square, W.C.—Assistant Physician. Applications to St. Vincent Mercier, Secretary, by December 1st.

UNITED FRIENDLY SOCIETIES' MEDICAL ASSOCIATION, Manchester.—Surgeon for a Branch. Salary, £150 per annum, with house, coal, gas, and certain fees; must devote his whole time. Applications, endorsed "Medical Officer," to be addressed to the Chairman of Medical Association, 87, Grosvenor Street, Oxford Street, Manchester, by November 28th.

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 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.

MEDICAL APPOINTMENTS.

BARRETT, W. H., M.B., C.M. Edin., appointed Pathologist to the Royal Infirmary, Edinburgh, *vice* Dr. A. Bruce, resigned.

BARTON, W. E., L.R.C.P. Lond., M.R.C.S. Eng., L.S.A., appointed Medical Officer to the Jarvis Charity, Staunton-on-Wye, Herefordshire, *vice* W. B. Giles, L.R.C.P., M.R.C.S., resigned.

BOOTH, Albert E., M.B., C.M. Edin., appointed House Surgeon to the East Dispensary, Liverpool, *vice* J. Rodley, resigned.

BROCK, William John, M.B. Edin., appointed Medical Officer of Health to the County Council of Caithness.

CASSAL, Charles E., appointed Public Analyst to the Kesteven Division of Lincolnshire, *vice* Dr. C. Graham.

CHOLMELEY, W. F., M.R.C.S., L.R.C.P. Lond., appointed Assistant House-Surgeon to the Norfolk and Norwich Hospital, Norwich, *vice* I. J. Douglas, M.B., C.M. Edin.

CLUCKIE, N. G., M.B., L.F.P.S. Glas., appointed Oculist to the Victoria Eye Infirmary, Paisley.

COSGRAVE, E. MacDowel, M.D., F.R.C.P.I., appointed Examiner in General Education to the Pharmaceutical Society of Ireland.

CRAIG, Frederick A., M.B., B.Ch. Roy. Univ. Irel., appointed Resident Clinical Assistant to the Nottingham Borough Asylum, Mapperley Hill, Nottingham.

DAY, Donald D., M.B., B.S. Lond., F.R.C.S. Eng., appointed Assistant Surgeon to the Norfolk and Norwich Hospital, *vice* Mr. H. S. Robinson, appointed Surgeon.

DE JERSEY, Walter B., B.A., M.B., B.C., etc., appointed House-Surgeon to the Evelina Hospital for Sick Children, *vice* K. F. Gardner, resigned.

DICKSON, T. Hugh, M.A., M.B., B.C. Cantab., M.R.C.S., L.R.C.P., appointed House-Surgeon to the Lincoln County Hospital.

DONALD, J. T., L.R.C.S. Edin., appointed Consulting Surgeon to the Victoria Eye Infirmary, Paisley.

FIRTH, J. Lacy, M.D. Lond., M.R.C.S., L.R.C.P. Lond., appointed House-Physician to the Bradford Infirmary and Dispensary, *vice* Dr. James Kerr, M.A., M.B., B.Ch., D.P.H.

GAIRDNER, James, M.D. Edin., L.R.C.S., appointed District Medical Officer of Health to Crieff, etc.

GAYLOR, Edward, L.R.C.P. Edin., L.F.P.S. Eng., reappointed Medical Officer of Health to the Alfreton Local Board.

HART, E. J. Tulk, M.D. Dur., M.R.C.S. Eng., L.S.A., appointed Honorary Consulting Surgeon to the Brighton, Hove, and Preston Dispensary, *vice* Mr. Crawford J. Pocock, deceased.

HOOD, Dr. C. J. Jacomb, appointed Honorary Medical Officer to the Brighton, Hove, and Preston Dispensary.

MACNAUGHTON, William A., M.A., M.D., C.M. Edin., D.P.H. Camb., etc., appointed Medical Officer of Health for the County of Kincardine.

MANBY, E. P., M.B., B.S. Cantab., M.R.C.S. Eng., appointed House Surgeon to the South Dispensary, Liverpool, *vice* W. K. Dalzell, resigned.

MORRIS, H. G., L.R.C.P., M.R.C.S., appointed House-Physician to the Middlesex Hospital.

MORTON, Dr. Edwards, appointed Medical Officer to the Redditch Local Board, *vice* Dr. C. C. Smith, resigned.

REID, George, M.D., D.P.H. Aberd., appointed Medical Officer of Health to the Staffordshire County Council.

ROBINSON, Haynes Sparrow, M.R.C.S., L.S.A., appointed Surgeon to the Norfolk and Norwich Hospital, *vice* Mr. Cadge, resigned.

SMYTH, Dr., appointed Medical Officer for the Amble District of the Alnwick Union, *vice* Dr. Currie, deceased.

SOUTHWELL, Charles, Ph.C. by exam. (Boston), appointed Public Analyst for the Holland Division of Lincolnshire.

STANWELL, C. O., M.R.C.S., L.R.C.P., L.M. Edin., appointed Junior Assistant Medical Officer to the St. Andrew's Hospital, Northampton, *vice* Dr. McLeod, M.B., C.M., M.A. Edin.

STEVENSON, Louis E., B.A., M.B. Cantab., reappointed House-Surgeon to the Cumberland Infirmary, Carlisle.

TAYLOR, James, M.D. Edin., M.R.C.P. Lond., appointed Registrar and Pathologist to the National Hospital for Paralysis and Epilepsy, Queen Square, *vice* Walter S. Colman, M.B., M.R.C.P. Lond., resigned.

TEMPLETON, Percy, M.R.C.S., L.R.C.P., appointed House-Physician to the Great Northern Central Hospital, Holloway Road, N., *vice* Gordon A. Lang, M.B., C.M. Edin.

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.—Dr. Cheadle: Clinical Lecture on Medical Cases. 5 P.M.—Dr. Savill: Pathological Demonstration.

MEDICAL SOCIETY OF LONDON, 8.30 P.M.—Sir William Roberts: On the Deposition of Urates in the Tissue considered as a Separate Pathological Incident, with a Suggestion for a Distinctive Name. Dr. G. H. Savage: On some Relationships between Diabetes and Insanity.

TUESDAY.

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

PATHOLOGICAL SOCIETY OF LONDON, 8.30 P.M.—Mr. Hurry Fenwick: Hydatid Sac in Pelvis obstructing Both Ureters. Mr. John R. Lunn: Hydatid. Dr. Wethered: Psilosis. Mr. A. Bowlby: Occlusion of the Subclavian Artery from Contusion. Dr. J. A. Ormerod: Aneurysm of the Heart. Dr. G. Gulliver: Atrophy of Heart. Dr. Norman Moore: Ulceration and Perforation of Gall-bladder without Calculi. Dr. Montague Murray: Ulcer under Vocal Cord followed by General Emphysema. Dr. A. F. Voelcker: Caseous Gland opening into the (Esophagus. Card Specimen: Dr. G. Gulliver: Aneurysm of Heart.

ROYAL STATISTICAL SOCIETY, Royal School of Mines, 28, Jermyn Street, S.W., 7.45 P.M.—Inaugural Address by the President, Dr. Frederic John Moutat.

WEDNESDAY.

LONDON POST-GRADUATE COURSE, Hospital for Consumption and Diseases of the Chest, Brompton, 4 P.M.—Dr. Percy Kidd: On the Morbid Anatomy of Pulmonary Phthisis and its bearing on Diagnosis and Prognosis, with Clinical and Pathological Illustrations. Royal London Ophthalmic Hospital, Moorfields, 8 P.M.—Mr. A. Quarry Silcock: Ophthalmoscopic Cases.

ROYAL MICROSCOPICAL SOCIETY, Hanover Square, 8 P.M.—Mr. A. T. Watson: The Tube-building Habits of Terebella Littoralis. Surgeon V. Gunson Thorpe: Note on a New Marine Annelid. Adjourned Special General Meeting: Alteration of By-laws.

ROYAL METEOROLOGICAL SOCIETY, 25, Great George Street, Westminster, 7 P.M. The President, Mr. Baldwin Latham, M. Inst. C.E., F.G.S., will deliver an address on the Relation of Ground Water to Disease.

THURSDAY.

LONDON POST-GRADUATE COURSE, National Hospital for the Paralysed and the Epileptic, 2 P.M.—Dr. Ormerod: Demonstration of Selected Cases. Hospital for Sick Children, Great Ormond Street, 4 P.M. Mr. J. H. Morgan: The Modern Aspects of Operative Surgery in Childhood, No. 1.

HARVEIAN SOCIETY OF LONDON, Stafford Rooms, Tichborne Street, Edgware Road, 8.30 P.M.—Dr. Champneys: The Harveian Lectures on Painful Menstruation. Lecture I.

MEDICO-PSYCHOLOGICAL ASSOCIATION OF GREAT BRITAIN AND IRELAND, Bethlem Hospital, 4 P.M.—Dr. Percy Smith will open a discussion on the Working of the New Lunacy Act. Dr. Moody will exhibit and describe a Lock for Single Room Doors. Dr. Hyslop will show and describe Pathological Specimens.

FRIDAY.

LONDON POST-GRADUATE COURSE, Hospital for Consumption and Diseases of the Chest, 4 P.M.—Dr. Percy Kidd: On the Examination of the Sputum for Tubercle Bacilli, with Practical Demonstration.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 8s. 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.

BIRTHS.

ACLAND.—On November 7th, at 7, Brook Street, W., Caroline, wife of Theodore Dyke Acland, M.D., of a son.

MOIR.—On Sunday, October 19th, at 8, Right Flank Lines, Poona, the wife of Surgeon J. Drew Moir, Army Medical Staff, of a daughter.

MARRIAGES.

CALROW—HANDLEY.—On November 5th, at Bury Parish Church, by the Rev. John Bealey, Vicar of St. Hilda's, Middlesbrough, cousin of the bride, and assisted by the Rev. F. E. Hooewood, Rector of Bury, Thomas Calrow, M.R.C.S. Eng., Bolton Street, Bury, Lancashire, to Florence Amy, third daughter of Joseph Handley, Esq., Spring Wells, Bury, Lancashire. No cards.

DARTER—MORRIS.—On November 7th, at Christ Church, Whitley, Reading, by the Rev. Edward A. Bury, assisted by the Rev. G. K. Turner, Vicar of the parish, George B. Silver Darter, M.B., second son of W. B. Silver Darter, Cape Town, South Africa, to Lilian Kate, eldest daughter of Edward Morris, Southern Hill, Reading.

FRYER—WYON.—On November 5th, at Booterstown Church, co. Dublin, William Francis Fryer, L.R.C.P., L.R.C.S. Edin., Mendlesham, Suffolk, to Belinda Frances Wyon, Blackrock, co. Dublin.

HOURS OF ATTENDANCE AND OPERATION DAYS AT THE LONDON HOSPITALS.

- CANCER, Brompton (Free).** *Hours of Attendance.*—Daily, 2. *Operation Days.*—Tu. S., 2.
- CENTRAL LONDON OPHTHALMIC.** *Operation Days.*—Daily, 2.
- CHARING CROSS.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetric, Tu. F., 1.30; Skin, M. 1.30; Dental, M. W. F., 9. Throat and Ear, F., 9.30. *Operation Days.*—W. Th. F., 3.
- CHELSEA HOSPITAL FOR WOMEN.** *Hours of Attendance.*—Daily, 1.30. *Operation Days.*—M. Th., 2.30.
- EAST LONDON HOSPITAL FOR CHILDREN.** *Operation Day.*—F., 2.
- GREAT NORTHERN CENTRAL.** *Hours of Attendance.*—Medical and Surgical, M. Tu. Wed. Th. F., 2.30; Obstetric, W., 2.30; Eye, Tu. Th., 2.30; Ear, M. F., 2.30; Diseases of the Skin, W., 2.30; Diseases of the Throat, Th., 2.30; Dental Cases, W., 2. *Operation Day.*—W., 2.
- GUY'S.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetric, M. Tu. F., 1.30; Eye, M. Tu. Th. F., 1.30; Ear, Tu., 1; Skin, Tu., 1; Dental, daily, 9; Throat, F., 1. *Operation Days.*—(Ophthalmic), M. Th., 1.30; Tu. F., 1.30.
- HOSPITAL FOR WOMEN, Soho.** *Hours of Attendance.*—Daily, 10. *Operation Days.*—M. Th., 2.
- KING'S COLLEGE.** *Hours of Attendance.*—Medical, daily, 2; Surgical, daily, 1.30; Obstetric, daily, 1.30; o.p., Tu. W. F. S., 1.30; Eye, M. Th., 1.30; Ophthalmic Department, W., 2; Ear, Th., 2; Skin, F., 1.30; Throat, F., 1.30; Dental, Tu. Th., 9.30. *Operation Days.*—Tu. F. S., 2.
- LONDON.** *Hours of Attendance.*—Medical, daily, exc. S., 2; Surgical, daily, 1.30, and 2; Obstetric, M. Th., 1.30; o.p. W. S., 1.30; Eye, Tu. S., 9; Ear, S., 9.30; Skin, Th., 9; Dental, Tu., 9. *Operation Days.*—M. Tu. W. Th. S., 2.
- METROPOLITAN.** *Hours of Attendance.*—Medical and Surgical, daily, 9; Obstetric, W., 2. *Operation Day.*—F., 9.
- MIDDLESEX.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetric, M. Th., 1.30; o.p., M. F., 9, W. 1.30; Eye, Tu. F., 9; Ear and Throat, Tu., 9; Skin, Tu., 4, Th. 9.30; Dental, M. W. F., 9.30. *Operation Days.*—W., 1, S., 2; (Obstetric), W., 2.
- NATIONAL ORTHOPEDIC.** *Hours of Attendance.*—M. Tu. Th. F., 2. *Operation Day.*—W., 10.
- NORTH-WEST LONDON.** *Hours of Attendance.*—Medical and Surgical, daily, 2; Obstetric, W., 2; Eye, W., 9; Skin, Tu., 2; Dental, F., 9. *Operation Day.*—Th., 2.30.
- ROYAL FREE.** *Hours of Attendance.*—Medical and Surgical, daily, 2; Diseases of Women, Tu. S., 9; Eye, M. F., 9; Dental, Th., 9. *Operation Days.*—W. S., 2; (Ophthalmic), M. F., 10.30; (Diseases of Women), S., 9.
- ROYAL LONDON OPHTHALMIC.** *Hours of Attendance.*—Daily, 9. *Operation Days.*—Daily, 10.
- ROYAL ORTHOPEDIC.** *Hours of Attendance.*—Daily, 1. *Operation Day.*—M. 2.
- ROYAL WESTMINSTER OPHTHALMIC.** *Hours of Attendance.*—Daily, 1. *Operation Days.*—Daily.
- ST. BARTHOLOMEW'S.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetric, Tu. Th. S., 2; o.p., W. S., 9; Eye, W. Th. S., 2.30; Ear, Tu. F., 2; Skin, F., 1.30; Larynx, F., 2.30; Orthopaedic, M., 2.30; Dental, Tu. F., 9. *Operation Days.*—M. Tu. W. S., 1.30; (Ophthalmic), Tu. Th., 2.
- ST. GEORGE'S.** *Hours of Attendance.*—Medical and Surgical, M. Tu. F. S., 12; Obstetric, Th., 2; o.p., Eye, W. S., 2; Ear, Tu., 2; Skin, W., 2; Throat, Th., 2; Orthopaedic, W., 2; Dental, Tu., S., 9. *Operation Days.*—Th., 1; (Ophthalmic), F., 1.15.
- ST. MARK'S.** *Hours of Attendance.*—Fistula and Diseases of Rectum, males, W., 8.45; females, Th., 8.45. *Operation Days.*—M. Tu., 2.30.
- ST. MARY'S.** *Hours of Attendance.*—Medical and Surgical, daily, 1.45, o.p., 1.30; Obstetric, Tu. F., 1.45; Eye, Tu. F. S., 9; Ear, M. Th., 3; Orthopaedic, W., 10; Throat, Tu. F., 1.30; Skin, M. Th., 9.30; Electrotherapeutics, Tu. F., 2; Dental, W. S., 9.30; Consultations, M., 2.30. *Operation Days.*—Tu., 1.30; (Orthopaedic), W., 11; (Ophthalmic), F., 9.
- ST. PETER'S.** *Hours of Attendance.*—M., 2 and 5, Tu., 2, W., 2.30 and 5, Th., 2, F. (Women and Children), 2, S., 3.30. *Operation Day.*—W. 2.
- ST THOMAS'S.** *Hours of Attendance.*—Medical and Surgical, daily, except Sat., 2; Obstetric, Tu. F., 2; o.p., W., 1.30; Eye, M. Tu. W. Th., F., 1.30; o.p., daily, except Sat., 1.30; Ear, M., 1.30; Skin, F., 1.30; Throat, Tu. F., 1.30; Children, S., 1.30; Dental, Tu. F., 10. *Operation Days.*—W. S., 1.30; (Ophthalmic), Tu., 4, F., 2.
- SAMARITAN FREE FOR WOMEN AND CHILDREN.** *Hours of Attendance.*—Daily, 1.30. *Operation Day.*—W., 2.30.
- THROAT, Golden Square.** *Hours of Attendance.*—Daily, 1.30; Tu. and F., 6.30. *Operation Day.*—Th., 2.
- UNIVERSITY COLLEGE.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetrics, M. W. F., 1.30; Eye, M. Th., 2; Ear, M. Th., 9; Skin, W., 1.45, S., 9.15; Throat, M. Th., 9; Dental, W., 9.30. *Operation Days.*—W. Th., 1.30; S., 2.
- WEST LONDON.** *Hours of Attendance.*—Medical and Surgical, daily, 2; Dental, Tu. F., 9.30; Eye, Tu. Th. S., 2; Ear, Tu., 10; Orthopaedic, W., 2; Diseases of Women, W. S., 2; Electric, Tu., 10, F., 4; Skin, F., 2; Throat and Nose, S., 10. *Operation Days.*—Tu. F., 2.30.
- WESTMINSTER.** *Hours of Attendance.*—Medical and Surgical, daily, 1; Obstetric, Tu. F., 1; Eye, M. Th., 2.30; Ear, M., 9; Skin, W., 1; Dental, W. S., 9.15. *Operation Days.*—Tu. W., 2.

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.

LEX asks if it is possible to use a 2 x 2 quart galvanic bichromate cells for an electric bell, and the best place to obtain directions, and wire, bell, etc.

B.E. would be glad to be informed which is the best kind of filter for placing inside a cistern.

PRACTICE IN SOUTH AFRICA.

L.R.C.P. asks for information as to the prospects of medical practice in South Africa, and as to medical appointments in the new South African companies.

ANSWERS.

LEX is referred to the paragraphs headed "Professor Koch and the Tubercle Bacillus," in the BRITISH MEDICAL JOURNAL of November 1st, and subsequent numbers.

MEDICUS.—The vacancy in the staff of the Medical Department of the Local Government Board, caused by the death of Dr. Page, was filled up some months ago by the appointment of Mr. T. W. Thompson, whose latest public office prior to his appointment was that of medical officer of health for a number of sanitary districts in Hertfordshire and Middlesex.

PREVENTION OF FLEA-BITES.

DR. C. RICHARDSON (Leeds) writes: I am surprised no one has mentioned camphor for the above. It should be put into the drawers containing the underclothing in such quantity as will give each article, when taken out, a very perceptible odour of the drug. This mode is easy, pleasant, and effective.

THE DETENTION OF CHRONIC INEBRIATES.

M.B.—In no circumstances can any inebriate be received or detained in a licensed retreat (the only place in which anyone can be received under the Inebriates Act) without his or her expressed consent, in writing, before two justices or one metropolitan police magistrate.

NIGHT PLATES.

DR. GEORGE F. GRANT (London) writes: In answer to "Night Bell's" query. W. C. Horne, 6, Dowgate Hill, London, E.C., sells luminous tablets of varnished felt, with "Night Bell" on it, for about 1s. or 1s. 6d. I believe they also have the tablets covered with glass at a slightly higher price.

COTTAGE HOSPITAL RULES.

NEMO.—There does not appear to be anything in the rules for a cottage hospital forwarded by our correspondent to which serious objection need be taken, with one exception. It is in most cases advisable to place all reputable practitioners in a town on the same footing, but the special circumstances of the town in question having rendered amalgamation with a pre-existing dispensary advisable, a compromise was no doubt necessary. The rule empowering the committee to contract with any corporation, society, club, mill, etc., or any person for the providing of medical and surgical assistance at the institution as may be required, on such terms as the committee may think fit, is undoubtedly liable to be abused. If any tendency to such abuse should appear, the honorary surgeons would do well to make a collective representation to the committee. The rules ought to be numbered.

NOTES, LETTERS, ETC.

A PROPHET IN HIS OWN COUNTRY.

MR. EDISON'S phonograph is said to have been banished recently from Fairmont Park, Philadelphia, because the "learned Thebans" in authority there, believed it to be injurious to the hearing, and a source of danger to the public, from the possibility of contagion being conveyed by the rubber tubes placed in contact with the ears.

or honour of our profession that I feel driven to state some objections to any such rule as is suggested being laid down or sanctioned.

When called to attend a suffering fellow-creature, the first, and I take it the only consideration as to treatment, should be as to what will be the best for the patient, and I am certain that not a thought of the consequences to the art and science of surgery should be allowed to weigh as against such a consideration, or turn us a hairbreadth from what we feel to be best in our patient's interest.

I may be met with the objection that in many cases failure might be attributed to want of skill, and that as a doctor's very existence depends upon his reputation, he cannot afford to risk it even for his patient's sake. Well, such an argument would prove too much, for if it be valid when the patient is moribund, what shall be said when some operation of expediency being undertaken in a healthy and vigorous subject, there follows, as is, alas! not unknown, some unavoidable surgical accident.

If it be said that a general refusal to operate in the "too late" class of cases would lead to an earlier call for surgical aid, I answer that such a question can only arise in any case when we are actually at the bedside, and then, as I insist, our thought should solely be for the patient then before us, and not of any fancied general benefit to be derived from a deviation from such a course.

A patient suffering from acute intestinal obstruction is, I believe, if unrelieved by operation, practically doomed to certain and speedy death, so that in a hundred such cases where operations have been performed, if there be but one success, I hold that that single human life would be justification ample and complete; and since unsuccessful though the procedure may be, its results are greatly better, happily, than suggested, the argument is proportionately more unanswerable.

These arguments may be held to apply to all "hopeless" cases, and I am content that it should be so; my single contention is that in every case our patient should be our only care, and not a thought should be allowed to wander to any "table of results." Surely success in only 5 per cent. of cases is vastly more honourable when each case is thus honestly dealt with than the more brilliant fifty, sixty, or it may be even higher percentage of another surgeon, when in the background of which we see and know nothing, there have been a ghastly company allowed to die miserably, some at least of whom might have benefited by operation had that aid not been refused from the dread of "spoiling a percentage."

In conclusion I would say I do not advocate indiscriminate nor adventurous surgery, I only plead that each case merits and demands attention from a standpoint peculiar to it and separate from any outside consideration. Neither do I insinuate that the feeling mentioned in my last paragraph is consciously admitted by anyone; but I contend that any "benefit to surgery" being permitted to obtrude amongst the deciding factors in any case lead insensibly perhaps, but directly in that direction. Which amongst us would venture to give it as a reason to a relation or friend of the sufferer for holding our hand and refusing the "only chance?"

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

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