

right lobe of the thyroid commenced to swell, but never became so large as the left.

A paint containing equal parts of belladonna and glycerine was applied over the swelling, together with hot fomentations; and in a few days the pain and tenderness disappeared, the temperature became normal, and at the same time the discharge from the uterus ceased. But the swelling did not begin to subside until ten days after all acute symptoms had disappeared; it had, however, ceased to cause pain or inconvenience. When I saw her two months afterwards the enlargement had entirely disappeared.

I may mention that she has lived all her life in Bath, but that her sister suffers from a chronic goitre.

When I first saw this case I hesitated to connect the swelling of the thyroid with parturition, as I could not remember having read or heard of goitre as one of the diseases complicating the puerperal period; but on mentioning the case to Dr. John Williams, he wrote me: "Your case is an exceedingly interesting one, and apparently one of acute goitre connected with parturition and the puerperal period. The disease has been observed during pregnancy, and has proved serious and very fatal, but I do not now remember a case coming on during the puerperal period."

Mr. Lawson Tait, in an article in the *British Obstetrical Journal*, 1875, records several instances of the occurrence of the disease during pregnancy. In one it commenced during the fifth month of the first pregnancy, and recurred in each subsequent one. After the first two labours it disappeared entirely, but never again completely disappeared, although after labour it diminished in size. He mentions twenty cases, in all of which there was a tendency to hæmorrhage and flooding after labour. He found that pot. bromide improved the hæmorrhage, and that iron always made it worse. No treatment improved the goitre.

Dr. Mitchell, in the *British and Foreign Med.-Chir. Review*, 1862, remarks that during the period of menstruation there is often a temporary increase in the size of the thyroid, which is still more marked during pregnancy and lactation.

I can find no reference to any case in which the disease commenced after labour, and the question is: Are we to connect the enlargement of the thyroid in this case with the puerperal condition? It might be suggested that the pain in the back and the uterine discharge was the early return of a normal monthly period, but I think it would be unusual for such an occurrence to take place only three weeks after parturition, and it will be noticed that when the acute symptoms disappeared the pain and discharge ceased.

Acute goitre, under any circumstances, is a disease of rare occurrence, often ending fatally in a few days, as, owing to the rapid enlargement of the thyroid body, the fascia of the neck covering it does not stretch with sufficient rapidity, and consequently there is the danger of asphyxia from compression of the trachea. Fortunately in the case, an account of which I have just given, the thyroid did not reach such a size as to produce any dyspnoea or difficulty in swallowing, although this question presented itself to my mind—"Supposing the swelling increases and death from asphyxia should become imminent, what would be the best treatment to relieve the patient?" Such a case might occur. The dyspnoea might come on suddenly in the night. The surgeon may be single handed, the dyspnoea urgent and distressing, and death from asphyxia imminent.

Erichsen says: "It is difficult in these cases to know how to save the patient, for tracheotomy by the ordinary method may be impracticable, owing to the manner in which the tumour dips down behind the sternum." Then, again, the trachea may be displaced and so difficult to find, or so far from the surface that the ordinary tubes will not reach it, or remain *in situ* should they be of sufficient length, as in a case quoted in the *Lancet* of March 15th of this year. It has been suggested that by dividing the fascia covering the tumour relief may be obtained. And, as a last resource, the isthmus of the thyroid may be divided accurately in the middle line, but it is necessary that this should be done with the cautery (an instrument which may not always be at hand), so as to limit the hæmorrhage, which otherwise would be very severe.

SMALL-POX is prevalent in St. Petersburg to such an extent, that the Municipal Committee of Public Hygiene has found it necessary largely to increase the hospital accommodation available for patients suffering from that disease. Catarrh is also epidemic in the Russian capital to a much greater degree than is usual at this time of the year.

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

### LABOUR OBSTRUCTED BY VAGINAL ATRESIA.

A CASE of labour where an organic stricture of the vagina caused obstruction to the expulsion of the child from the womb is of sufficient interest and rarity to require no apology for placing it on record.

Mrs. W., primipara, aged 36 years, began labour on March 10th, 1889, at 8 A.M. Two hours later, at my first visit, I found the pains very severe, and coming on every few minutes. On examination by the "toucher," a most unusual condition of parts was made out. At the upper extremity of the vagina my finger slipped into a firm rigid contraction of the vaginal walls, passing round the whole lumen of the canal. Pushing my finger through this contraction for some little distance, I came on the membranes, and at their circumference the os uteri dilated almost to its full extent. The condition of parts having been confirmed the patient was placed under chloroform. This had no effect on the stricture, even when pushed to the usual extent for midwifery practice, and made clear to me that operative interference was necessary. A blunt-pointed bistoury was placed along the left forefinger and the stricture divided. The membranes were ruptured, and an attempt made to apply Simpson's forceps. After some difficulty this was accomplished, and applying moderate traction the labour was brought to an end without further difficulty.

It is difficult to explain the presence of this stricture. The most careful inquiry fails to disclose any possible cause. There is no history of leucorrhœa at any period of the woman's life. The fact that at this date the stricture has completely disappeared excludes cancer. Here one must go back to childhood and the exanthemata and ask: Is this the result of a vaginitis, or can it have been a congenital condition?

Batbye, Yorks.

JOHN STEWART, M.B., C.M. Glasgow.

### TOTAL NECROSIS OF LEFT UPPER JAW AND MALAR BONE.

ON June 1st I removed the necrosed left upper jaw and malar bone of an Arab boy, aged 15 or 16 years. The orbital margin of dead bone projected through a gap in the cheek, and the lower eyelid was drawn down towards it and everted. The bone was easily extracted through an anterior incision. The disease was stated to have begun in a "boil" at the orbital margin three or four years before, and had progressed without pain or acute symptoms of any kind. The boy seemed of good constitution, and I failed to connect the illness with any of the recognised causes. In the specimen the two bones are complete, except the posterior and neighbouring inner wall of the antrum and a part of the nasal process. But they are pitted in places from superficial caries, especially the palatal process. Most of the teeth had dropped out, and the remaining ones were carious. But the boy's other remaining teeth were sound.

After removal of the bone the gap in the cheek gaped still further, and had to be closed by a plastic operation, which, however, failed to release the eyelid, and has still left an opening close to the nose, exposing the nasal duct. The boy is now (October 8th) strong and well. The malar bone seems to have been entirely replaced, but the only sign of regeneration in the maxilla are some small plates, apparently of bone, in the anterior wall near the nose. The inferior turbinate bone was never seen. The other bones seem all healthy; and the aperture of the infundibulum is seen outside the middle turbinate bone discharging muco-pus. The case is noticeable from the extent of the necrosis and the obscurity of its origin.

Aden.

H. HERBERT, Surgeon I.M.S.

### INFLUENZA (?) CATALEPSY.

MR. E. was seized on October 27th with a severe shivering fit, and complained of having "felt ill" for two days previous to this; there was considerable lumbar pain, aching of limbs, etc., severe frontal headache, and the usual symptoms of "influenza," with the exception of the temperature, which was 97.4°. In the evening of that day he got very drowsy, and fell asleep, in which condition he remained till early in the morning of November 1st. Nothing seemed to rouse him, and it was with the greatest diffi-

culty that any food, in the shape of beef-jelly and champagne, could be given in the smallest quantities at a time. The skin was dry, bowels not relieved without medicine, and hardly any urine passed, or secreted, during his five days' sleep; the pupils were rather dilated, and only acted to light in a sluggish manner; the temperature remained subnormal. On my visiting him on the morning of November 1st he was quite roused, and remembered nothing since he was first put to bed, but expressed himself as "all right;" on getting out of bed, however, he speedily fainted, and at present seems quite incapable of the slightest exertion.

Wimbledon.

W. H. FROME YOUNG.

**FRACTURE OF THE HUMERUS BY MUSCULAR ACTION.**  
THE rareness of fracture of the humerus through muscular action induces me to publish the following case:

E. H., aged 30, a policeman, described by his comrades as having always been a delicate man, was taking part in a contest of "throwing the cricket ball" at the police sports, when he felt his arm snap, and, on my examining it, I found a complete fracture of the humerus at the lower third.

St. John's Wood Park.

E. CLIMSON GREENWOOD.

#### THE CONNECTION OF ACUTE PNEUMONIA WITH EXTERNAL INJURY.

DR. HEIMANN (*Berlin. klin. Wochenschr.*, October 6th; summarised in *WEEKLY EPITOME*, October 18th) discusses the possibility of pneumonia arising in this way, giving a case from his own practice; and as one of almost similar detail has come under my observation within the past few weeks, it may be of some interest to record it. T. S., aged 50, fell from a height of several feet whilst unloading a cart of hay, his left side coming into violent contact with the projecting shaft, causing a contusion of the thorax over the lower pulmonary area, but no ribs were broken. He was confined to bed with symptoms of concussion, from which he soon recovered, but four days later he complained of severe pain in the side injured, with high temperature, hurried respiration and cough, my diagnosis being confirmed on the sixth day by the presence of the usual physical signs incident to pneumonia. The case went on to a satisfactory termination in three weeks, and as the patient was in perfect health prior to the injury, must have been purely traumatic in character.

Workshop.

JAMES MENZIES, L.R.C.P., L.R.C.S. Edin., etc.

#### A CASE OF LEFT CÆCAL HERNIA.

At a necropsy the other day in the County Asylum, Whittingham, the above exceedingly rare abnormality was unexpectedly discovered. The subject of the *post-mortem* examination was a chronic male lunatic, aged 69. Admitted eight years ago on account of recurrent outbreaks of alcoholic insanity, with delusions of suspicion and persecution, he gradually drifted into secondary dementia, and died of progressive senile weakness, with chronic bronchitis and pulmonary congestion. About five years ago a left oblique inguinal hernia was first noticed. It slowly increased in size till it became scrotal and was always partially reducible. Externally there was apparently nothing indicative, either to inspection or palpation, of anything unusual in the contents of the hernia, and the patient was too demented to manifest by any subjective signs of uneasiness—if he experienced any—that he felt discomfort from the unusual situation of his *caput cæcum coli*.

On throwing open the peritoneal cavity and turning aside the coils of the small intestine, the large gut was seen crossing obliquely from the right lumbar region at the lower level of the kidney and applied to the posterior wall of the abdomen, till it disappeared through the left internal inguinal ring. On making firm traction the bowel gradually slipped from the ring, and the contents of the hernial sac were then seen to be the cæcum with the appendix vermiformis and a small portion of the small intestine at its junction with the cæcum. The tip of the cæcum occupied the lowest point of the sac, which just covered the left testis. The sac itself was perfect; the peritoneal surfaces retained their polish, though there was distinct thickening of that membrane, and the only evidence of inflammatory change was the firm agglutination of the appendix along its whole length to the cæcum, this being due evidently to pressure. The length of bowel included in the sac was about eight or nine inches, and there were no remains of a meso-cæcum; but the free portion of the ascending large intestine, which extended from the right

kidney to the left internal inguinal ring had a distinct meso-colon. As might be expected, the calibre of the cæcum was greatly diminished. The ring just admitted the distal phalanges of the thumb and first two fingers; the patient possibly escaped strangulation of the gut owing to the sedentary habits and diminished appetite of advanced senility.

Hernia of the cæcum is in any case of uncommon occurrence; but I am aware of only one recorded instance of left cæcal hernia. The one referred to is mentioned in Mr. Treves's paper on "Hernia of the Cæcum," in the *Medical Society's Proceedings*, vol. x. The case was one of left inguinal hernia in a male, containing the cæcum, and is described in Pitha and Billroth's *Handbuch* (Stuttgart, 1878). Mr. Treves has since informed me that a still more remarkable case occurred in his practice—one of left inguinal hernia in a woman—containing the cæcum and its appendix.

In the case which I have described, the most unusual situation of the cæcum was evidently due, to some extent at any rate, to the loose attachment of the commencing part of the great bowel. In my experience it is most exceptional to find the cæcum so closely applied to the right iliac fossa as is usually described; Nature gives it a latitude of motion and length of tether denied to it by the standard textbooks on anatomy.

R. SINCLAIR BLACK, M.A., M.B., C.M., D.P.H.

County Asylum, Whittingham.

## REPORTS

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

#### CAMBRIDGE HOSPITAL, ALDERSHOT.

##### SIX CASES OF LIGHTNING STROKE AT ALDERSHOT.

(Reported by J. E. TRASK, M.R.C.S. Eng., L.R.C.P. Lond., Surgeon Medical Staff.)

I PURPOSELY delayed the publication of the above cases, as I wished first to ascertain whether the five surviving men were in any way incapacitated for their duties as soldiers or not. The note recently made as to the condition of three of them gives, to some extent, an idea of the severity of the shock which they sustained.

Some particulars of five of the above cases have already appeared in a medical journal of October 4th, 1890.

A cricket match was in progress at the Divisional Cricket Ground, Aldershot, on August 2nd, 1890. The morning of that day was fine and warm. After luncheon the sky became overcast, and distant thunder was once or twice heard.

It may here be mentioned that the cricket ground is surrounded on three sides—west, south, and east—by trees, mostly birch, with a few tall poplars on the south-west border. Here several soldiers were lying down, watching the match. The north side of the ground is open, but a canal winds along about 300 yards distant. About 3.45 a heavy black cloud came up from the west, and seemed to concentrate itself immediately over our heads. The Aldershot eleven, with myself, were fielding at the time. One or two heavy drops of rain fell, and then simultaneously came a tremendous crash of thunder, accompanied by very vivid and forked lightning. Every one of us in the field felt it to some extent. I thought a small stone had struck me smartly on the top of the head. Every one for the moment appeared paralysed. The ball had just been delivered, and neither the batsman nor the wicket keeper knew anything about it, and it went to the boundary. Immediately there was a shout from the men under the trees on the west side of the ground, proclaiming that some accident had happened. It was found that six men had been struck by lightning. The injured ones were at once dragged on to the ground, away from the trees, by their comrades. I ran across to them, and went to the one who appeared the worst, whom we will call Private E. He was lying with his left shoulder and head in contact with a tree, which was the first of a row of high poplars, and the only one struck. His face was cold, clammy, and slightly blue, hands blanched and very cold. Conjunctivæ congested; pupils dilated, fixed, and markedly oval in a vertical direction. No pulse could be felt at the wrist. Respiration had apparently ceased. Without further examination, I at once undid his coat, and started artificial respiration. After about twenty minutes, he

## THE ROYAL COLLEGE OF SURGEONS AND ITS FELLOWS AND MEMBERS.

THE following letter has been received by the Secretary of the Association of Fellows in reply to the representations<sup>1</sup> made by the deputation which recently waited on the Council and to the written statement subsequently presented:—

Royal College of Surgeons of England,  
Lincoln's Inn Fields, London, W.C.  
14th day of November, 1890.

SIR,—In reference to the statement, forwarded by you, of the specific points brought before the Committee of the Council by the deputation of Fellows, I have to acquaint you that the Council, on the 13th instant, adopted the following resolutions, viz.:

I. (a) That Mr. Wilde be instructed to prepare a case for submission to the Attorney-General and Mr. Paget for their opinion as to whether the Council possesses the power to summon a meeting of the Fellows of the College separately from the Members.

(b) That the consideration of the question of providing a common room in the College for the Fellows be postponed.

II. That a Committee be appointed to consider and report to the Council on the rules relating to voting papers for the election to the Council.

III. That, with respect to the proposal relating to the negotiations with the University of London, the deputation of Fellows be informed that the Council have not power to grant their request.—I am, Sir, your obedient servant,  
EDWARD TRIMMER.

We have received the following correspondence for publication:

November 15th, 1890.

SIR,—I have to acquaint you that the Council, on the 13th inst., adopted the following resolution, namely:

That in reference to the resolution carried at the annual meeting of Fellows and Members on the 6th instant, the mover and seconder of such resolution be referred to the resolution adopted by the Council on the 8th November, 1888, viz.:

"The Council regret that they cannot accede to the requests contained in the resolutions carried at the meeting of Fellows and Members on the 1st instant" (1st November, 1888).

"It seems to the Council best, in the interest of the College, that the discussion on the subjects which have been in dispute should close with the grant of the supplemental charter."

"They cannot believe that any advantage is likely to arise from reopening questions which have been fully considered, and, on behalf of the College, they trust that these questions will now be allowed to rest."—I am, Sir, your obedient servant,  
(Signed) EDWARD TRIMMER, Secretary.

Lawson Tait, Esq.

The Crescent, Birmingham, November 18th, 1890.

DEAR SIR,—I have to acknowledge with thanks your letter of the 15th inst., conveying to me the resolution of the Council taken by them on the 13th. I regret to say that I cannot regard the reply of the Council as at all satisfactory, and I am quite sure that those who constituted the meeting, held at the College on the 6th inst., will not accept it as a settlement of the issues. They differ from the Council, *to celo*, in believing that every advantage is likely to arise from discussing the questions which the Council would desire now to be allowed to rest. I am sure they will not be allowed to rest.—I am, Sir, yours obediently,  
EDWARD TRIMMER, Esq.  
LAWSON TAIT.

## REFORM OF HOSPITAL ABUSES.

At the meeting of the Royal Statistical Society held on November 18th, an inaugural address was delivered by the new President, Dr. F. J. MOUNT, M.D., LL.D. After referring to the death of Sir Edwin Chadwick, and touching on several matters of statistical interest, Dr. Mount addressed himself to the hospital question, and proposed that the deficiency which he alleged to exist of hospital accommodation in London should be supplied by throwing open the sick asylums and Poor-law infirmaries without any pauper disqualification, and apparently without payment, to the poor. Having propounded this scheme, without any reference, however, to its economical aspect, he considered the proposal of a Hospital Board for London, which he strongly advocated, and referred with approval to the example of the Metropolitan Asylums Board. The absence of a proper system of independent inspection;

the irregularities of the out-patients' departments; the regulation of the relations of the schools to the hospitals; the discipline, duty, and training of nurses; the suppression of all useless or mischievous special hospitals, and the prevention of the creation of others of similar character; the adoption, audit, and publication of a uniform system of accounts; a scientific but simple collection and annual publication of the medical statistics of all hospitals on a uniform plan; the extension of institutions for the reception of convalescents, and the various side issues which were constantly arising, were all many-sided questions which required, in his opinion, patient investigation by a skilled agency, armed with authority to deal with them decisively, before any change was attempted. All this was a question of time, for the radical reform of old institutions, to be permanent as well as to find acceptance, must be of slow growth. Structures which from time to time needed removal or renewal, should be built up again, as much as possible on pre-existing foundations. The reform in this instance had been forced by pressure from without, but must be effected by careful consideration from within. Probably no fitter occasion than the present stage in the reconstruction of medical science would be found for the adaptation of the hospital system to the entirely changed circumstances which now existed.

A vote of thanks for the address having been proposed by Sir RAWSON RAWSON, was seconded by Lord THRING, who, after drawing attention to the great benefits resulting from the close co-operation of intelligent charity and the Poor-law system, when they did not compete but divided their work, referred to the matter of strikes, and then went on to deal with the hospital question. In the Special Committee of the House of Lords he had argued it out with many witnesses that poor professional men were most fit objects of charity, and should be treated in general hospitals for such payment as they could afford to give. But what had especially struck the Committee was that infectious diseases, which were the most dangerous and the most to be cared for, had no provision made for them. A gentleman's servant, for whom his master was anxious to pay, had nowhere where he could be sent. This fact was constantly brought under his notice. He therefore strongly advocated that local authorities should be bound to make provision, both for paying and non-paying patients. As to the creation of a central board (not of supervision but of control), he thought that it would be of the greatest possible benefit. He was not inclined to say that there was much abuse, but believed it would check considerable mismanagement. On the out-patient system he forbore to give an opinion, but was under the impression that it worked extremely well. Not many deserving persons were excluded, and patients really ill were passed on into the hospital. The want of hospital accommodation resolved itself chiefly into want of convalescent hospitals, and it was no charity to save a man from death to turn him out half cured to his miserable and squalid home.

## ASSOCIATION INTELLIGENCE.

### BRANCH MEETINGS TO BE HELD.

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: NORTH LONDON DISTRICT.—The inaugural meeting of this session will be held at the Great Northern Central Hospital, Holloway Road, N., on Thursday, December 4th, 1890, at 8 P.M.; Sir William Mac Cormac, President of Metropolitan Counties Branch, in the chair, when Mr. C. B. Lockwood, F.R.C.S., will read a paper on the Importance of Performing a Curative Operation after Operations for Strangulated Hernia. Some interesting cases from the wards will be shown. All registered medical men, whether members of the Association or not, are earnestly invited to attend.—GEORGE HENTY, M.D., Honorary Secretary, 302, Camden Road, N.

BATH AND BRISTOL BRANCH.—The second ordinary meeting of the session will be held at the Grand Pump Room Hotel, Bath, on Wednesday evening, November 26th, at half-past 7 o'clock, A. B. Brabazon, M.D., President, in the chair. The following communications are expected:—A. E. Aust Lawrence, M.D.: Pelvic Pain in Women: its Treatment by the Hot Vaginal Douche and the Faradic Current. A. Waugh, M.R.C.S.Eng.: Notes on an Outbreak of Diphtheria and Small-pox. T. Pagan Lowe, M.R.C.S.: Hemorrhoids: their Treatment by Operation, with Remarks on Stretching the Sphincter Ani in Chronic Constipation. C. Flemming, M.R.C.S.: An Uncommon Case of Septicæmia.—R. J. H. SCOTT, E. MARKHAM SKERRITT, Honorary Secretaries, Bath.

<sup>1</sup> BRITISH MEDICAL JOURNAL, November 15th, p. 1138.

## BIRMINGHAM AND MIDLAND COUNTIES BRANCH.

The second general meeting of this Branch was held in the Medical Institute on November 13th, 1890, Mr. ALFRED FREEZE, President, in the chair. More than forty members were present.

*Midwives Registration Bill.*—The following report was presented from a Committee which had been appointed at a special general meeting held on October 27th.

"1. We met on November 5th, when every member was present, and again on November 13th. On the motion of the Chairman, Dr. Holmes Joy, it was carried unanimously: 'That this Committee cordially approves the principle of the Midwives Registration Bill—namely, the compulsory registration of midwives after due examination.' We then discussed the clauses of the Bill.

"2. We are of opinion that Clause 2, Sections II and III, do not give sufficient opportunity to the medical profession to make representations in regard to the proposed rules regulating the conditions of admission to examination, etc., and consider that an opportunity should be afforded by the General Medical Council for the consideration of the rules by members of the medical profession before they are finally published by the Medical Council, as we believe that representations from medical men or corporations would be better appreciated by the General Medical Council than by the Privy Council.

"3. We consider therefore that Clause 2, Section II, should read—that 'the General Council shall publish the draft rules drawn up by them for the information of all persons interested; and, after the consideration of any representations made to them in writing during two months after publication, shall submit the rules finally approved by them to the Privy Council for confirmation.'

"4. We do not approve the proposal of Clause 3 that the execution of the Act (a) by examining midwives, (b) by granting certificates, and (c) by keeping a register, should be delegated to the County Councils, being of opinion that the proper authority to make provision for the examination and registration of midwives is the General Medical Council. This affects also Clauses 7, 10, and 13.

"5. While fully of the opinion that every woman actually engaged in the practice of midwifery at the time of the passing of the Act should be entitled to be registered, we consider that Clause 9, Section I, does not afford sufficient protection against the admission of improper persons to the register; in order to do so, the term 'bona fide midwife' should be defined in the Bill; and we suggest as a definition 'a woman who has been engaged in practice two years, or who has attended at least twenty labours.'

"6. We consider that Clause 16, Section II, will render it practically impossible to prosecute for offences under the Act, and requires amendment.

"7. We are also of opinion that no Midwives Registration Bill will be satisfactory which does not expressly state that no midwife shall give certificates of stillbirth.

"8. All the foregoing expressions of opinion are the views of every member of the Committee. Four members are of the opinion that in addition to the certificate prescribed by the Bill (Clause 3, Section II), another certificate of good conduct, not necessarily from a medical man, should be furnished.

"9. And two members of the Committee are of opinion that in Clause 2, Section I, the 'woman' ought to read 'man or woman'; and that similar alterations should be made throughout the Bill where words limiting its application to the female sex occur."

The whole of the report, with the exception of Paragraph 9, was adopted.

*Adjournment of Discussion.*—The adjourned discussion on Dr. Foxwell's paper was postponed.

*Treatment of Hysteria.*—Dr. SAUNDEY read a paper on the treatment of hysteria. He defined hysteria as an exaggerated and undue demand for sympathy, leading to the gradual abandonment of the care of the body and the control of functions. It was almost always developed by the unwise and too devoted services of near relatives. The cure must be a self cure, in which the patient was taught to rely upon her own efforts, and the means employed were for the purpose of evoking such efforts. For this end isolation from human sympathy was essential. Massage, douches, faradism, forced feeding, tonics, and purgatives occupied a secondary but important part, as they removed the results of hysteria. Hypnotism could not restore the needed mental vigour, but tended still further to destroy the patient's self-reliance.

*Recovery from Long-Standing Paralysis.*—Dr. DOUGLAS (Leamington) read a paper in which he related two cases of paralysis which had recovered, the one after 7 and the other after 13 years. The first was a woman, aged 30. At 17 she had diphtheria, followed by great weakness of mind and body; at 18 a febrile attack, lasting six weeks, with paralysis of bladder and almost complete paraplegia, the latter lasting thirteen years. Treatment did little good until she was removed from home in December, 1889, and treated by massage, faradism, and forced feeding. In six months she was able with assistance to get about with crutches; in nine months she could walk a short distance without help, and was still improving. The second case was that of a girl, aged 21. At 12 years she became weak and irritable; at 13 years she had catalepsy, with loss of consciousness about eight weeks, followed shortly by violent hysteria; she was afterwards helpless, and was also speechless (except at times to her mother in scarcely audible whispers) until July, 1890. In June, 1890, she was admitted to hospital, and treated by seclusion, tonics, faradism, massage, and exercises in reading aloud. In four weeks she was able to talk and walk, and still continued to improve. In the discussion which followed, Mr. GRAY, Dr. GRIFFITHS, Dr. SIMON, Dr. FOXWELL, and Dr. WARDEN took part.—Dr. SAUNDEY and Dr. DOUGLAS replied.

*Injury to Perineum.*—Dr. MARTIN showed, for Mr. LAWSON TAIT, a little girl, the subject of a brutal outrage inflicted by a man who committed suicide the next day. The result for the child was that the perineum was torn completely through into the rectum for a distance of an inch and a half up the septum. This at the age of 4½ years of course amounted to a most serious injury. Seven or eight weeks after the outrage the child was brought to Mr. Tait, passing all her faeces involuntarily. The difficulty in the repair was the small size of the parts. The operation was practically done with ophthalmic instruments. A fine pair of ophthalmic scissors made the incision usual in Tait's operation, and the stitches were inserted in the usual way by means of the needles which Mr. Tait described some twenty years ago for the purpose of performing the operation for the repair of cleft palate. The result was perfectly satisfactory.

## ABERDEEN, BANFF, AND KINCARDINE BRANCH.

The annual meeting of the Branch was held at Aberdeen on October 18th, 1890, Dr. FOWLER, Woodside, President, in the chair.

*Minutes and Nominations.*—The minutes of the last meeting were read and approved, and Dr. Alex. F. Trail, Fraserburgh, was nominated for ballot at the next meeting of the Branch.

*New Members.*—The following gentlemen were balloted for and unanimously elected members of the Branch:—Dr. W. Christie Crowe, Schoolhill, Aberdeen; Dr. George Ferdinands, Albyn Place, Aberdeen; Dr. Francis Kelly, Royal Infirmary, Aberdeen; Dr. James Hitchcock, Macduff; and Dr. James Nicol, Alford.

*Report of Council.*—The report of the Council was then read. It stated that the ordinary meetings had been well attended and the communications of considerable interest, while the summer meeting at Inverurie was a large and representative gathering. The membership of the Branch was now 130. Two of the senior members, namely, Dr. Lyon, of Peterculter, and Dr. George, of Keith, who had taken an active part in the management of the Branch since its commencement, had died. Both of them had occupied the office of President with much acceptance, and the latter, who was present at the last summer meeting, was a member of Council at the time of his death. Financially, the Branch was stronger than at any previous period. During the year the Parliamentary Bills Committee had considered the new medical regulations for the army, and was now considering the proposed Midwives Registration Bill. The Vice-President desired to be relieved of the office and duties of President during the ensuing year, on the ground of ill-health. The Council desired to express sympathy with him, and recommended the election of another to the office, and that he should hold office at some future time.

*Balance Sheet.*—The Hon. TREASURER (Dr. John G. Hall) presented the balance sheet, which showed a balance of £25 5s. 4d. to the credit of the Branch.—The Council's report and the Treasurer's balance sheet were unanimously adopted by the meeting.

*Election of Officers.*—The following gentlemen were elected office-bearers for the ensuing year: *President:* Dr. Garden. *President-elect:* Dr. Barclay, Banff. *Honorary Secretaries:* Dr. Mackenzie Booth and Dr. C. Thiselton Urquhart. *Honorary*

*Treasurer:* Dr. Hall. *Members of Council:* County: Dr. A. G. Davidson, Wartle; Dr. Maver, Buxburn; Dr. Smith, Kinnairdy. Town: Dr. G. M. Edmond, Dr. Maitland Moir, Dr. Urquhart.

*Summer Meeting of 1891.*—A letter from Dr. A. W. Norris Mackay, of Elgin, Secretary of the Northern Counties Branch, was submitted, proposing a joint summer meeting of the Northern Counties and the Aberdeen, Banff, and Kincardine Branch in 1891; and on the motion of Dr. Mackenzie Booth, it was resolved that the proposal be agreed to, and suitable arrangements with the railway company be made.

*Midwives Registration Bill.*—On the motion of Professor OGSTON, seconded by the PRESIDENT, consideration of the Midwives Registration Bill was remitted to the Council of the Branch.

*Exhibition.*—An exhibition of instruments by John Weiss and Sons; of new drugs and preparations by Burroughs, Wellcome, and Co.; of new medical books by Mr. A. Murray, was arranged by Dr. OGILVIE WILL, and was visited by the members attending the meeting and others.

*Annual Dinner.*—The annual dinner was held in the afternoon in the Imperial Hotel, Stirling Street, under the presidency of Dr. Fowler, Woodside.

#### SOUTH WALES AND MONMOUTHSHIRE BRANCH.

The autumn meeting was held at Abergavenny, Dr. W. PRICE (Cardiff), President, in the chair. About twenty-five members and visitors were present.

*New Members.*—The following were elected: Mr. P. Smith (Sirhowy); Mr. W. J. Corrigan (Cardiff); Mr. W. Gibbon (Carmarthen); Dr. Paton (Abergavenny); Mr. B. M. Lewis (Pontypridd).

*Communications.*—Dr. W. D. STEEL (Abergavenny) read short notes of two cases: one of choreic movements in the arms in a telegraph machine worker; and another of a child brought up by hand on condensed milk, and suffering from diarrhoea, and nearly dead from convulsions, which seemed to show the value of artificial respiration persistently carried out in a young child apparently moribund.—Mr. E. S. WOOD (Pontypool) related two cases of spina bifida, one complicated with an encephalocele at the back of the head, the child living twelve days; the other a child of the same woman with an encephalocele on the forehead, the child living eighteen days. The mother had had six healthy children prior to the first case.—Dr. PATERSON (Cardiff) read a paper on Post-nasal Growths and their Relation to Throat and Ear Diseases, dealing more particularly with enlarged pharyngeal tonsils and methods for their removal. Prognosis was favourable and treatment by cutting and scraping satisfactory.—Dr. S. H. STEEL (Abergavenny) exhibited a polypus uteri, recently removed by *écraseur*, weighing 13 ounces. Piano wire was first used, but this broke; some picture wire in the house was then substituted, and this held; also a small fibroid polypus with a pedicle nearly a foot long.—Dr. SHEEN (Cardiff) read notes of a case of so-called Perforating Tumour of the Skull in a man aged 75, in whom there was also a tumour on the eighth rib. The patient died from tuberculosis and pulmonary oedema, and had no symptoms referable to the brain. The specimen was shown.

#### LANCASHIRE AND CHESHIRE BRANCH.

The autumn meeting of this Branch was held in Macclesfield on November 14th, 1890.

*The late Dr. Waters.*—The PRESIDENT (Dr. Leech), on taking the chair, referred in feeling terms to the loss the Branch and Association has sustained by the death of Dr. Edward Waters, of Chester; and proposed the following resolution, a similar one having been previously adopted by the Council: "That this meeting of the members of the Lancashire and Cheshire Branch of the British Medical Association wish to record their sense of the great value of the services of the late Dr. Waters to the Lancashire and Cheshire Branch of the British Medical Association, and the deep regret with which they have heard of his death; and that a copy of this resolution be sent to Mrs. Waters." This resolution was seconded by Dr. WATKINS, supported by Dr. DAMBRILL-DAVIES, and carried.—The PRESIDENT informed the members that the Council of the Branch had requested the President of the Branch, Dr. Leech, Dr. Glascott, Honorary Secretary, and Dr. Carter, representative on the Council of the Association, to attend the funeral of Dr. Waters, at Chester, on November 15th, as a deputation from the Council of the Branch.

*Midwives Registration Bill.*—Dr. R. R. RENTOUL read a paper on the Amended Midwives Registration Bill.—Dr. GLASCOTT presented a statement from the Parliamentary Bills Committee on the Amended Midwives Registration Bill, and laid a copy of the Bill before the meeting.—It was proposed by Dr. THORNLEY (Bolton), seconded by Dr. KINGSBURY (Blackpool), and carried "That the thanks of this meeting be tendered to Dr. Rentoul for the trouble he has taken in promoting a discussion of the Amended Midwives Registration Bill, and that the Council be requested to appoint a committee, with power to add to their number, to consider and report on the Midwives Registration Bill, and to take such steps as they may think fit to bring its provisions before the medical profession of Lancashire and Cheshire, with the view of ascertaining their views on this Bill as a whole; and that the Committee appointed for the purpose report at an early date to a special general meeting of the Branch to be held in Manchester."

*Communications.*—Dr. WALTER showed a patient from whom he removed a kidney fixed in the hollow of the Sacrum.—Mr. STANMORE BISHOP read a paper on Modern Methods of Treatment in Morbus Coxæ, with demonstration of a new Cot.—Dr. KINGSBURY read a paper on the Dangers of Hypnotism and how to avoid them, followed by a demonstration of Therapeutic Hypnotism.—Dr. MCNAUGHT read a paper on Acid Dyspepsia.—Mr. DAMBRILL-DAVIES read a communication on a case of Strangulated Hernia.—Dr. SOMERVILLE showed a case of Pseudohypertrophic Paralysis.

*Dinner.*—The members dined together under the presidency of Dr. Leech, in the Town Hall, at the conclusion of the general meeting.

#### NORTH OF IRELAND BRANCH.

The autumn meeting of this Branch was held in the Royal Hospital, Belfast, on Thursday, October 30th, the PRESIDENT (Dr. W. A. McKeown) in the chair. There was a large attendance of members.

*Branch Council.*—Dr. John McCaw was elected a member of the Council of the Branch for the city of Belfast, in the place of the late Dr. J. W. T. Smith.

*Registration of Midwives.*—A sub-committee of the Branch was appointed to consider the Midwives' Registration Bill, and to report to the next meeting.

*New Members.*—The following gentlemen were elected members of the Branch:—Professor Redfern, M.D., F.R.C.S. Eng., Lower Crescent, Belfast; John Patterson, M.B. Dub., Ramelton; Andrew Harris, L.R.C.P. Irel., Magherafelt; W. J. Meharry, L.R.C.P. & S. Edin., Carlisle Circus, Belfast; J. Dunlop, L.R.C.P. & S. Edin., Straidkillin, Bushmills; H. J. Bailey, L.R.C.S. Edin., Cliftonville, Belfast; Chas. J. Humphries, M.D., Newtownards Road, Belfast; Wm. P. Blair, L.R.C.P. Edin., Ballynure, Co. Antrim; Arthur McComiskey, M.B., Ravenbank, Ravenhill Road, Belfast; John MacCormac, M.D., Botanic Avenue, Belfast; Samuel Agnew, M.D., Lurgan; A. B. Mitchell, M.B., Royal Hospital, Belfast; H. W. Baillie, L.R.C.P. & S. Edin., Seaford, Co. Down; Robert Abraham, M.D., Aughnacloy, Co. Tyrone; James Lennox, M.D., Kilrea, Co. Derry; S. B. B. Keers, L.R.C.P. & S. Edin., Donovan House, Rasharkin; J. K. McGuckin, L.A.H. Dub., Donegal Street, Belfast; W. C. Graham, L.R.C.P. & S. Edin., Shankhill Row, Belfast.

*Papers, etc.*—The scientific part of the proceedings will be found at p. 1185.

**LEPROSY IN RUSSIA.**—An anonymous benefactor has given 1,000 roubles in aid of the establishment of a leper hospital at Riga. The Lithuanian Government has received 50 roubles from a lady as a contribution towards the erection of the leper house which it is intended to build in the island of Oesel.

**WHOLESALE BABY FARMING.**—At Warsaw a woman, her married daughter, the latter's sister-in-law, and another woman, besides two men, have recently been tried on the charge of having murdered some two hundred infants by starving them. The dead children were never interred singly, in order not to arouse suspicion; but, when half a dozen had succumbed, they were put together in the coffin of an adult, and, with the assistance of the coffin maker and gravedigger, both of whom are amongst the accused, were buried as one person. The chief culprit has been sentenced to three years' imprisonment, while her accomplices have been sent to prison for shorter terms. The Public Prosecutor has appealed against the sentences as being altogether inadequate.

In 1869 appeared his *Mechanism of Dislocation and Fracture of the Hip, with the Reduction of the Dislocation by the Flexion Method*. His theory and practice, ripened and justified by experience, are familiar to all practical surgeons, and the illustrations are fast displacing the well-known and time-honoured drawings of reduction of hip-joint dislocations by pulleys. Professor Bigelow expressed in this work his belief that the period was not far distant when longitudinal extension by pulleys to reduce a recent hip luxation would be unheard of, and that prophecy is coming true. He did not actually discover the method of reducing dislocations of the hip by manipulation without pulleys; indeed, in the case of dislocation upwards and backwards, the rule: "Lift up, bend out, roll out" had long been known in London schools of medicine. Professor Bigelow, however, rendered the practice scientific by demonstrating the anatomy and pathology of the injury in question, and showing how the ilio-femoral ligament might be utilised as an essential mechanical agent in the reduction of all forms of dislocation of the head of the femur.

Professor Bigelow reaped yet greater fame in the field of lithotripsy. In January, 1878, an article by Professor Bigelow, "On Lithotripsy by a Single Operation," appeared in the *American Quarterly Journal of the Medical Sciences*. This paper was shortly followed by a separate work on the same subject. Professor Bigelow had devised a new method of performing lithotripsy, to which the name "litholapaxy" was given. The object was to remove the stone, however large, at a single operation. An evacuation apparatus, adequate to the purpose in view, was contrived, and the operation proved satisfactory in practice. The inventor based his new operation on Professor Otis's researches, which proved that the urethra was more freely dilatable than was usually supposed. Litholapaxy requires instruments of somewhat large calibre, to which, however, owing to the dilatability of the urethral canal, there is no real objection. Litholapaxy was strongly assailed in this country when Professor Bigelow's work first appeared; nor can the opponents of the deceased surgeon be blamed for looking at first with distrust on any modification of so grave a proceeding as lithotripsy. The very principle of safe evacuation of a stone at one sitting seemed too good to be true, which, in the case of an innovation in surgery, often means that it would practically prove bad and dangerous. Amongst the earliest defenders of litholapaxy in this country was Mr. Reginald Harrison, who was present on April 6th, 1878, at the Massachusetts General Hospital, when Professor Bigelow removed a large uric acid calculus by his new method. In August, 1878, Mr. Harrison reported to the Surgical Section of the British Medical Association at Bath what he had seen, and exhibited Dr. Bigelow's instruments for the first time in England.<sup>1</sup> Since that date, the operation has become established in this country.

Professor Bigelow was an able and popular teacher, an active practical man, and a deep student. He greatly impressed European visitors to his hospital; and the result of his labours gained for him the confidence of the profession all over the civilised world. To be associated with three things so important as the introduction of anaesthetics, the simplification of the reduction of dislocated hip-joints, and an important improvement in lithotripsy is indeed a sufficient claim to fame. Perhaps the greatest evidence that a surgeon has gained the confidence of teachers is when his name is diffused through students' textbooks. Such has been the fate of Professor Bigelow. Who does not know his drawing of the Y-ligament, and the sketch of a surgeon in the act of reducing a dislocated hip-joint? Who has not heard of Bigelow's litholapaxy as one of the operations under the head of "Treatment" in the chapter on vesical calculus in current educational works on surgery?

Professor Bigelow was one of the American delegates to the International Medical Congress which met in London in 1881. He retired from the General Hospital in 1886, and lived thenceforth in his country house. There he devoted himself to rural pursuits and agricultural questions with the same energy that had distinguished him during his professional career. He suffered much, however, from dyspepsia and hepatic colic. At length he sank from uncontrollable vomiting. A necropsy was made, and gall stones, with inflammation of the ducts, small abscesses in the liver, fibroid stenosis of the pylorus, and dilatation of the stomach were discovered. The apices of the lungs showed signs of old disease.

<sup>1</sup> BRITISH MEDICAL JOURNAL, vol. ii, 1878, p. 280.

## UNIVERSITIES AND COLLEGES.

### OXFORD.

ADMISSION OF WOMEN TO THE M.B. EXAMINATION.—The subject of the admission of women to the Bachelor of Medicine examination came for final vote at a Congregation on November 18th. Professor Case, who throughout has been strongly opposed to the project, again moved its rejection, and was supported by the Rev. J. R. King. The statute was rejected by a majority of 4 in a house of 154 members.

### LONDON.

M.B. Examination. October, 1890. Pass List.

#### First Division.

Abbott, Francis Chas., B.Sc. ...	St. Thomas's Hospital
Bailey, Robert Cozens ...	St. Bartholomew's Hospital
Bates, Stephen Henry ...	University College
Benson, Annette Matda., B.Sc. ...	London School of Medicine for Women
Berthon, Ellen Margt. Tinné ...	London School of Med. and R. Free Hosp.
Brown, David, B.Sc. ...	London Hospital
Bryant, John Henry ...	Guy's Hospital
Davidson, William Marshall ...	St. George's Hospital
Eccles, William McAdam ...	St. Bartholomew's Hospital
Evans, Percy Charles ...	Univ. of Edinburgh and Guy's Hospital
Farrer, Ellen Margaret ...	London School of Med. and R. Free Hosp.
Fawcett, John ...	Guy's Hospital
Grange, Frank ...	Charing Cross Hospital
Greig, Duncan MacBean ...	University College
Hall, Frederick William ...	Guy's Hospital
Hewlett, Richard Tanner ...	King's College
Hodges, Aubray Dallas P. ...	London Hospital
Hugo, Edward Victor ...	St. Bartholomew's Hospital
Kitchin, Henry Brunton ...	University College
Lea, Arnold William W. ...	Owens College and Manch. R. Infirmary
Leigh, Randle, B.Sc. ...	Univ. Colleges of London and Liverpool
McGowan, Jas. Sinclair, B.Sc. ...	Owens College and Manch. R. Infirmary
McLaren, Alice ...	London School of Medicine for Women
Martin, Charles Jas., B.Sc. ...	St. Thomas's Hospital
Norburn, Albert Edward ...	Guy's Hospital
Pennell, T. Leighton, B.Sc. ...	University College
Playfair, Hugh James M. ...	King's College
Richards, Joseph Stewart ...	Guy's Hospital
Richards, Richard Walter ...	St. Bartholomew's Hospital
Ricketts, Thos. Frank, B.Sc. ...	Guy's Hospital
Robertson, John ...	Guy's Hospital
Sequeira, James Harry ...	London Hospital
Snell, Sidney Herbert ...	University College
Tilley, Herbert ...	University College
Tribe, Ethel Newton ...	London School of Medicine for Women
Waring, Holburt Jacob., B.Sc. ...	St. Bartholomew's Hospital
Webber, Hy. Woolmington ...	Guy's Hospital
Williams, Lewis ...	University College

#### Second Division.

Austen, Harold Wm. Colmer ...	St. Bartholomew's Hospital
Bindley, Robert Alfred ...	Guy's Hospital
Cook, Herbert George Graham ...	St. Bartholomew's Hospital
Cope, Albert Ernest ...	College of Medicine, Newcastle-on-Tyne
Corner, Harry ...	London Hospital
Dawson, Bert. Edward, B.Sc. ...	London Hospital
Dodwell, Philip Rashleigh ...	University College
Dove, Emily Louisa ...	London School of Medicine for Women
Eady, George John ...	King's College
Elliott, Robert Henry ...	St. Bartholomew's Hospital
Farquharson, Geo. Sinclair ...	London Hospital
Harris, Frances ...	London School of Medicine for Women
Hayman, William Speed ...	King's College
Hensley, Arthur Egerton ...	King's College
Kirton, Charles Inray ...	London Hospital
Lyons, Algernon Wilson ...	King's College
Madgson, Minnie L. C. ...	London School of Med. and R. Free Hosp.
Moore, Joseph ...	St. Bartholomew's Hospital
Mortimer, John Desmond E. ...	St. Bartholomew's & Westminster Hosps.
Orr, Frederick Layton ...	University College
Stevens, Thomas George ...	Guy's Hospital
Wilson, Helen Mary ...	London School of Medicine for Women
Wood, Thomas Jason ...	University College

### ABERDEEN.

AMBULANCE CORPS.—This corps is as popular as ever. Recruits are daily coming forward to fill the vacancies caused by the retirement of senior members. The staff of non-commissioned officers remains the same. The officers are: Surgeon Macgregor (commander), Surgeon Mackenzie-Booth, Surgeon Scott Riddell, Quartermaster de Lessert, Chaplain Rev. James Smith; and to their untiring efforts is due the admirable *esprit de corps* that prevails. The third smoking concert of the corps was held on Saturday, and was pronounced to be the best concert of the kind that has been held in connection with the University.

RECTORIAL ELECTION.—The nomination of candidates for the Lord Rectorship, in "time-honoured fashion," took place on Saturday. After the nomination of the Marquis of Huntly and Pro-

fessor Bryce, M.P., there followed the fight for the standard. After a long and, at times pretty severe, hand to hand conflict, the Huntly party seized the Bryce party's flag, and thereafter went in procession to the houses of several of the professors. Winning the nomination fight is not a sure augury of winning the poll next Saturday.

**STUDENTS' SOCIETY.**—Negotiations are pending, and it is hoped will terminate successfully, by which the Students' Medical Society will be affiliated with the Medico-Chirurgical Society.

#### THE CONJOINT BOARD IN IRELAND.

THE results of the July examinations have just been communicated to the Colleges in the report of the Committee of Management under the conjoint scheme. For the four examinations, 279 candidates were examined, with the result that 48.4 per cent. passed, and 51.6 were rejected. A careful analysis of the results of the second and third professional examinations is embodied. In the "second," 102 candidates presented themselves; 59.13 per cent. passed, and 40.87 per cent. were stopped. In the "third" there were 71 candidates, of whom 55.42 per cent. passed, and 44.58 were rejected. The Committee observe that "a noticeable feature evident throughout the whole of the written portion of the examination is the great deficiency in preliminary education, shown by the general style and the bad spelling of the candidates, not only of technical, but also of common English words." The examinations are carefully visited by the Committee, and the testing of the candidates appears to be carried out in a most thorough way.

#### ROYAL COLLEGE OF SURGEONS OF ENGLAND.

**THE NEW LABORATORY.**—At the last meeting of Council a report was read from the Board of Examiners in Dental Surgery, saying that they had consulted the legal adviser of the College, and were informed by him that the Council had not the power under the Charter and by-laws to institute, as was suggested, an Honorary Examination in Dental Surgery. A report was received from the Laboratories' Committee, stating that the rooms had been completed and were now in working order. Seven applicants had been granted permission to work in the laboratories, four of whom had already commenced their investigations. The report stated that the expenditure for the equipment of the laboratories had amounted to £2,000. The Committee suggested that a further sum of £500 should be granted for the purchase of a lantern with projection microscope and other apparatus, and to defray any further outlay that may become necessary. Attention was called to the fact that in the original estimate it was contemplated that the sum required to furnish the laboratories sufficiently might amount to £5,000, whilst with the additional grant above mentioned the committee will have fitted up the laboratories, library, and theatre for half that amount, that is, £2,500.

**UNIVERSITY STUDENTS AND THE CONJOINT BOARD.**—The Council have adopted, subject to the approval of the College of Physicians, the Report of the Committee of Management, recommending that Clauses III and IV, Section 3 of the Regulations, under which students of universities in the United Kingdom are now admissible to the Final Examination of the Conjoint Board, should be altered so as to read as follows:—

III. Any member of an English university who shall have passed such an examination or examinations at his university as shall comprise the subjects of the First and Second Examinations of the Examining Board in England, and who shall have completed the curriculum of medical study required by the regulations, will be eligible for admission to the Third or Final Examination of the Board two years after his having passed all the other required examinations; any candidate so admitted to examination will be required to pay a fee of five guineas; and any such candidate who shall have passed such Third or Final Examination shall, on the further payment of not less than two of the four years' curriculum of professional education shall have been spent in residence at the university, who shall have passed such an examination or examinations at his university as shall comprise the subjects of the First and Second Examinations of the Examining Board in England, and who shall have completed the curriculum of medical study according to the regulations required by his university, will be eligible for admission to the Third or Final Examination of the Board two years after his having passed all the other required examinations; any candidate so admitted to examination will be required to pay a fee of five guineas; and any such candidate who shall have passed such Third or Final Examination shall, on the further payment of

not less than thirty guineas, and subject to the by-laws of each College, be entitled to receive the licence of the Royal College of Physicians of London and the diploma of Member of the Royal College of Surgeons of England.

The Committee of Management further recommended: "That it is desirable that all certificates of attendance in the schedules for the several examinations of the Conjoint Board should contain the words 'to the satisfaction of the lecturer or teacher in each subject.'"

**THE ASSOCIATION OF FELLOWS.**—The letter from the Secretary of the Association of Fellows of the College,<sup>1</sup> enclosing a statement of the specific points brought before the Committee of the Council by the deputation of Fellows, was read at the last meeting of the Council. It was resolved that counsel's opinion should be taken upon the question of the power of the Council to convene a meeting of the Fellows of the College independently of the Members. The question relating to the mode of voting for the election of the Council was referred to a special committee for consideration. In reply to the request that the College should consult the Fellows before concluding any scheme with the University of London the Council resolved that it was not in their power to grant the request.

**THE ANNUAL MEETING.**—The President having reported to the Council the resolution which was carried at the annual meeting of Fellows and Members on November 6th,<sup>2</sup> the Council adopted a reply, referring to the resolution adopted at their meeting held on November 8th, 1888: "That they deem it best, in the interest of the College, that the discussion on the subjects which have been in dispute should close with the grant of the supplemental charter."

**PASS LISTS.**—The following gentlemen passed the First Professional Examination for the diploma of Fellow at a meeting of the Board of Examiners on November 12th, namely:

W. R. Smith, student of King's College, and H. Rochfort-Brown, of St. Bartholomew's Hospital.

Fourteen candidates were referred.

Passed on November 13th:

H. E. Durham, of Cambridge University and Guy's Hospital.

Eleven candidates were referred.

The following gentlemen, having passed the necessary examinations, having been admitted Licentiates in Dental Surgery, namely:

Acton, George Harris, 2, Woodlands Road, S.W.  
Appleton, James Enderby, M.R.C.S. Eng., Westcombe, Blackheath.  
Buckley, William Henry, 54, Shaw Road, Oldham.  
Bull, Ernest Roger, 91, Brecknock Road, Camden Town.  
Burton, Francis, 221, Norwood Road, S.E.  
Cutts, Frederick Edward, 38, King Street, Lancaster.  
Davies, William Herbert, 4, Clifton Villas, Gunnersbury.  
Dormer, Henry, The Priory, Horsley, Glos.  
Efford, Charles Turman, 11, Halpas Road, Brockley.  
Hall, Frederick George, 391, Caledonian Road, N.  
Holford, Walter Stanley, M.B.C.S. Eng., Worcester House, Sutton.  
Keevil, George Mulready, 15, Keppel Street, W.C.  
Larbaletier, William Robert, 27, Ilminster Gardens, S.W.  
Lombardi, George, 17, Marlborough Street, W.  
Marson, Cyril Darby, 28, Earl Street, Stafford.  
May, William, Fortescue, Thorverton.  
Moore, Alfred, 20, Great Alle Street, Goodman's Fields.  
Parsons, Ernest, Horseheath, Cambs.  
Schelling, Carl, 82, Upper Gloucester Place, N.W.  
Summers, James West, 15, Norton Folgate, E.  
Tomlyn, Louis Crowhurst, 81, Florence Road, S.E.  
Turner, Joseph George, 11, Grance Park, Baling.  
Wheatley, William Henry, 14, St. James's Road, N.E.  
White, Percy Harry, M.R.C.S. Eng., 3, Moore Street, Cadogan Square.  
Wolf, Michael Yeatman, 1, Marlborough Place, N.W.

<sup>1</sup> See BRITISH MEDICAL JOURNAL, November 15th, p. 1138.

<sup>2</sup> See BRITISH MEDICAL JOURNAL, November 8th, p. 1084.

**CURE OF TETANUS BY PILOCARPINE.**—The *Gazetta Medica Lombarda* of November 8th announces that in July, August, and September last Dr. Enrico dell'Acqua, of Pavia, effected a complete cure in three consecutive cases of severe traumatic tetanus by means of injections of hydrochlorate of pilocarpine alone. Full particulars will be published in an early issue of our Italian contemporary.

**PROFESSOR SCHENK, OF VIENNA.**—Professor S. L. Schenk, Director of the Embryological Institute of the University of Vienna, is about to celebrate the twenty-fifth anniversary of his doctorate. A Committee has been formed in Vienna for the purpose of presenting Professor Schenk with some suitable memorial of the occasion. Professor Schenk's old pupils in this country are invited to subscribe, and to send their contributions to Herr Ferdinand Winkler, Embryologisches Institut, Schwarzspanierstrasse, Vienna.

## MEDICAL NEWS.

A PHARMACEUTICAL Society has recently been established in Berlin.

DR. W. N. WELIKI, Professor of Physiology in the University of Tomsk (Siberia), has been elected Rector of that seat of learning.

FROM August till the middle of October, there were thirty-four deaths from hydrophobia in European Russia. Of these, no fewer than thirteen occurred in the Ufa "Government."

DR. O. MORSCHUTKOWSKI, whose name is associated with the introduction of the suspension treatment of ataxy, has been chosen President of the Odessa Medical Society.

A LEGACY of £100, free of duty, has been bequeathed by the late Mr. John Glover, of Tamworth, to the Birmingham Children's Hospital.

DR. NARCISO CABBÓ DE ALOY, Professor of Therapeutics in the University of Barcelona, died on November 5th. He was a successful teacher, and contributed largely to Spanish medical literature.

PROFESSOR LEWIN, the well-known authority on syphilis, who has been disabled by illness for more than a year, has now recovered sufficiently to resume the duties of his chair in the University of Berlin.

It is stated that Dr. Roberts Bartholow has been compelled by ill-health, due to overwork, to resign his appointment as Professor of *Materia Medica* and Therapeutics in Jefferson Medical College, Philadelphia. Dr. Hobart Amory Hare is designated as his successor.

ON November 12th the site on which St. Joseph's Hospital, which is to be the clinical hospital in connection with the Catholic Faculty of Medicine, at Lyons, is to be erected, was blessed by the Archbishop of Lyons. The buildings of the new hospital will occupy a space of more than 5,000 square metres.

HIS ROYAL HIGHNESS Archduke Karl Theodor, of Bavaria, M.D., his Excellency Dr. von Gossler, Prussian Minister of Public Worship and Instruction, and Dr. von Coler, Staff Surgeon-General of the German Army, have been elected honorary members of the Berlin Medical Society.

OTOLOGY IN ITALY.—Dr. Gradenigo has been appointed by the Superior Council of Public Instruction in Italy Professor of Otology in the University of Turin. There has hitherto been only one official chair of otology in Italy, that in the University of Rome. Dr. Gradenigo's name is well known for his work in the domain of ear disease.

PHTHISIS IN BERLIN.—Official statistics show that the number of deaths from phthisis in Berlin between 1880 and 1889 was smallest in 1881 and largest in 1889. During the whole period referred to the total number of deaths from all causes was 322,192, of which 41,608, or 12.91 per cent, were due to pulmonary consumption.

THE SMOKE NUISANCE.—The City Commissioners of Sewers adopted on November 18th a report of the Sanitary Committee relative to the frequent complaints of smoke nuisances in the city, and it was referred to the Sanitary Committee to investigate and consider the best means of abating the smoke nuisance, and to report thereon.

WESTMINSTER HOSPITAL MEDICAL SCHOOL ANNUAL DINNER.—The above took place at the Criterion on November 15th. Dr. W. Grigg was in the chair. The usual toasts were proposed and replied to. Some very good songs and music were rendered by the students. On the whole, the affair was a great success, most praise being due to Mr. Morris, the Honorary Treasurer and Secretary.

NEW MEDICAL JOURNALS.—The first number of the *Balneologische Centralblatt*, a fortnightly periodical, dealing, according to its title page, with "balneotherapy, hydrotherapy, massage, curative gymnastics, hygiene of bathing, and dietetics," appeared at Leipzig on October 3rd. It is edited by Dr. Franz C. Müller. Hirschwald, of Berlin, announces that the first number of a new journal, devoted to sanitary matters, will appear on January 1st,

1891, under the editorship of Professor Carl Fraenkel, of Königsberg, and Dr. Erwin von Esmarch, *Privat-docent* in the University of Berlin, who is at present lecturing for Professor Koch.

RIBERI PRIZE.—The Riberi prize for 1890 has been awarded to Dr. Panara Panfilo, Physician to the Military Hospital at Rome; and Dr. Joseph Brezzi, "Captain-Surgeon" (*Capitano Medico*) of the Vicenza Regiment of Cavalry. The subject for the essay was the Prophylaxis and Treatment of Tropical Diseases, with special reference to the climate of the territories at present occupied by Italians.

SCARLET FEVER IN LONDON.—The number of fever cases admitted to the hospitals of the Metropolitan Asylums Board during the fortnight ending November 15th numbered 464 as against 532 in the previous fortnight; there had been 60 deaths; 2,435 remained under treatment as against 2,333 the fortnight previously. The cases in hospital were 2,068 scarlet fever, 160 diphtheria, 1 of typhus, and 103 enteric fever. There were no cases of small-pox.

EDINBURGH OBSTETRICAL SOCIETY.—The first meeting of the 52nd session of the Edinburgh Obstetrical Society was held on November 12th, when the following office-bearers were elected for the ensuing session:—*President*: Dr. Berry Hart. *Vice-Presidents*: (Senior) Dr. P. A. Young, (Junior) Dr. Playfair. *Treasurer*: Dr. Craig. *Secretaries*: (Senior) Dr. N. T. Brewis, (Junior) Dr. J. W. Ballantyne. *Librarian*: Dr. Milne Murray. *Members of Council*: Dr. Underhill, Dr. Ballantyne (Dalkeith), Dr. A. H. F. Barbour, Dr. Webster, Professor Simpson, Dr. Andrew, Dr. W. L. Reid, Dr. Matthew.

"OLD KING'S CLUB" has been formed by former pupils of King's College School, past and present students of King's College and King's College Hospital, and others connected with the management of the departments, with the object of promoting friendly and mutual intercourse among old King's men, and generally to further the interests of King's College, the School, and Hospital. Spacious premises have been obtained at 39, King Street, Covent Garden, W.C., and it is hoped that all gentlemen who have been connected with "King's" will join. Prospectus and full particulars can be obtained from the Secretary, 39, King Street, Covent Garden, W.C.

LEPROSY IN VENEZUELA.—In a report on leprosy in Venezuela, made by the United States Consul at Maracaibo, it is stated that the disease was first introduced in 1825, when a leper from Santo Domingo landed at Maracaibo. In three years the disease spread to such an extent that an island about four miles from the city was set apart for the isolation of the sufferers. The number of lepers now on the island is said to be 125. After some time the lepers were allowed to intermarry. Of a number of such unions, only two children have so far been born; neither of them has as yet shown any sign of leprosy taint, and in March last one of them, who had reached the age of 14, was allowed to leave the island.

BRUSSELS MEDICAL GRADUATES' ASSOCIATION.—The annual dinner of this association was held at the Criterion Restaurant on November 15th, Dr. A. W. Orwin was in the chair, and there were about sixty present. Mr. Lawson Tait, after referring to his last visit to Brussels, said that the fact of Englishmen having to go there to obtain their degrees was a reflection on those corporations which were so much behind the spirit of the day. The demand of graduates for degrees had long existed; Cambridge and Oxford offered a culture but not an education. Surgeon Parke, in returning thanks for the toast of "The Guests," spoke in appreciative terms of the manner in which he had been treated by his profession, and said that not only was he proud himself to belong to it, but that Dr. Emin Pasha, amongst all the honours he had received, appreciated his Doctorate more than all others, and always signed himself "Dr." Mr. Stanley's acceptance of the leadership of the Relief Expedition was taken at a great cost and loss to himself, and any man who said that he undertook it for any but generous reasons uttered a gross libel. Thirteen Europeans went with him and eleven came back safe. He had fever himself over 200 times, and was never carried a single minute, although he rode a donkey the last few days before he came to the coast. The expedition had cost £40,000, while the attempt to relieve Khartoum had cost several millions.

MEDICAL DEFENCE UNION: METROPOLITAN DIVISION.—The first annual meeting of this Branch was held in the Council Room of the British Medical Association on Thursday, November 13th.

Sir Morell Mackenzie took the chair, and the Honorary Secretary (Dr. Campbell Pope) read the annual report of the Executive Committee, in which they congratulated members on their having had no expensive lawsuit to encounter, and also on the great increase in their numbers. The membership of the division was now 454, nearly as many as the total muster of the Union when the Branch was formed. The Union itself had advanced to nearly 1,600. After referring to several matters of interest, the report showed that prosecutions of illegal practitioners had been for the time rendered too expensive in the metropolitan district, owing to the fines obtained being claimed by the receiver for the Metropolitan Police under the Metropolitan Police Act. The Union hoped soon to obtain a change in the law. Three cases of covering were brought before the Executive, but the main work of the Committee had been to get a good organisation, and they hoped the ballot list presented would show that much had been done in that direction. Dr. Mead pointed out that suggestions from practitioners resident in the various districts as to whom their representatives should be were most welcome to the executive. After some remarks on dispensaries by Dr. Buckell, the adoption of the report was moved by Mr. Macnamara, seconded by Dr. Coates (Streatham), and carried unanimously. The following gentlemen were elected as the executive for the ensuing year: *President*: Dr. Bridgwater (Harrow). *Committee*: R. Fancourt Barnes, M.D.; D. H. Goodsall, F.R.C.S.; F. de Havilland Hall, M.D.; Ernest Hart (Marylebone); Stamford Felce, M.R.C.P.; G. Danford Thomas, M.D. (Paddington); J. Lynch Roche (Kensington); J. A. Masters, M.R.C.P. (Hammer-smith); Prior Purvis, M.D. (Lewisham); Benjamin Duke (Clapham); A. T. Scott (Islington); F. E. Cockell, jun. (Hackney); W. G. Dickinson (Wandsworth); T. Richardson (Tower Hamlets); Albert Lindow (Woolwich); V. A. Jaynes (Southwark); E. H. Milson (Hampstead); A. Leach (Westminster). *Honorary Secretaries*: A. G. Bateman, M.B., 64, Longridge Road (General Secretary); H. Campbell Pope, M.D., 280, Goldhawk Road, W. *Ex-officio Members*: Dr. Granville Bantock (Treasurer); Dr. Mead (Organising Secretary). On the motion of Mr. Hildyard Rogers, seconded by Dr. Gilbert, a vote of thanks was proposed to the Executive Committee, and carried unanimously. A vote of thanks to the Chairman, proposed by Dr. Bantock, closed the proceedings.

### 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.
- 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.
- CANCER HOSPITAL (Free), Fulham Road, S.W.**—Dispenser; Licentiate of the Apothecaries' Company of London, or registered under Pharmacy Act, 1868. Salary, £100 per annum, with dinner and tea. Applications to the Secretary by December 3rd.
- 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.
- 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.
- COUNTY COUNCIL OF LANARK.**—Medical Officer for the county; must devote his whole time, and must reside within the district. Salary, £500 per annum, and £100 to cover all expenses. Applications to W. Alston Dykes and Edward P. Dykes, District Clerks, Hamilton, by December 8th.
- DENBIGHSHIRE INFIRMARY, DENBIGH.**—House-Surgeon; must be conversant with Welsh language. Salary, £85 per annum, with board, residence, and washing in the house. Applications to W. Vaughan Jones, Secretary, by November 29th.
- DEVON AND EXETER HOSPITAL, Exeter.**—House-Surgeon; double qualifications, unmarried. Salary, £120 per annum, increasing £10 per year up till £150, with board and lodging, not including alcoholic drinks and aerated waters. Applications to the Secretary, George A. Townsend, by November 29th.

**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.

**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.

**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.

**KENSINGTON UNION.**—Medical Officer for the No. 2 Relief District; must reside in the district. Salary, £100 per annum, with extra fees for midwifery and surgical operations; must possess double qualifications. Applications on prescribed form to J. H. Rutherford, Clerk to the Guardians, Guardians' Offices, Marles Road, London, W., by November 29th.

**LEICESTER INFIRMARY AND FEVER HOUSE.**—Assistant House-Surgeon; double qualifications. Salary, £80 per annum, with board, apartments, and washing. Applications to T. A. Wyke, 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. R. Greene, Secretary, Leith Offices, 34, Moorfields, Liverpool, by November 24th.

**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 Moseley Fever Hospital; appointment for twelve months. Salary, £100 per annum, with board and residence. Applications to the Chairman of the Board by November 29th.

**METROPOLITAN ASYLUMS BOARD, SOUTH-WESTERN FEVER HOSPITAL, Stockwell.**—Clinical Assistant. Residence and rations as remuneration. Applications to the Medical Superintendent at the Hospital.

**PARISH OF DUBLINISH, SKYE.**—Medical Officer and Public Vaccinator; a knowledge of Gaelic a recommendation. Salary, £100 per annum. Applications to John Nicolson, Inspector, Dunvegan, by December 1st.

**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 28th.

**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 Mercer, Secretary, by December 1st.

**SHEFFIELD BOROUGH HOSPITAL.**—Medical Officer. Salary, £200 per annum. Applications by November 25th; appointment on December 1st.

**TAUNTON AND SOMERSET HOSPITAL.**—Honorary Dental Surgeon; must be registered practitioner or licentiate in dental surgery. Applications to J. H. Biddulph Pinchard, Secretary, 13, Hammet Street, Taunton, by December 10th.

**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.

**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.

**WEST LONDON HOSPITAL, Hammersmith Road.**—House-Surgeon; tenable for six months. Board and lodging. Applications to R. J. Gilbert, Secretary-Superintendent, by December 11th, and to appear before the Medical Council at 4.30 on December 12th.

**WEST LONDON HOSPITAL, Hammersmith Road.**—House-Physician, tenable for six months. Board and lodging. Applications to R. J. Gilbert, Secretary-Superintendent, by December 11th, and to appear before the Medical Council at 4.30 on December 12th.

### MEDICAL APPOINTMENTS.

**ALEXANDER, Peter, L.R.C.P. and L.R.C.S.Edin.,** appointed Medical Officer for the Whitley District of the Tynemouth Union.

**BALFOUR, James C., L.R.C.P. and L.R.C.S.Edin.,** appointed Medical Officer for the West District and Workhouse of the Belford Union.

**BATTERHAM, J. W., M.B., B.S.Lond., F.R.C.S.,** appointed Assistant Surgeon to the Hastings, St. Leonards, and East Sussex Hospital.

BOYCOTT, Arthur Norman, M.R.C.S., L.R.C.P.Lond., appointed Third Assistant Medical Officer to the London County Asylum, Cane Hill.

BROCK, Mr. Ernest, reappointed Resident Medical Officer to the Royal Hospital for Diseases of the Chest, City Road, for a further period of six months.

BROWN-LESTER, Dr., appointed Medical Officer to the Gambia Anglo-French Boundary Commission.

COOKE, George Harry, M.R.C.S.Eng., L.R.C.P.Lond., appointed House-Surgeon to the Clinical Hospital for Women and Children, Manchester, *vice* Percy Ashworth, M.D.

COPE, A. E., M.B., B.S., appointed Resident Medical Officer to the Western Dispensary, Rochester Row, Westminster, *vice* James B. Menzies, L.R.C.S., M.R.C.S.

CORCORAN, Thomas, L.R.C.S.I., L.A.H.Dub., appointed Medical Officer of Health to the Loughborough Urban Sanitary District.

DICKSON, Walter, M.B. and C.M.Edin., appointed Junior House-Surgeon to the Clayton Hospital and Wakefield General Dispensary.

FAIRLIE, Archd., M.A., M.B., C.M.Glasg., appointed Indoor House-Surgeon to the Glasgow Maternity Hospital, *vice* Dr. Carshaw.

FARRAR, Charles, M.D.Heidelb., L.F.P.S. and L.M.Glasg., L.S.A., appointed Medical Officer of Health to the Chatteris (Cam.) Urban Sanitary Authority, and reappointed Medical Officer and Public Vaccinator to the Fourth District of the North Withford Union.

FISHER, F. O., F.R.C.S.Eng., L.S.A., reappointed Medical Officer for the Sarfart District of the Watford Union.

FLEMING, Samuel, M.B., C.M.Edin., appointed Assistant House-Surgeon to the Glamorgan and Monmouthshire Infirmary, Cardiff, *vice* W. Higgins, B.A., M.B.

GRAVES, W. R., L.R.C.P.I., L.R.C.S.I., appointed Pathologist to St. Mark's Ophthalmic and Aural Hospital, Dublin.

GRAY, David C., M.B., C.M.Glasg., appointed Outdoor House-Surgeon to the Glasgow Maternity Hospital, *vice* Dr. Law.

HAROLD, Burgess Osburn, M.R.C.S., L.R.C.P., appointed House-Physician to the General Lying-In Hospital, *vice* Harold Low, M.B.Cantab., resigned.

HIGHT, John, M.D. and C.M.Glasg., reappointed Medical Officer of Health to the Worlington Urban Sanitary District.

HILDYARD, R. L., M.R.C.S., appointed Medical Officer for the Sixth District of the Shepton Mallett Union.

HUGH, M. Smellie, M.B., Ch.Edin., late House-Surgeon, to be Visiting-Surgeon to the Memorial Hospital, Jarrow.

HUTTON, James Alfred, M.B., C.M., appointed Second Medical Officer (out-door) to the Scarborough Friendly Societies Medical Association, *vice* A. M. Bredon, M.B., C.M.

JACKSON, John Archibald, M.B. and M.S.Glasg., appointed Honorary Medical Officer to the Hexham Dispensary.

KENDAL, C. R., M.R.C.S., appointed Honorary Medical Officer to the Hexham Dispensary.

LAWFORD, J. B., F.R.C.S.Eng., elected Assistant Surgeon to the Royal London Ophthalmic Hospital, Moorfields.

MARSHALL, John J. de Zouche, L.R.C.S.I., L.A.H.Dub., appointed Medical Officer to the Hastings and St. Leonards Provident Dispensary, *vice* C. A. Brodribb, M.R.C.S., resigned.

MILLS, W. T., L.R.C.P.I., L.R.C.S.I., appointed House-Surgeon to the Jervis Street Hospital, Dublin.

MONTGOMERY, Robert J., M.B., B.Ch.Dublin, F.R.C.S.I., appointed Examiner in Materia Medica and Botany to the Pharmaceutical Society of Ireland.

MORTON, Edwin, M.D., appointed Medical Officer of Health for Redditch.

PARRY, E. J., M.D.Irel., L.R.C.P. and L.R.C.S.Edin., appointed Medical Officer for the Garw District of the Bridgend and Cowbridge Union.

ROBINSON, Montague G., L.R.C.P., L.R.C.S., L.M., reappointed Medical Officer and Public Vaccinator for the No. 2 District of the Daventry Union.

SMITH, Fred. J., M.D., appointed Assistant Physician to the Royal Hospital for Diseases of the Chest, City Road, N.C., *vice* E. Stewart, M.D., resigned.

SPECKLY, H. M., M.R.C.S., L.R.C.P., appointed House-Physician to the London Hospital.

STEWART, Duncan, L.R.C.P., L.R.C.S.Edin., appointed Honorary Medical Officer to the Hexham Dispensary.

SUTHERLAND, D. G., M.B., C.M., B.Sc.Edin., appointed Medical Officer of Health for the county of Sutherland.

THYNE, George, M.B., M.S.Edin., appointed Resident Surgeon to the Sick Children's Hospital, Newcastle-on-Tyne.

TURRELL, Walter John, B.M. and B.S.Oxon., appointed House-Surgeon to the Radcliffe Infirmary, Oxford, *vice* G. A. Pratt, M.R.C.S., L.R.C.P.

WALLACE, Q. MacAdam, M.B. and C.M.Edin., appointed Deputy Medical Officer for Birkenhead.

WARE, G. S., M.B., M.R.C.S., L.R.C.P., appointed Medical Officer to the Raynham District of the Walsingham Union, *vice* Dr. G. Powell.

WHITAKER, Henry, M.D.Irel., M.R.C.S., appointed Medical Superintendent of Health and Chief Sanitary Officer for the Municipality of Belfast.

### DIARY FOR NEXT WEEK.

#### MONDAY.

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

MEDICAL SOCIETY OF LONDON, 8.30 P.M.—Dr. Gilbert Smith: A Case of Abdominal Pulsation. Mr. Marmaduke Shield: (1) A Case of Radical Cure of a large Irreducible Hernia when the Great Omentum was removed; (2) a case of "Leucoplakia" of the

Tongue where half the organ was removed for epithelioma two years ago. Mr. Davy: Fracture of Femur: subsequent dislocation: excision of head, neck, and trochanter: location of trochanter minor in acetabulum. Dr. Sansom: Cardiac Disease: Stetway's and von Graefe's sign well marked, with little or no exophthalmos. Dr. Beevor: (1) Case of Athetosis; (2) case of Masturbation at the age of 9 months. Sir Hugh Beevor: Absence of Pulse in Arteries of right upper Limb. Dr. Colcott Fox: Dermatitis Herpetiformis. Dr. Murray: Four Cretins. Dr. Rivers: Case of Recurrent Paralysis of Third Nerve every three months. Mr. H. Allingham: (1) Case of Gastrostomy; (2) case of Ruptured Ureter. Dr. Herringham (for Dr. Sutherland): A Case of Congenital Deformity of the Arm. Mr. Bruce Clarke: Immediate Suture of Ruptured Urethra. Mr. Keetley: Excision of Ankle, and other cases. Mr. John Morgan: Child with Tail-like Projection over Sacrum. Mr. Edmund Owen: Two Cases of Cleft Palate after Operation. Dr. Hadden: Hypertrophy of Leg.

#### TUESDAY.

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

ROYAL MEDICAL AND CHIRURGICAL SOCIETY, 8.30 P.M.—Mr. John H. Morgan: On 114 consecutive Cases of Operation for Calculus in the Bladder, performed at the Hospital for Sick Children, and a comparison of the methods adopted. Dr. Frederic Hewitt: Clinical Observations upon Respiration during Anæsthesia, with special reference to the causes of embarrassed and obstructed breathing.

#### WEDNESDAY.

LONDON POST-GRADUATE COURSE, Hospital for Consumption and Diseases of the Chest, Brompton, 4 P.M.—Dr. Green: Clinical Demonstration of Cases in the Wards. Royal London Ophthalmic Hospital, Moorfields, 8 P.M.—Mr. A. Quarry Silcock: Ophthalmoscopic Cases.

ANATOMICAL SOCIETY OF GREAT BRITAIN AND IRELAND, Charing Cross Hospital School Buildings, 4.30 P.M.—Papers and Specimens:—Professor Alexander Macalister: Notes on Specimens from the Dissecting Room. Professor Stewart: Section of the Scalp of an Adult Negro, showing the curved hair follicles. Mr. Arthur Thomson: On the Skin and Hair of a Negro Fetus. Dr. George Gulliver: On a Skull with Wormian Bones in the Frontal Suture. Mr. F. G. Parsons: Specimens of Short Muscles of the Thumb. Mr. C. B. Lockwood: Synostosis of Vertebrae.

HUNTERIAN SOCIETY, 8 P.M.—Mr. G. J. B. Stevens: Notes of a Case of Syphilitic Sore of Finger. Mr. Jonathan Hutchinson, jun.: On Certain Injuries to the Elbow-joint and their Treatment.

#### THURSDAY.

LONDON POST-GRADUATE COURSE, National Hospital for the Paralysed and the Epileptic, 2 P.M.—Mr. Victor Horsley: Surgical Treatment of Diseases of the Brain and Spinal Cord. Hospital for Sick Children, Great Ormond Street, 4 P.M.—Mr. J. H. Morgan: The Modern Aspects of Operative Surgery in Childhood, No. 2.

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

#### FRIDAY.

LONDON POST-GRADUATE COURSE, Hospital for Consumption and Diseases of the Chest, 4 P.M.—Dr. Green: Clinical Demonstration of Cases in the Wards.

CLINICAL SOCIETY OF LONDON.—Living Specimens at 8 P.M.: Dr. Sidney Phillips: A Small Aneurysm in the Neck attributed to supuration from scarlet fever. Mr. W. G. Spencer: A Case of Arrested Development of the Third, Fourth, and Fifth Metacarpal Bones in both Hands; and other cases. Mr. Arbuthnot Lane: An unusual kind of Congenital Deformity of Palate and Lip. Papers at 9 P.M.: Mr. Buckton Browne: A Case in which several Fragments of Bone were removed from the Male Urinary Bladder. Dr. Goodhart: Two Cases of Hydronephrosis relieved by natural effort. Mr. Barker: Two Cases of Dermoid Cyst in connection with the Tongue.

BRITISH LARYNGOLOGICAL AND RHINOLOGICAL ASSOCIATION, Chandos Street, W., 4 P.M. and 8.30 P.M.

### BIRTHS, MARRIAGES, AND DEATHS.

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

#### BIRTHS.

DAVIS.—On November 16th, at Sunnyside, Sidcup, Eleanor, the wife of George William Davis, M.B., of a son.

MC CREERY.—At Hilsa Barracks, on November 17th, the wife of Surgeon-Major N. McCreery, of a son.

#### MARRIAGE.

CRESSY—GREENWAY.—On November 4th, at St. Mary, Magdalene, Addiscombe, by the Rev. J. Wallace, assisted by the Rev. E. Morse, Vicar of Shelford, uncle to the bride, and the Rev. H. Glover, Vicar, George John Cressy, Surgeon, of Warsop, eldest son of William H. Cressy, M.R.C.S.Eng., of Wallington, to Devereux Christians, youngest daughter of H. J. V. Greenway, of Ashburton Road, Addiscombe.

#### DEATH.

RATHILL.—At Westerham, Kent, on November 18th, R. Mostyn Rathill, M.R.C.S., L.S.A., in the 77th year. No flowers by request.

## 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.*—M., 3; Th. 2.
- 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, Chelsea.** *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 ORTHOPÆDIC.** *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 ORTHOPÆDIC.** *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; Orthopædic, 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; Orthopædic, 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., 2, 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; Orthopædic, W., 10; Throat, Tu. F., 1.30; Skin, M. Th., 1.30; Electrotherapeutics, Tu. F., 2; Dental, W. S., 9.30; Consultations, W., 9.30. *Operation Days.*—Tu., 1.30; (Orthopædic), 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, 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; Orthopædic, 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.

A MEMBER would be glad to be informed of the best kind of filter for domestic purposes.

"MIROIRS ROTATIFS."

A CORRESPONDENT desires to know where the "miroirs rotatifs," which are used by M. Luys in producing fascination, can be obtained.

HOMES WANTED.

M.R.C.S. (Yorkshire) writes: N., aged 7 years, is the son of poor parents, who find him a heavy burden. He is of stunted growth, has never had the power of speech, but his hearing appears to be normal. He is mischievous and wanting in intelligence.

W., aged 13 years, also the son of poor parents, sustained injuries in the harvest field three months ago, which necessitated amputation of the left arm close to the shoulder, and of the right forearm above the wrist.

I wish to know if any institution exists into which N. could gain admission; also if there is a home for cases similar to that of W.

A NECESSARY INQUEST NOT HELD.

L.R.C.P. writes: I was urgently summoned to a confinement last week, and on arrival found the mother dead—from profuse hemorrhage—the child alive, and the cord tied, and the uterus inverted, with the placenta and membranes still attached. No inquest was held. Surely one ought to have been held, either in the interests of the friends or the midwife.

\*"Certainly in such a case an inquest ought to be held in justice to those in charge, both in the interest of science and of women in peril."

KICKING OFF THE BEDCLOTHES.

A MEMBER asks for any hints as to dealing with a boy, aged 4½ years, who nightly kicks the bedclothes off as often as they are replaced. In consequence, it is surmised, he frequently contracts catarrh of the respiratory passages. Two years ago he had a bronchitic attack with lobular pneumonia. There is slight evidence of rickets in the ends of the arm bones, but nowhere else. The greatest possible care has been taken since his birth regarding his food, clothing, and general hygienic surroundings, consistent with Member's knowledge gained from reading and fifteen years' experience. He has lately been put into a woollen sleeping suit.

### ANSWERS.

PREVENTION OF FLEA BITES.

M.R.C.P.LOND. writes: In my travelling bag I habitually carry a small bottle of carbolic acid, on account of the torment which a chance flea inflicts on me. If attacked, I take two or three pieces of waste paper, and upon each put a few drops of the strong acid, then roll them up and place them in different places around me in bed. This effectually ends the annoyance. I think the pungent "disinfecting" acid is the most effectual.

HERB MERCURY.

W. W. M.—The botanical identity of the plant mentioned by our correspondent appears uncertain, though probably *Mercurialis perennis* or *M. annua* is meant, as both these plants are popularly associated with the name of mercury. We have been unable to learn that either of them is at present used in medicine at all; it has been stated that the two plants contain methylamine. The root bark of the Brazilian plant, *Franciscia uniflora*, has been introduced into this country under the name of vegetable mercury and is recommended as an antisyphilitic, purgative, diuretic, emmenagogue, etc. (*vide Therapeutic Gazette*, 1880 and 1887, p. 171).

### NOTES, LETTERS, ETC.

ERRATUM.—In the BRITISH MEDICAL JOURNAL of November 8th, p. 1035, col. 1, line 9, for "A. W. M. Robson" read "A. Wm. Robson."

against the plan I advocate as opposed to the A B C and other monthly lists. I have known several who have tried monthly plans and discarded them on account of the danger of omitting items, the time and labour involved, and the general unsuitability to the purposes of general practice.

M.D. (Southport), writes: In another long letter Dr. Illingworth continues to demolish an imaginary system of book-keeping which he calls the A B C, but none of those who use that system could recognise it from his description. In all his letters there is not one single criticism upon the A B C system which does not commence with and depend entirely upon an incorrect assumption about the facts. In this last letter he challenges Dr. Hardwicke and myself to give explicitly the time and labour required to work the A B C system. He has an average of from 100 to 180 patients a month, and he states that it would occupy from 15 to 20 minutes every evening to record the day's work accruing from this list. For several years my list averaged about 270 patients a month, occupying 12 or 13 pages of the A B C day-book, and it took me about five minutes to register the day's work and to mark the visits to be paid next day. The consultations at home were entered immediately after the patient left, two or three seconds being sufficient for an entry if the name were already down for that month, a few more if not. Dr. Illingworth fails to recognise the simple fact that one does not wade through the whole list in order to mark off the visits, but looks only to the "to be visited" marks for the particular day. Dr. Illingworth would keep a separate book for club, pauper, and other persons. How many books will he have? Dr. Hardwicke ran him up to five, without this last and without a cost and expense book.

His second paragraph is devoted to answering the question—What is the monthly posting of the A B C method? I have already told him that it means one hour per month for each £1,000 a year booked. He says it is "a great deal of arithmetic." The last half year's posting that was done in my practice by the old method occupied all the spare time of my wife, my assistant, and myself for six weeks. The same work is done by Mr. Allsop's system in 12 to 15 hours—a little over two hours per month. Dr. Illingworth says he has had several letters expressing approval of his system of book-keeping, but that as yet only Dr. Hardwicke and myself have supported the A B C method. He told us in another letter that he had asked 40 or 50 gentlemen, to whom he had sent specimen sheets, to write briefly to the BRITISH MEDICAL JOURNAL their opinion of the system. Only one, I believe, has responded.

When I say only one I am ignoring "Experto Crede," who writes in the JOURNAL of November 15th, and who sweeps away both the A B C and the A 1 method in favour of the time-honoured and time-wasting old system. It passes his comprehension how a man could register in one of the A B C day-book squares the fact that he had been detained an hour at a certain visit? I would suggest the usual cross (X) followed by a tiny h. The other reason why he rejects the A B C system is the assumption that a prescription-book cannot be used with it and prescriptions readily referred to. Of course a prescription-book should be used in every well-managed practice, no matter what the system of book-keeping, and by no system are prescriptions more readily referred to than by the A B C. One great advantage of the system is that the prescriptions are kept in a book by themselves and are not mixed up with the business part of the work. These gentlemen should adopt Dr. Hardwicke's suggestion and obtain a prospectus from Mr. Allsop before writing letters which can only mislead "Rustic" and others who seek for guidance.

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

(A) A. M., Mr. C. H. Ashton, Liverpool; R. Arthur, M.B., London; Mr. J. Adams, Glasgow; Anti-quack. (B) Dr. J. Brown, Bacup; Mr. J. Bowler, Manchester; Mr. F. W. Burton, Cambridge; Mr. F. W. P. Bartlett, Glasgow; Mr. T. J. Bokenham, London; Mr. E. A. B. Burton, London; Dr. Bentley, London; Mr. A. E. Barrett, London; Mr. W. Brown, Kelvinside; Dr. Bridgewater, Harrow; Dr. J. W. Ballantyne, Edinburgh; Dr. J. O. Brookhouse, Nottingham; Surgeon J. C. Battersby, Dublin; Mr. A. N. Boycott, Purley; Sir John Banks, Dublin; Mr. A. A. Bowlby, London; Dr. Barnes, London; Mr. R. S. Black, Preston; Mr. W. Benham, London; Dr. A. Boswell, Ashbourne; Mr. J. W. Black, London; Dr. A. T. Brand, Driffield; Dr. J. M. Booth, Aberdeen; Mr. A. Butler, Glasgow; Dr. A. H. Bampton, Ilkley; Dr. Balding, Royston; Mr. G. Balfour, Wimbledon; Messrs. R. Baelz and Co., London; Dr. C. Beale, London. (C) Sir Edward Clarke, London; Dr. Crabb, London; Dr. Cranston Charles, London; Dr. S. M. Copeman, London; Mr. J. Cornwall, London; Surgeon-General Cornish, London; Dr. Alfred Carpenter, London; Mr. Watson Cheyne, Berlin; C.M.; Mr. Charles Cressy, Wallington; Dr. C. Chepmell, Brighton. (D) Dr. A. Duke, Dublin; Mr. Alban Doran, London; Mr. J. N. Dunn, Edinburgh; Lovell Drage, M.B., Hatfield; Messrs. C. W. Downard and Co., Hove; Dr. W. Douglas, Leamington; Mr. J. M. Davy, Penzance; Mr. A. C. Dixey, Caldicott; Dr. G. T. Davies, Liverpool. (E) Mr. Edward East, London; Mr. M. G. Evans, Brecon; Dr. E. J. Edwardes, London; Mr. J. Edmunds, London; Messrs. Ewart and Son, London. (F) Freemason; Dr. R. E. Foot, Wood Green; Captain K. Mackenzie Foss, Umballa; Dr. R. H. Fox, London; Mr. A. Frost, London; Dr. R. Farquharson, London; G. Ferdinand, M.B., Aberdeen; Mr. N. H. Forbes, Sandgate; Farnix; Dr. D. W. Finlay, London. (G) Mr. A. J. Garland, Oamaru, N.Z.; Mr. H. S. B. Goodall, London; Dr. G. E. J. Greene, Ferns; Mr. C. N. Griffiths, Cheltenham; Mr. C. H. Grissler, London. (H) Mr. R. Hewetson, London; Mr. F. E. Hare, Aberdeen; Mr. T. W. Hannaford, London; Mr. E. L. Hussey, Oxford; Mr. A. W. Hall, London; Mr. T. Horsfall, Bedale; Dr. W. P. Herringham, London; Mr. L. Henser, Neuwed; H. C.; Dr. G. Henty, London; Mr. J. Harrold, London; Surgeon-Major J. P. Hunt, M.B., Gibraltar. (I) Inquirer. (J) Mr. R. S. Jaynes, Glasgow; Mr. F. B. Jessett, London; Mr. W. H. Jalland, York; Mr. W. R. Jackman, Wolverhampton. (K) Staff-Surgeon S. Kenys, Inverness; Mr. E. Kraus, Berlin; Dr. Skene Keith, London. (L) R. Lyons, M.B., Newmilns; Mr. J. M. Le Sage, London; Mr. T. Langston, London; Mr. A. E.

Leeson, Montreux; Mr. H. B. Lonsdale, Carlisle; Mr. J. Lowney, Portsmouth; Mr. Jordan Lloyd, Birmingham. (M) Mr. O. Maass, Vienna; Mr. W. A. Morris, London; Dr. Mickle, London; Messrs. Mayer and Meltzer, London; Dr. E. Matthews, Redditch; Mr. D. Meadows, Great Yarmouth; Medical Staff; Dr. W. Macewen, Glasgow; The Medical Officer of the Local Government Board, London; Dr. Macdonald, Liverpool; Dr. R. Morton, Redditch; Mr. G. Mason, Edinburgh; Medical News; Mr. G. B. Mason, Ramsgate; Dr. R. Martin, Manchester; Mr. D. C. May, London; Dr. Mackechnie, West Hartlepool; Dr. R. Maguire, London; Dr. S. Mackenzie, London; Dr. A. T. Myers, London; Dr. F. J. Mouat, London; Dr. Angel Money, London. (N) Mr. R. Nitch-Smith, London; Dr. J. T. Neech, Tyldesley. (O) Dr. R. J. O'Brien, Midleton; Dr. Bernard O'Connor, London. (P) Dr. R. Pugh, Armley; Dr. C. W. Philpot, Croydon; T. J. Pritchard, M.B., Retford; Dr. Campbell Pope, London; Miss N. Paul, London; Dr. Leslie Phillips, Birmingham; Dr. H. Page, Redditch; Mr. R. W. Parker, London; Dr. G. W. Potter, London; Dr. F. Pearse, Southsea; Perthshire; Mr. J. H. B. Pinchard, Taunton; Mr. J. Poland, London; Mr. Edward Pope, Tring; Dr. F. Penrose, London; Mr. J. Powell, Barry. (R) Dr. Wm. Robinson, Stanhope; Mr. W. Randall, Bridgend; Mr. A. W. Robson, Aston; Dr. J. K. Robinson, Doncaster; Dr. R. W. Raudnitz, Prague; Mr. H. M. Robinson, London; Dr. Russell Reynolds, London; Messrs. Raphael Tuck and Co., London; The Registrar of the General Medical Council, London; Dr. G. Reid, Stafford; Dr. A. Routh, London; Mr. G. Rendle, London; Dr. R. J. Ruttle, Accrington; Mr. C. J. Radley, London; Mr. M. G. Robinson, Davenport; Surgeon-Major W. A. C. Roe, Bedford. (S) Mr. H. Shipton, Stafford; H. Stalkart, M.B., London; Professor Grainger Stewart, Edinburgh; Mr. H. M. Speechly, London; Dr. W. Sykes, Mexborough; W. R. Speirs, M.B., Carlisle; Mr. R. P. Smith, Bromsgrove; Dr. W. Smith, London; Mr. W. T. Stead, London; Mr. J. A. B. Stuart, Heckmondwike; Dr. Wm. Stirling, Manchester; Mr. P. Selby, Greenstreet; Dr. G. E. Shuttleworth, Lancaster; Mr. C. T. Standring, London; Mr. Morton Smale, London; Dr. Steele, London; Mr. W. E. Scott, London; Mr. A. E. Sellers, Liverpool; Dr. Burdon Sanderson, Oxford; Dr. Ralph Stockman, Edinburgh; Mr. Sleman, London; Mr. Walter Stockwell, Bath; Mr. H. W. Shadwell, Acton; Mr. G. Stoker, London; D. G. Sutherland, M.B., Dornock; Dr. J. F. J. Sykes, London; Mr. R. Sanderson, Brighton; Mr. E. K. Smith, Hastings; Surgeon. (T) Mr. Towers-Smith, London; Mr. C. L. Todd, London; Dr. Lloyd Tuckey, London; Dr. J. Batty Tuke, Gorgie; Surgeon C. M. Thompson, Bangalore; Dr. J. Taylor, Chester-le-Street; Dr. G. Thin, London; Mr. C. Thorn, Norwich; Mr. J. W. Taylor, Birmingham. (U) Mr. J. Utting, Liverpool. (V) Veritas; Mr. G. H. Vos, Tottenham. (W) Mr. C. G. Wheelhouse, Ffiley; Dr. T. M. Watt, Hovingham; Dr. Theodore Williams, London; Dr. E. G. Wake, London; Dr. E. Willoughby, London; Dr. Whitla, Belfast; Dr. A. Wilkinson, Tynemouth; Mr. A. J. Weatherby, Kurseong, Bengal; Dr. H. Woods, London; Mr. W. Wylie, Skipton; Dr. W. Woodward, Worcester; Mr. C. A. Wigon, Portishead; Dr. O. Wood, London; Mr. W. J. H. Wood, Boston; Mr. C. H. Whitcombe, Westerham. (Y) Dr. Burney Yeo, London.

#### BOOKS, ETC., RECEIVED.

Barker's Facts and Figures for 1891. Edited by T. P. Whittaker. London: Frederick Warne and Co. 1890.

Prince, Princess, and People. By Henry C. Burdett. London: G. Routledge and Sons. 1890.

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