

logical changes, and bring about reparative or recuperative action. Cases were cited in which such influences were clearly set forth.

Dr. White maintained that the normal equilibrium between the cerebro-spinal and the sympathetic systems as respects their influence upon the blood vessel was obviously more or less interfered with when the brain transmitted a more than wonted impulse, allowing the unrestrained action or paralyzing the influence of the sympathetic vasomotor nerve. In this relation he narrated some remarkable cases of hypnotism, and quoted some striking examples of the effect of the central nervous system upon the body.

He believed that in many of the cases described there could be little doubt that relief of tension was an important factor in amelioration or cure. If it were assumed that preternatural tension existed in the cranial cavity, this would be relieved to an extent by trephining, and there would be but few exceptions to the rule that in each case something was done which lessened tension in a cavity or organ of the body. There were other cases, however, in which no such relief was obtained, and yet cure resulted from operation. A diminution of the tension would manifestly alter the blood supply to any important organ in the body, and with it the nutritive processes local and general. Beyond this nothing definite could be said except as it applied to cases of ascites in which, as in cases of hydrarthrosis, one tapping might prove permanently curative, because the original source of irritation and hypersecretion had already disappeared.

Under the head of reflex action Dr. White included the "reaction of traumatism" as well as the effects of revulsion and counter-irritation. Verneuil had long since shown that very slight traumatism sometimes excited in the entire economy a general perturbation, and sometimes, by selection of the weak point, a sudden aggravation of lesions that were only slight or were slumbering. This same excitement, usually prejudicial, might occasionally be curative. In the case of spinal surgery above detailed Dr. White believed that the local shock of the operation was promptly followed by a corresponding reaction, in which the vitality of the tissues was raised sufficiently high to determine a return to the normal state. In this relation the reciprocal influence of one portion of the body on another was briefly discussed.

In considering abdominal tumours, attention was called to the possibility of the spontaneous disappearance of such tumours, the relation of this disappearance to the operation being coincidental. Cases were cited in point. As to the cure or amelioration of growths thought to be malignant by merely exploratory operation, a long search through the literature of the subject had met with but little success. The cure of tuberculosis of the peritoneum as the result of exploratory incision was explained on the ground that the removal of ascitic fluid allowed the peritoneal surfaces to fall together and to acquire adhesions. The tubercles were thus shut in between the coils of intestine, the omentum, and the abdominal wall; surrounded by tissues in a high degree of activity, limiting zone of young cells and eventually fibrous tissue might be thrown around them, and, if the tuberculous process was not too far advanced, might effectually resist it and might cause it to retrograde.

Dr. White drew the following conclusions:—

1. There are large numbers of cases of different grades of severity and varying character which seem to be benefited by operation alone, some of them by almost any operation.

2. These cases include chiefly epilepsy, certain abdominal tumours, and peritoneal effusions and tubercle, though the improvement in the latter is, perhaps, to be explained on general principles.

3. Of the possible factors which, by reason of their constancy, must be considered, anaesthesia seems least likely to have been effective. The other three, namely, psychical influence, relief of tension, and reflex action may enter in varying degrees into the therapeutics of these cases, and taken together serve to render the occurrence of occasional cures less mysterious.

4. The theory of accident or coincidence scarcely explains the facts satisfactorily.

An Exchange Company's telegram from Alexandria states that typhus fever has broken out among the Mecca pilgrims.

MEMORANDA:

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

AN EASY AND EFFECTUAL METHOD OF PLUGGING FOR EPISTAXIS.

A PIECE of old, soft, thin cotton, oiled silk, or silk, about 6 inches square—a piece of an old handkerchief will answer—is taken, and by means of a probe, metal thermometer case, or penholder is pushed "umbrella" fashion into the nostril, the direction of pressure, when the patient is sitting erect, being backwards and slightly downwards. It is pushed on until it is felt that the point of the "umbrella" is well into the cavity of the nasopharynx.

The thermometer case is now pushed on in an upward direction and then towards the sides, so as to push more of the "umbrella" into the pharynx, and is then withdrawn. The closed end of the sac protrudes well into the pharynx, and its open end protrudes at the anterior nares. The inside of the sac may be brushed with some astringent, such as alum, turpentine, etc.

A considerable quantity of cotton wool is pushed well back to the bottom of the sac in the pharynx. Then, the thermometer case being held well against the packed wool, the mouth of the sac is pulled upon, and thus its bottom is drawn forward, and forms a firm, hard plug wedged into the posterior nares. The sac may now be packed full of cotton wool, dry or soaked in some astringent solution. The mouth of the sac is tied just outside the nostril, trimmed with scissors, and the ends of the thread secured outside.

It might be suggested to oil the cotton or silk, but I have never found any difficulty without the oil, as the blood renders the material wet and easy of introduction; while the oil does not facilitate removal, and may modify the effect of any hæmostatic employed.

In removing the plug, open the mouth of the sac, and, with small dressing forceps, gently remove the cotton-wool bit by bit. If there is bleeding, simply syringe the sac with weak carbolic lotion or Condy's fluid, and repack with clean cotton wool. If there is no bleeding when the wool is picked out, gently pull out the sac, or if it be adhering to the mucous membrane of the nostril, apply a little warm water, and it may then easily be removed.

There are many advantages in this method: (a) It is easy, quickly accomplished and effectual, and the materials used are to be found in every house, and, indeed, about everybody's person (I have plugged in this manner, simply using a handkerchief, one part of which was used as the sac, and the other torn into narrow strips, in place of cotton wool); (b) no damage is done to the floor of the nose or back of soft palate by strings, etc.; (c) no disagreeable hawking, coughing, or vomiting takes place during introduction; (d) no disagreeable strings are left hanging inside the mouth causing coughing and vomiting; (e) The plug can be removed without any force, so that no damage is done to the mucous membrane, and no return of hæmorrhage caused.

I employed this method frequently when in country practice, and do so now in bleeding after operation on the nares, and have always found it to be satisfactory.

Belfast.

A. A. PHILIP, M.B., C.M.Aberd.

APYREXIAL INFLUENZA.

THE two following cases, from their peculiarity and similarity to one another, are worth recording:

CASE I. B. W., aged 32, got up feeling quite well. She had been nursing a fatal case of the epidemic for three weeks; during the afternoon she began to feel unwell, and this was followed by vomiting and diarrhoea, which lasted about an hour and a half; faintness came on, and about 8 p.m. she went to bed; soon after another attack of fainting occurred. Several more similar attacks happened. About midnight, instead of rousing from the faintness as previously, she passed into delirium. I found the following conditions: Face rather pale, pupils widely dilated, but sensible to light; breathing shallow, with an occasional sigh; knitting of the brows; con-

stantly crying out, "Oh! my head," and putting the hand there. When asked as to pain, said there was none; other questions were unheeded, or answered in monosyllables. With the exception of attempting to get out of bed once or twice, she lay perfectly still, the eyes would close, as if going to sleep, and she would remain quiet for a minute or two, then the wandering would recommence, during which she gave a clear and intelligible account of what had occurred during her nursing; the tongue was moist, flabby, and coated; the pulse at first was 58, after some stimulant it rose to 62; the temperature was 95° F. In this condition the patient remained four hours, when she gradually came to. The four hours were a complete blank to her; she only remembered, just before the delirium set in, feeling very bad, and as if sinking through the bed. The next day loud complaints of headache were made, particularly over the parietal and frontal regions; the eyes ached, were suffused, slight coryza was noticed, lumbar pain rather severe, general aching of the limbs, loss of taste, no appetite, and marked prostration.

The patient continued to improve slowly during the next three days, when, owing to a sudden fright, she went again into the same delirious state, talking in the same way as on the first occasion; this time the delirium did not last so long, though the symptoms were exactly similar, the pulse was 60 per minute, temperature 96°, and, on regaining consciousness, she had no knowledge of what had happened.

In about ten days from the onset of the attack the patient was fairly well, but exhaustion was still noticeable, any exertion caused shortness of breath, and a symptom never before complained of—palpitation. She is still in a nervous state.

CASE II. A. R., aged 40, had felt well during the day; on going to bed, she complained of her head aching. Her daughter noticed she talked a little strangely, and was giddy; two or three times in the early part of the night she seemed to faint, but rallied soon after; the fainting again occurred, and merged into delirium. In this state I saw her. The eyes were open; she was turning from side to side, only answered "Yes" to anything asked her, and that occasionally only. She did not talk or mutter; the temperature was 96.5°; the pulse was 67. She regained consciousness in about three hours, and, as in Case I, her mind was a perfect blank as to what had happened. She felt ill, complained of pains all over; frontal headache was severe; the prostration was most marked; all the next day she was in a drowsy state, feeling too tired to move in bed. The case did well, and was convalescent by the end of a week.

The treatment adopted in both cases was stimulants, beef-tea, eggs, milk, with a mixture containing ammonia, cinchona, with strophanthus.

There are points in the cases mentioned so closely resembling the course run in influenza that it seems scarcely possible to attribute them to any other cause. There is the usual history: sudden onset, no reasonable cause for attack (except Case I); the subsequent symptoms are in each case distinctly of the influenza type and there is the prolonged stage of prostration. During the epidemic of 1890 a similar instance came under my notice; the pulse was unusually slow, the temperature subnormal, and the patient was in a condition of stupor, lasting many hours, broken only by attacks of coughing; there was considerable difficulty in getting answers to questions, and then they had to be loudly and often repeated.

A symptom which I have failed to see mentioned, and which among my own cases has been tolerably common in both sexes, is frequency of micturition. The urine is abundant, straw-coloured, often non-febrile, sometimes lithates have been present; in two cases only has a faint trace of albumen been found: this looks also of a nervous origin.

Ventnor, I.W.

H. W. GODFREY, M.B.

SALICYLATE OF SODA IN DIPHTHERIA.

I HAVE lately had two cases of diphtheria under my care; I gave salicylate of soda. In both cases the temperature became normal, and the exudation cleared off after twenty-four hours' treatment. I substituted chlorate of potash, and, after twenty-four hours, the exudation had slightly returned in one case with a small rise in temperature; in the other the exudation returned as extensive as ever, and the temperature rose to 103°. On returning to the salicylate treatment the tempera-

ture was again normal twenty-four hours after, and the patch is gradually disappearing. The milder case is convalescent without returning to the salicylate. Some years ago I made some observations on the treatment of scarlatina with salicylate of soda, and from my experience I should recommend that if salicylate be administered at all it should be continued in more or less quantity during the first week. My experience in diphtheria has been very extensive; seven years ago a persistent epidemic ravaged this neighbourhood.

JAMES COULDBREY, M.R.C.S.Eng. and L.S.A.Lond.
Scunthorpe, Doncaster.

MENTHOL IN HAY FEVER.

HAY FEVER has so many remedies that I almost hesitate to bring forward a simple remedy for relieving the nasal form of that ailment. The drug I have found most useful is menthol, and it acts best when placed in an ordinary smelling bottle mixed with carbonate of ammonia, and used as smelling salts. Patients say all irritability disappears, and in many cases they get no return of the symptoms.

LENNOX WAINWRIGHT, M.R.C.S.,
Folkestone. L.R.C.P.Lond., M.D.Brux.

REPORTS

ON

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

CANCER HOSPITAL, BROMPTON.

CASE OF ACTINOMYCOSIS WITH TUBERCULOSIS.

(Under the care of Dr. HERBERT SNOW.)

M. A. B., aged 30, was admitted on June 17th, 1890. She was the wife of a hawker, and had been subject to much privation and ill-usage. In the previous November a "lump" had appeared in the right breast, had subsequently softened and discharged. On admission the right breast was hard and fixed to the parietes; at the inner side of the nipple the skin was red, and fluctuation was perceptible. Below the right scapula was a diffuse puffy swelling, tender on pressure, but not red; over this and the vicinity the percussion note, vocal fremitus, and breath sounds were much impaired. At the upper part of the same lung moist *râles* were present. Cough had existed about a month; the temperature was slightly raised, especially at night, and there were profuse night sweats.

On June 19th an incision was made into the fluctuating spot in the breast, and a very small quantity of pus evacuated.

On July 8th the patient was anaesthetised, and the organ thoroughly explored. A cavity was found filled with curdy material, blood clot, and a little pus; bare bone was felt in the floor; the walls were scraped, and the abscess washed out with zinc chloride solution.

On July 22nd another sinus was found in the lower part of the mamma; being opened on a director, it was found to lead to a small cavity at the junction of the sternum with the sixth costal cartilage. The puffy swelling in the back was aspirated with a hypodermic syringe; but nothing could be thus drawn off, though at a later period a small quantity of curdy material was evacuated by incision.

From this date till the patient's death on February 5th, 1891, the main points in the case were as follows: In spite of treatment, the incisions in the breast, etc., obstinately refused to heal, a sinus always remaining, and the scar tissue assuming a keloid appearance. Small additional abscesses kept continually forming; when these burst or were opened a very scanty discharge of shreddy pus took place. There was evident tuberculosis, abundant tubercle bacilli being present in the sputum. Very considerable tenderness on pressure existed over the sternum, and the whole of the right half of the thorax both back and front. The patient made constant complaints of pain in the same region. Ultimately the voice was lost, but no laryngeal lesion except congestion of the cords could be detected. The liver enlarged nearly to the umbilicus. Beyond its scantiness, nothing abnormal was

memorable one, and the Medical Society of Tokyo felt honoured by his presence and that of Mrs. Hart."

It is stated—and we understand correctly—that Mr. Hart is preparing, by official request, memoranda summarising the various suggestions made in his addresses at Osaka and Tokyo for the use of the Ministers in the various departments of Government relating to education and examination of medical practitioners; quarantine and medical supervision of ships; house sanitation and water supply. Japan has suffered from cholera severely; altogether, during the last thirteen years, she has lost 313,000 lives from imported cholera epidemics. Mr. Hart believes that by an inexpensive organisation this great loss may, under the peculiar conditions of Japanese life, be almost wholly averted, and is preparing proposals which may carry out the broad outlines of the suggestions made in his speeches. He condemned also the too exclusive devotion to German medicine, and the neglect of clinical study; the deficiency of hospital beds; the inadequate tests and teaching in some of the minor provincial schools which contrast unfavourably with that at Tokyo. He has proposed a costless remedy for some of these defects, and a new organisation founded upon British experience, of which the details are to be submitted to the Ministry of Education at an early date.

All of the addresses are published with much complimentary comment in the native Japanese newspapers and the leading medical journals, two of which also published portraits of the lecturer. The information given and the suggestions made in the address at Tokyo have been reproduced from the *BRITISH MEDICAL JOURNAL* in the *Medical Record* and the *Medical Journal* of New York; and the *Journal of the American Medical Association* points out in a leader the interest attaching to these revelations of the progress of medical science in the Far East, and the lines of research which may be expected to be followed there.

INDIA AND THE COLONIES.

MALTA.

MEDICAL INSPECTION OF STEAMERS.—Dr. Reginald H. Lucy (Plymouth) writes: In reference to the granting of *pratique* at Malta, about which Professor Pisani replies in the *BRITISH MEDICAL JOURNAL* of July 4th, I quite concur with your remarks on the above from personal experience, which has shown me that the whole proceeding is hedged about with as much petty official obstruction and red-tapeism as it is possible for a boarding officer to apply. The latter official is a Maltese. He endeavours to let you know that he has power to keep all the passengers waiting till he chooses to leisurely scan and criticise your bills of health, makes trivial objections that the initials of a certain passenger on the list are not specified (and withholds *pratique* till the said initials are discovered and inserted), or if a death on the voyage home has occurred he asks sharply what the person died of. When told he eyes you suspiciously, evidently thinking you are giving a fanciful name to cholera or "pestilence" to avoid quarantine. In a case of the kind I replied "malaria." He shook his head (although, as the *pratique* depositions are printed in Italian and English, he should have known), and it took me fully a quarter of an hour to convince him that malaria was not usually regarded in the same category as cholera, etc. Finally, he graciously allowed us *pratique* after a full hour's delay. As to the port medical officer and the medical inspection, I never saw anything of either or we might have fared better. It is the experience of ship surgeons calling at Malta that *pratique* is withheld for an unconscionably long time as compared with that obtaining at other ports. We good-natured Englishmen allow the Maltese to override us in the officialism of the island in a way which is simply incredible.

CEYLON.

CEYLON HOSPITALS.—A correspondence in the *Ceylon Examiner* of May would seem to indicate considerable friction in the administration of Ceylon hospitals. On the face of it, we think that regular surgeons being appointed to a hospital they should do the surgical duties, and that physicians are not justified in calling upon outsiders to do the surgeons' work. Any other system of hospital administration must lead to disorganisation of the staff.

GRANTS FOR SCIENTIFIC RESEARCH.

THE Scientific Grants Committee of the British Medical Association desire to remind members of the profession engaged in researches for the advancement of medicine and the allied sciences, that they are empowered to receive applications for grants in aid of such research. Applications for sums to be granted at the next annual meeting should be made without delay to the General Secretary, at the office of the Association, 429, Strand, W.C. Applications must include details of the precise character and objects of the research which is proposed.

Reports of work done by the assistance of Association grants belong to the Association.

Instruments purchased by means of grants must be returned to the General Secretary on the conclusion of the research in furtherance of which the grant was made.

MR. JOSEPH LOANE, one of the public vaccinators of the Whitechapel Union, has been appointed by the Local Government Board, to succeed the late Mr. W. E. G. Pearce as the official teacher and examiner of vaccination at the Tottenham Court Road Chapel, London.

THE LATE DR. WEBB.—The many friends of the late Dr. Webb will be glad to learn that a tablet has been placed in the nave of Wirksworth Church to his memory by his friend Mrs. Wright, of Albert House, Wirksworth. The tablet is of white marble and bears the following inscription: "In memory of William Webb, M.D., F.R.C.S., J.P., who died August 27th, 1890, aged 59 years."

THE Committee of the Alexandra Hospital for Children with Hip Disease have appointed Miss Frances May Dickinson, M.B. Lord., as anaesthetist. We believe that this is the first occasion on which a lady has been appointed to such a post at any hospital in London, with the exception of the New Hospital for Women.

NEW MEDICAL COLLEGE AT NEW ORLEANS.—On June 13th the medical department of Tulane University (New Orleans) received a donation of 100,000 dollars from Mrs. Richardson, wife of Dr. T. G. Richardson, Dean of the College. The entire sum is intended to be used in building a new medical college in New Orleans, on a site which was recently purchased by the Educational Board for 35,000 dollars.

HYGIENIC EXHIBITION AT VIENNA.—An international exhibition of food supply and domestic hygiene will be held at Vienna from September 1st to December 1st, 1891. The organising committee includes the names of Professors Ludwig, Vogel, Max Gruber, F. von Gruber, Kratschmer, and Rösler, besides Drs. Hamelkoos, of Amsterdam, Reichardt, of Jena, Monin, of Paris, and Bein, of Berlin.

PRESENTATIONS.—Dr. F. Clarke, of Boyle, co. Roscommon, has been presented with an illuminated address and handsome gold watch by his Masonic brethren.—Dr. H. N. Joynt was presented by the matron and nurses of the City Hospital, Birmingham, with a handsome dressing case and cigarette case on the occasion of his leaving to take up the duties of medical superintendent of the Bradford Fever Hospital.

A NATIONAL RETREAT FOR CONSUMPTIVES.—It is stated that application has been made to President Harrison for the appointment of a commission to visit the abandoned army posts at Southern Colorado and Northern New Mexico, with the view of selecting the best site for a National Retreat for Consumptives. The climate of these regions is believed by some authorities to be the most favourable within the area of the United States for persons suffering from lung disease.

LEPROSY IN CANADA.—Owing to the increase of leprosy in British Columbia, the inhabitants recently memorialised the Canadian Government, asking that some steps should be taken to check the progress of the evil. It has accordingly been resolved to found a leper colony in D'Arcy's Island, which lies off the coast. As soon as the arrangements are complete all the lepers in the colony (most of whom are Chinamen) will be transferred to this island. Dr. F. H. Smith, the superintendent of the well known lazaretto at Tracadie, New Brunswick, has been requested to investigate the alleged increase of leprosy in the towns of the Pacific Slope of the Dominion.

ASSOCIATION INTELLIGENCE.

LIBRARY OF THE BRITISH MEDICAL ASSOCIATION.

NOTICE. Members are requested to take notice that the Library is closed till the 21st instant, for the annual cleaning. July 14th, 1891.

COUNCIL.

NOTICE OF MEETING.

A MEETING of the Council will be held on the platform of the Town Hall, Albert Road, Bournemouth, on Tuesday, the 28th day of July next, at 9.30 o'clock in the forenoon.

July 16th, 1891. FRANCIS FOWKE, *General Secretary*.

NOTICE OF QUARTERLY MEETINGS FOR 1891.

ELECTION OF MEMBERS.

A MEETING of the Council will be held on October 21st, 1891. Candidates for election by the Council of the Association must send in their forms of application to the General Secretary not later than twenty-one days before that meeting, namely, September 30th, 1891.

Any qualified medical practitioner, not disqualified by any by-law of the Association, who shall be recommended as eligible by any three members, may be elected a member by the Council or by any recognised Branch Council.

FRANCIS FOWKE, *General Secretary*.

BRANCH MEETINGS TO BE HELD.

OXFORD AND DISTRICT BRANCH.—The annual meeting will be held at Witney, on Friday, July 31st. Gentlemen are requested to send notice to the Honorary Secretary of papers, etc., on or before July 17th.—W. LEWIS MORGAN, Honorary Secretary, 42, Broad Street, Oxford.

SOUTHERN BRANCH: SOUTH WILTS DISTRICT.—The annual meeting of this District will be held at the Angel Hotel, Salisbury, on Wednesday, July 22nd, at 2 P.M. The business will be: Statement of accounts, election of officers, and papers by Mr. Wilcox and Mr. H. Coates. Luncheon at 1 P.M., at 2s. 6d. a head, not including wine or ale. Members intending to be present are requested to give notice to the Honorary Secretary, H. J. MANNING, Laverstock, Salisbury.

NORTH OF ENGLAND BRANCH.—The annual meeting of this Branch will be held at Newcastle-upon-Tyne on Thursday, July 23rd. Dr. Drummond, the President-elect, will deliver the annual address.—G. E. WILLIAMSON, F.R.C.S., Honorary Secretary, 22, Eldon Square, Newcastle-upon-Tyne.

YORKSHIRE BRANCH.—The annual meeting of this Branch will be held at the Town Hall, Huddersfield, on Wednesday, July 22nd, at 3 P.M., when the usual business will be transacted and communications from members discussed. The members will dine at the George Hotel at 6 P.M., after the meeting.—ARTHUR JACKSON, Secretary.

SOUTH WALES AND MONMOUTHSHIRE BRANCH.

THE twenty-first annual meeting was held at the Swansea Hospital on July 3rd, where refreshments were kindly provided by the local members.

Installation of New President.—The PRESIDENT (Dr. Price, Cardiff) resigned the chair to the PRESIDENT-ELECT (Dr. D. Arthur Davies, Swansea), and a hearty vote of thanks was accorded to the retiring President for his conduct in the chair.

Report of Council.—The minutes of the previous meeting having been read and confirmed, the Report of Council, with statement of account, was read and adopted. The report referred to the cordial reception given at the last annual meeting to the proposal to form a partial medical school at Cardiff, in connection with the South Wales and Monmouthshire University College at Cardiff, and to the liberal donations of £1,000 each promised by Drs. Edwards and Price towards the scheme. It also recommended that, out of the surplus fund, ten guineas should be given to the Epsom College and five guineas to the "Rest" at Porthcawl. The statement of account showed a credit balance of £62 17s. 4d. The Branch now numbered 220 members.

New Members.—The following gentlemen were elected mem-

bers of the Association and Branch: John Evans; C. S. Anderson, M.B., Swansea; A. L. Perkins, Sketty (already a member of the Association); W. E. Thomas, M.B., Ystrad Rhondda; E. H. Jones, M.B., Dowlais; Jabez Thomas, Swansea; T. Mitchell, M.D., Gorseinon.

Election of Officers.—T. J. Webster, Merthyr, was unanimously elected President-Elect; Messrs. W. T. Edwards, M.D., R. F. Nell, Eben Davies and Joseph Davies were elected members of Council; Drs. A. Sheen and D. Arthur Davies were elected Honorary Secretaries; Dr. Sheen and Mr. Evan Jones were elected representatives on General Council.

Resolutions Rescinded.—Two resolutions passed at the previous annual meeting referring to the registration of attendances of members of Council, and the non-eligibility for re-election of retiring members, were rescinded; and Mr. J. T. THOMAS gave notice that he would propose these two resolutions at the next meeting.

President's Address.—The PRESIDENT delivered an interesting address on "Some of our Troubles."

Future Meetings.—The autumn meeting will be held at Pontypool, and the spring meeting next year at Brecon.

Dinner.—After the meeting the members and visitors drove to Langland Bay, where at the hotel an excellent dinner was provided. About thirty-five members and friends were present, and the outing was much enjoyed.

BRITISH MEDICAL ASSOCIATION.

FIFTY-NINTH ANNUAL MEETING.

THE fifty-ninth Annual Meeting of the British Medical Association will be held at Bournemouth on Tuesday, Wednesday, Thursday, and Friday, July 28th, 29th, 30th, and 31st, 1891.

President: WILLOUGHBY FRANCIS WADE, B.A., M.B., F.R.C.P., J.P., Senior Physician, Birmingham General Hospital, 27 Temple Row, Birmingham.

President-elect: JOHN ROBERTS THOMSON, M.D., F.R.C.P., Consulting Physician, Royal Victoria Hospital, Bournemouth, Monkchester, Bournemouth.

President of the Council: WITHERS MOORE, M.D., F.R.C.P., J.P., Consulting Physician, Sussex County Hospital, Burgess Hill, Sussex.

Treasurer: HENRY TRENTHAM BUTLIN, F.R.C.S., Assistant-Surgeon to St. Bartholomew's Hospital.

An Address in Medicine will be delivered by THOS. LAUDER BRUNTON, M.D., F.R.S., Lecturer on Materia Medica and Therapeutics at St. Bartholomew's Hospital, London.

An Address in Surgery will be delivered by JOHN CHIENE, M.D., F.R.C.S.Ed., Professor of Surgery at the University of Edinburgh.

An Address in Public Medicine will be delivered by EDWARD COX SEATON, M.D., Lecturer on Public Health at St. Thomas's Hospital, London.

The scientific business of the meeting will be conducted in nine Sections, as follows, namely:

A. MEDICINE.

Sanatorium—Room No. 1, Ground Floor.

President: P. H. PYE-SMITH, M.D., F.R.S. *Vice-Presidents:* WILLIAM GEORGE VAWDREY LUSH, M.D.; THOMAS BARLOW, M.D. *Honorary Secretaries:* WM. FRAZER, M.D., "Elmhurst," Madeira Road, Bournemouth; H. MONTAGUE MURRAY, M.D., 27, Savile Row, W.

The discussion on Wednesday, July 29th, on the Etiology and Prevention of Phthisis will be opened by the President. Speakers: Professor Gairdner; E. Symes Thompson, M.D.; Sir Walter Foster, M.D., M.P.; J. B. Yeo, M.D.; J. G. S. Coghill, M.D.; T. W. Blake, M.R.C.S.; R. Robertson, M.D.; M. A. Boyd, M.B.; T. A. Vesey, M.B.; J. Moorhead, M.D.; E. Markham Skerritt, M.D.; A. E. Sansom, M.D.; A. Kinsey Morgan, M.R.C.S.; James Cagney, M.D.; H. Handford, M.D.; C. R. Drysdale, M.D.

The discussion on Thursday, July 30th, on Lupus will be opened by Dr. J. F. Payne. Speakers: T. Colcott Fox, M.B.; P. S. Abraham, M.D.; J. Moorhead, M.D.; H. Radcliffe Crocker, M.D.; F. Augustus Cox, M.B.; G. Barling, M.B.

The discussion on Friday, July 31st, on the Effects of Al-

cohol will be opened by Dr. Wilks, F.R.S. **Speakers:** Professor Gairdner; D. Ferrier, M.D., F.R.S.; E. Symes Thompson, M.D.; Sir Walter Foster, M.D., M.P.; E. Long Fox, M.D.; J. C. Bucknill, M.D., F.R.S.; I. Burney Yeo, M.D.; Isambard Owen, M.D.; E. M. Skerritt, M.D.; J. Moorhead, M.D.; J. Watts Parkinson, M.R.C.S.; A. E. Sansom, M.D.; Norman Kerr, M.D.; J. J. Ridge, M.D.

The following papers are announced:

- BAHADHURJI, K. N., M.D. (Bombay). Dysentery.
 BARRS, A. G., M.D. Clinical Observations upon the Cardiac Bruits of Chlorosis.
 BLAKE, T. W., M.R.C.S. Cancer and Phthisis occurring in Different Members of the Same Family.
 BOKENHAM, T. J., M.R.C.S. The Influence of the Administration of Helene on the Course of Tuberculosis.
 CAGNEY, James, M.D. Raynaud's Disease and Exophthalmic Goitre.
 CARPENTER, Alfred, M.D. (1) Alcoholic and Non-alcoholic Treatment of some Forms of Hemiplegia; (2) The Treatment of Diphtheria with or without Alcohol.
 COGHILL, J. G. S., M.D. Sphygmographic Observations during Tuberculin Inoculation.
 HAIG, A., M.D. A Case of Raynaud's Disease with Hæmoglobinuria.
 HALL, F. de Havilland, M.D. Erysipelas of the Pharynx.
 HOLDER, W., M.R.C.S. Epidemic Influenza, its Treatment, and its Allied Plagues.
 KERR, Norman, M.D. Some Points in the Treatment of Influenza.
 LANE, Hugh, M.R.C.S. Differentiation in Rheumatic Diseases.
 LYS, H. G., M.D. Enteritis.
 MACKENZIE, Hector, M.D. Alcoholism and Tuberculosis.
 ROBERTSON, R., M.D. On the Heart Sounds in Pulmonary Phthisis.
 STEWART, James, M.D. of Montreal. The Association of Functional Hemianæsthesia and Paresis with Organic Facial Paralysis.
 THOROWGOOD, J. C., M.D. A few Remarks on the Use of Drugs in the Treatment of Early Phthisis.
 TREVELYAN, E. F., M.D. Cerebro-spinal Meningitis with Cases illustrating its Relations, particularly to Acute Pneumonia and Infective Endocarditis.
 VESSEY, T. A., M.B. Hydrophobia.
 YEO, I. Burney, M.D. Consumption; the Conditions of its Cure.

B. SURGERY.

Sanatorium—Room No. 6, First Floor.

President: JOHN WARD COUSINS, F.R.C.S. **Vice-Presidents:** J. D. G. DOUGLAS, M.D.; WM. WATSON CHEYNE, F.R.C.S. **Honorary Secretaries:** H. GUNTON TURNER, M.R.C.S., "Holmwood," Bournemouth; A. A. BOWLBY, F.R.C.S., 43, Queen Anne Street, W.

Arrangements have been made for the following important subjects to come under discussion: 1. The Value of Professor Koch's Method in the Treatment of External Tuberculosis, to be introduced by William Watson Cheyne, F.R.C.S.; Mr. C. B. Keetley, Mr. G. Barling, and Mr. Jordan Lloyd will take part in this discussion. 2. Abdominal Surgery: (i) The Operative Treatment of Peritonitis; (ii) The Treatment of Strangulated Hernia by Median Abdominal Section, to be introduced by Lawson Tait, F.R.C.S., and Mr. Jordan Lloyd will take part in the discussion. 3. The Present Position of Intranasal Surgery, to be introduced by W. J. Walsingham, F.R.C.S.

The following papers are announced:

- ALLINGHAM, Herbert W., F.R.C.S. Fifty Cases of Left Inguinal Colotomy with Remarks on their Points of Special Interest.
 BISHOP, Stannore, F.R.C.S. Eng. The Radical Cure of Hernia.
 CAMPBELL, Colin Geo., M.R.C.S. A Demonstration on the Comparative Merits of Absorbent Dressings.
 CLARKE, W. Bruce, M.B. Clinical Conditions Simulating Disease of the Kidney.
 COOPER, Alfred, F.R.C.S. Cancer of the Rectum and its Surgical Treatment.
 FENWICK, E. Hurry, F.R.C.S. Notes from an Experience of 100 Cases of Urinary Tuberculosis.
 GOLDING-BIRD, C. H., F.R.C.S. The Limits to the Curability of Scoliosis—A Clinical Inquiry.
 EDWARDS, F. Swinford, F.R.C.S. Pruritus Ani and its Cure by Operation.
 HEUSTON, F. T., M.D. (1) Traumatic Epilepsy, Aphasia, and Paralysis, of six years' standing cured by Trephining; (2) The Operative Treatment of Vesico-Intestinal Fistula.
 KEETLEY, C. B., F.R.C.S. On the Treatment of Peritonitis and of Hernia by Abdominal Section.
 LOCKWOOD, C. B., F.R.C.S. On the Treatment of Peritonitis and of Hernia by Abdominal Section.
 LUCAS, R. Clement, M.B., B.S. The Relation of Movable Kidney to Hydronephrosis.
 MACDONALD, Greville, M.D. Intranasal Surgery in Relation to Sneezing and Hay Fever.
 MOULLIN, C. Mansell, M.D. On Prostatectomy for the Relief of Patients with Residual Urine.
 NEVITT, John George, M.R.C.S. Notes on Pott's Disease, with New Aids in the Treatment thereof.
 O'CALLAGHAN, R., F.R.C.S. Hot Water Flushing applied to General Surgery.
 O'NEILL, Henry, M.Ch Q.U.I. A Simple and Efficient Method of Treating Transverse Fracture of the Patella.

- REEVES, H. A., F.R.C.S. Ed. On the Treatment of Peritonitis and of Hernia by Abdominal Section.
 RENTON, J. Crawford, M.D. Edin., etc. Notes of a Case of Gastro-enterostomy for Pyloric Tumour, with Gradual Disappearance of the Tumour after Operation.
 STEWART, Donald, M.D. Glas., L.R.C.S. Edin. On Diagnosis of Nasal Suppuration, especially in connection with the Antrum of Highmore.
 SYMONDS, Charles J., M.S., F.R.C.S., and SPICER, Scanes, M.D. On the Present Position of Nasal Surgery.
 WOAKES, E., M.D. On the Pathology, Diagnosis and Surgical Treatment of Necrotising Echinoditis.

Mr. Noble Smith will give an exhibition of simplified orthopaedic apparatus and splints, and will demonstrate various methods of treatment of deformities by means of models.

C. OBSTETRIC MEDICINE AND GYNÆCOLOGY.

Sanatorium—Room No. 2, Ground Floor.

President: W. J. SMYLY, M.D. **Vice-Presidents:** ALLAN MCLEAN, M.D.; A. H. G. DORAN, F.R.C.S. **Honorary Secretaries:** H. A. LAWTON, M.R.C.S., 74, High Street, Poole, Dorset; MONTAGU HANDFIELD-JONES, M.D. 35, Cavendish Square, W.

The discussion on Puerperal Eclampsia will be opened by Dr. Galabin, and discussed by Dr. Braxton Hicks, Dr. Aust Lawrence, Professor Auvard (Paris), Dr. More Madden, Dr. J. W. Sinclair, Dr. A. W. Edis, Dr. J. G. Swayne, Mr. H. A. Lawton, and others.

The discussion on Uterine Polypi will be opened by Dr. Murphy, and discussed by Dr. Robert Bell, Dr. More Madden, Dr. Godson, Dr. Murdoch Cameron, Professor Auvard, Dr. J. W. Sinclair, Dr. A. W. Edis, Dr. Wm. Walker, and others.

The following papers are announced:

- AUVARD, Professor (Paris). The Medical Treatment of Cervical Metritis.
 BELL, Robert, M.D. The Treatment of Chronic Disease of the Uterine Adnexa.
 CAMERON, Murdoch, M.D. will show an Improved Crutch for Operations.
 DORAN, Alban, F.R.C.S. Case of Tubal Abortion with Double Hæmato-salpinx.
 EDIS, A. W., M.D. Cases illustrating the Cure of Sterility.
 GODSON, Clement, M.D. Two additional cases of Porro's Operation.
 LAWRENCE, Aust, M.D. Early Incision and Drainage in cases of so-called Pelvic Abscess.
 MADDEN, More, M.D. On the treatment of Puerperal Convulsions.
 NAPIER, Leith, M.D. The Diagnosis of Spurious and Doubtful Pregnancy.
 O'DONOVAN, J., F.R.C.S.I. Eclampsia occurring in a Primipara, aged 15½ years.
 PARSONS, J. Inglis, M.D. A case of Epithelioma of the Perineum treated by Electricity.
 PEARSE, T. Frederick, M.D., F.R.C.S. Our Means of Assisting Labour Apart from the Use of Instruments.
 PRINGLE, Robert, M.D. Surgeon-Major, (H.M. Bengal Army). Native Obstetric Operations in India.
 PURSLOW, C. E., M.D. On a Case of Pelvic Abscess (Suppurating Pelvic Peritonitis) Treated by Combined Abdominal and Vaginal Incision and Through Drainage.
 RENTOUL, R. Reid, M.D. Midwives should be Ended not Mended, and the Public should be supplied with thoroughly Trained Obstetric Nurses.
 SINCLAIR, W. J., M.D. Note on Uterine Dilators in Gynæcological Practice.
 TRAVERS, William, M.D. A case of a Rapidly Recurring Uterine Polypus.
 WALKER, Wm., M.D. A Case of Multiple Fibroid Polypus of the Cervix Uteri.

D. PUBLIC MEDICINE.

Cairns Memorial Hall, St. Peter's Road.

President: J. BURN RUSSELL, M.D. **Vice-Presidents:** H. F. PARSONS, M.D.; JOHN COMYNS LEACH, M.D. **Honorary Secretaries:** C. H. W. PARKINSON, M.R.C.S., Wimborne Minster; P. W. G. NUNN, L.R.C.P., "Maplestead," Christchurch Road, Bournemouth.

After the Presidential Address on Wednesday, a discussion on Diphtheria will be opened by Drs. Spottiswoode Cameron, Alfred Carpenter, and William Thursfield.

On Thursday, a discussion on the Communicability of Tuberculous Disease from Animals to Man, will be opened by Dr. G. Sims Woodhead, and Professor McFadyean.

On Friday, a discussion on the Disposal of the Dead will be introduced by Sir Spencer Wells and Mr. Ernest Hart.

The following have promised to take part in the discussions: Dr. Isambard Owen, Professor Wynter Blyth, Dr. Louis Parkes, Dr. Sims Woodhead, Dr. Chas. R. Drysdale, Mr. G. Eastes, Dr. Thresh, Dr. Underhill, Mr. H. May, Dr. Edward F. Willoughby, Dr. Mumby, Dr. H. Manley, and others.

The following papers are announced:

- BROWNE, H. W. Langley, F.R.C.S. Ed. Factory and Workshop Sanitary Inspection.
 CURRAN, John J., L.R.C.S.I., L.R.C.P. Typhoid Fever in the Rural Districts of Ireland.

DRYSDALE, Charles, R., M.D. The Vital Statistics of Total Abstainers as shown by English Insurance Societies' Reports.
 EADE, Sir Peter, M.D. Influenza in 1891.
 LITTLEJOHN, Harvey. The Notification of Diseases Act. Should Measles or other Diseases be added to the number of Compulsory Notifiable Diseases?
 MANLEY, H., M.D. The Powers conferred on Sanitary Authorities with regard to Slaughterhouses, Bakehouses, and Milkshops.
 MAY, H., L.R.C.P., and UNDERHILL, C. E., M.D. Vaccination. What Constitutes Efficient Vaccination?
 MUMBY, B. H., M.D. The Duty of the Medical Officer of Health with reference to the Examination of Notified Cases of Infectious Disease and the Sanitary Inspection and Disinfection of Premises.
 PARKES, Louis, M.D. The Discharge of Town Sewage into the Sea near Watering Places and Seaside Health Resorts.
 PARSONS, Franklin, M.D., V.P. The Influenza Epidemic and its Distribution in the British Isles.
 PRINGLE, Robert, M.D., Surgeon-Major (H.M. Bengal Army). (1) The Opium Question from a Public Health Point of View; (2) Leprosy and Vaccination.
 THRESH, J. C., M.D. (Chelmsford), and WILLOUGHBY, E. F., M.D. The Water Supply of Rural Communities where (a) Streams, (b) Ponds, or (c) Shallow Wells are relied on.

E. PSYCHOLOGY.

St. Stephen's Schools.

President: P. MAURY DEAS, M.B. *Vice-Presidents:* HENRY JOHN MANNING, M.R.C.S.; D. NICOLSON, M.D. *Honorary Secretaries:* P. W. MACDONALD, M.D., Dorset County Asylum, Dorchester; WILLIAM HADGOOD, M.D., Belmont, Sutton, Surrey.

The President will give a short introductory Address on the Lunacy Act, 1890, to be followed by a discussion.

Dr. T. Clifford Allbutt, F.R.S., will open a discussion On the Proposed Hospitals for the Treatment of the Insane.

In conjunction with Dr. Allbutt's paper, Dr. F. H. Walsley (Leavesden Asylum) will read a paper on the Desirableness of Throwing Open our Asylums for the Post-Graduate Study of Insanity.

Dr. G. H. Savage, F.R.C.P., will initiate a discussion on the Influence of Surroundings on the Production of Insanity. A contribution on the Truth of the Idea of Heredity by Dr. Wm. Wallace (Glasgow) will form part of this discussion.

Dr. T. Claye Shaw, F.R.C.P., will introduce for discussion the Surgical Treatment of General Paralysis.

The following papers are announced:

BAKER, J., M.B. (H.M. Prison, Portsmouth). Weak-Minded Criminals; their Psychological and Anthropological Characteristics.
 BENEDIKT, Professor (Vienna). Spinal Adynamia.
 EWAN, J. A., M.B. (Dorset County Asylum). The Value of Sulphonal as a Mental and Motor Sedative.
 HYSLOP, Theo. B., M.B. (Bethlem). Psychopathic Epidemics.
 NEEDHAM, F., M.D. A Visit to some Foreign Asylums.
 NICOLSON, D., M.D. The Criminal Acts of Criminal Lunatics.
 SMYTH, S. T., M.D. (Bournemouth). Puerperal Insanity.
 SNOW, H., M.D. (London). Cancer in its Relations to Insanity.
 WARNER, Francis, M.D. (London). Association of Various Conditions of Development in Relation to Brain Power and Nutrition.

The report of the Committee of Investigation on Hypnotism will be considered, and should it be decided to hold a discussion, special arrangements will be made.

In addition to those gentlemen who are to open discussions and read papers, the following will take part in the deliberations of the Section: Professor Gairdner, Sir J. Crichton Browne, Dr. Hughlings Jackson, Dr. Batty Tuke, Professor Ferrier, Dr. Macewen (Glasgow), Dr. Bateman (Norwich), Dr. Fletcher Beach, Dr. Mercier, Dr. Wigglesworth, Dr. Outtersen Wood, Dr. Gayton, Dr. Strahan, Professor Voisin, Dr. Macpherson (Stirling), Dr. Neech (Manchester), Dr. Kingsbury (Blackpool), Dr. Draper (Huddersfield).

Dr. Voisin (Paris) promises a contribution to the proceedings of the Section.

F. PATHOLOGY.

Sanatorium—Room No. 3, Ground Floor.

President: W. HOWSHIP DICKINSON, M.D. *Vice-Presidents:* J. K. FOWLER, M.D.; W. RUSSELL, M.D. *Honorary Secretaries:* F. G. SPENCER, M.B., 35, Brook Street, Grosvenor Square, W.; E. HYL A GREVES, M.D., Rodney House, Poole Road, Bournemouth.

Dr. J. K. Fowler will open a discussion on Arrested Pulmonary Tuberculosis, and Dr. Sidney Martin will take part.

Mr. F. G. Eve will open a discussion on Senile Changes in the Bones.

Dr. Phineas Abraham will give a demonstration on Microscopic Sections of Skin Diseases.

Dr. Carey Coombs will give a demonstration with Hæmoglobinometer and Two Cytometers.

The following papers are announced:

ABRAHAM, P., M.D. On a Peculiar Case of Melanotic Sarcoma of the Skin, illustrated by Microscopic Sections.
 DICKINSON, W. H., M.D. On the Present Uses and Future Prospects of Pathology.
 EDWARDS, Alfred, M.D. A short account of Herxheimer's Spirals in the Epidermis and Mucous Membranes, illustrated by microscopical sections of various skin affections.
 HANDFORD, H., M.D. Either (1) On Varicose Veins of the Colon (with specimens); or (2) The Pathology of the Stomach in Enteric Fever.
 HAWKINS, Francis, M.D. A series of specimens of Heart Diseases, with verbal demonstration of each specimen.
 JONES, E. Lloyd, M.B. Paper and specimens, The Specific Gravity of the Blood in Disease.
 MAGUIRE, Robt., M.D., will show specimens and make a communication on Lymphadenoma of the Solar Plexus with Brouzed Skin.
 SAVILLE, Thos., M.D. On the Real Anatomical Nature of so-called Arterio-Capillary Fibrosis, its Symptoms during Life, and its Relation to Granular Kidney (during Bright's disease).
 SNOW, Herbert, M.D. Paper and specimens, The Insidious Bone Lesions of Mammary Carcinoma (second paper).
 WILD, R. B., M.D. (1) The Pathology of the Coronary Arteries chiefly in relation to Disease of the Heart and Lungs; (2) Specimens of "Brown Induration."
 WILLIAMS, Roger, F.R.C.S. Paper and specimens, Gynæcomastia.
 The following gentlemen have also promised papers:—Dr. Sims Woodhead, Dr. W. Russell, and Dr. McMunn.

G. OPHTHALMOLOGY.

Sanatorium—Room No. 4, Ground Floor.

President: N. C. MACNAMARA, F.R.C.S. *Vice-Presidents:* ROWLAND W. CARTER, M.D.; MALCOLM M. MCHARDY, F.R.C.S. Edin. *Honorary Secretaries:* J. B. LAWFOORD, M.D., 55, Queen Anne Street, W.; BERNARD SCOTT, M.R.C.S., "Hartington," Poole Road, Bournemouth.

The discussion on The Treatment of Infantile Cataract, which has been fixed for Thursday, July 30th, will be opened by the President, and Messrs. Argyll Robertson, McHardy and Doyne have signified their intention of taking part in it.

The following papers are announced:

BEAUMONT, W. M., M.R.C.S. Vision Tests as Applied to Railway Servants.
 BRAILEY, W. A., M.D. Some Cases of Retinal Detachment.
 BRISTOWE, H. C., M.D. The Ophthalmoscopic Appearances in Hypermetropia and their Significance.
 BRONNER, Adolf, M.D. The Use of Fluorescein in the Diagnosis and Treatment of Diseases of the Cornea.
 CHARNLEY, W., M.D. Notes on a Rare Tumour of the Iris removed by Operation.
 COLLINS, W. J., M.S., M.D., and WILDE, L., M.D. The Pathology of the Ophthalmoplegiae.
 EDRIIDGE-GREEN, F. W., M.D. A Review of the Tests for Colour Blindness.
 FERDINANDS, Geo., M.B. Eyesight in School Children.
 GRIFFITH, A. Hill, M.D. Cases of Sarcoma of Choroid causing Death by Metastasis.
 JULER, Henry, F.R.C.S. The Operative Treatment of Strabismus.
 MCHARDY, M. M., F.R.C.S. Ed. The Control of Railway Servants' Eyesight.
 MACKAY, George, M.D. Vision Tests of the Scottish Railways.
 PERCIVAL, A. S., M.B. The Action and Uses of Prismatic Combinations.
 ROBERTSON, Dr. Argyll, M.D. (1) Modification of the Ordinary Operation for Advancement of a Rectus Tendon; (2) Case of Wound of Sclera with penetration of Eyelashes.
 WRAY, C., F.R.C.S. Some Points in the Treatment of Lamellar Cataract.

H. DISEASES OF CHILDREN.

Sanatorium—Room No. 7, First Floor.

President: J. F. GOODHART, M.D. *Vice-Presidents:* T. W. TREND, M.D.; T. B. SCOTT, M.R.C.S. *Honorary Secretaries:* SIDNEY PHILLIPS, M.D., 62, Upper Berkeley Street, W.; DENNIS C. EMBLETON, L.R.C.P., "St. Wilfred's," Michael's Road, Bournemouth.

The President, Dr. Goodhart, will give an Address on The Child is Father to the Man.

The two following subjects have been set down for special discussion: 1. The Feeding of Infants up to the Completion of the first Dentition. To be opened by Dr. Henry Ashby, of Manchester; Dr. Cheadle, Professor Baginsky, of Berlin, Dr. Emil Pfeiffer, of Wiesbaden, Dr. Lewis Marshall, of Nottingham, and Dr. Angel Money will take part. 2. The Treatment of Pleurisy and Empyema in Children, and their value. To be opened by Mr. R. J. Godlee; Mr. W. H. A. Jacobson, Mr. Watson Cheyne, Professor Baginsky, of Berlin, Dr. Emil Pfeiffer, of Wiesbaden, Dr. Angel Money, Dr. G. A. Carpenter, and Dr. Lewis Marshall, of Nottingham, will take part.

The following paper is announced:

EWENS, John, L.E.C.P. Osteotomy Generally: with Special Reference to Tarsotomy in Advanced and Intractable Cases of Talipes Equino-Varus.

I. THERAPEUTICS.

Sanatorium—Room No. 8, First Floor.

President: WM. VICARY SNOW, M.D. **Vice-Presidents:** SIDNEY COUPLAND, M.D.; A. G. BARRS, M.D. **Honorary Secretaries:** CHRISTOPHER CHILDS, M.D., 2, Royal Terrace, Weymouth; JOHN ROSE BRADFORD, M.D., 52, Upper Berkeley Street, W.

The President of the Section (Dr. Snow) will deliver an Address on Koch's Treatment, and a discussion will then take place, in which the following amongst others will take part: Dr. Coghill, Mr. Watson Cheyne, Mr. Odell, Dr. E. Markham Skerrett, Dr. Barrs, Dr. Fowler, etc.

On July 30th, Dr. Lauder Brunton will give an account of his researches on the Action of Chloroform. Dr. Gaskell and Dr. L. E. Shore (Cambridge) will read a paper on the Action of Chloroform. A discussion on Anæsthetics from the clinical standpoint will then take place in which the following amongst others will take part: Dr. Dudley Buxton, Dr. Charles Sheppard, Mr. Davis, Mr. Hartley, Mr. Pridgin Teale, etc.

The following papers are announced:

BARRS, —, M.D. On the Use of Digitalis in Aortic Disease.

BUXTON, Dudley, M.D. On Anæsthetics.

COUPLAND, S., M.D. On the Treatment of Pneumonia.

DENTON-CARDEW, H. W., M.R.C.S. On the Treatment of Exophthalmic Goitre.

HART, Ernest. A Note on Popular Chinese Medicines, with specimens of their various ingredients.

MORDHORST, Dr. (Wiesbaden). On the Treatment of Gout and Chronic Rheumatism.

SCHOTT, Theodor, M.D. (Bad Nauheim). On the Therapeutic Action of the Nauheim Mineral Waters.

WOODS, Hugh, M.D. On the Uses of Liquor Calcis Iodinatæ.

Honorary Local Secretary: JAMES DAVISON, M.D., "Walderslow," Bournemouth. **Honorary Treasurer:** WILLIAM FRAZER, M.D., Elmhurst, Bournemouth.

PROGRAMME OF PROCEEDINGS.

TUESDAY, JULY 28TH, 1891.

9.30 A.M.—Meeting of 1890-91 Council, Platform of Town Hall, Albert Road.

11.30 A.M.—First General Meeting. Report of Council. Reports of Committees: and other business, Town Hall, Albert Road.

4 P.M.—Sermon by the Right Rev. the Lord Bishop of Winchester, St. Peter's Church.

4.45 P.M.—Garden Party given by the Rev. Dr. and Mrs. West at Ascham House, Gervis Road.

8.30 P.M.—Adjourned General Meeting from 11.30 A.M. President's Address, Town Hall, Albert Road.

WEDNESDAY, JULY 29TH, 1891.

9.30 A.M.—Meeting of 1891-92 Council, Platform of Town Hall, Albert Road.

10 A.M. to 2 P.M.—Sectional Meetings, Sanatorium, St. Stephen's Road. Public Health, Cairns Memorial Hall. Psychology, St. Stephen's Schools.

3 P.M.—Second General Meeting. Address in Medicine by Dr. T. LAUDER BRUNTON, F.R.S. Presentation of Stewart Prize. Town Hall, Albert Road.

4 P.M. to 6 P.M.—Garden Party given by Mr. Russell Cotes, F.R.G.S., and Mrs. Cotes at the Royal Bath Hotel.

8.30 P.M.—Reception by the President and Joint Committees at the Royal Bath Hotel.

THURSDAY, JULY 30TH, 1891.

9.30 A.M.—Meeting of the Council, Platform of Town Hall, Albert Road.

10 A.M. to 2 P.M.—Sectional Meetings, Sanatorium, St. Stephen's Road. Public Health, Cairns Memorial Hall. Psychology, St. Stephen's Schools.

12 noon.—Excursion to Swanage.

3 P.M.—Third General Meeting. Address in Surgery by Professor J. CHIEFNI, Town Hall, Albert Road.

4.30 P.M. to 6.30 P.M.—Garden Party given by Dr. and Mrs. Roberts Thomson at Monkchester, Manor Road.

7 P.M.—Public Dinner of the Association.

FRIDAY, JULY 31ST, 1891.

10.30 A.M. to 1.30 P.M.—Sectional Meetings, Sanatorium, St. Stephen's Road. Public Health, Cairns Memorial Hall. Psychology, St. Stephen's Schools.

3 P.M.—Concluding General Meeting. Address in Public Medicine by Dr. EDWARD C. SEATON, Town Hall, Albert Road.

8.30 P.M.—Reception by the Mayor and Corporation of Bournemouth at the Hotel Mont Dore.

SATURDAY, AUGUST 1ST, 1891.

Excursions.

RECEPTION ROOM.

It is particularly requested that members on their arrival will at once proceed to the reception room, which is at the Shaftesbury Hall, St. Peter's Road, at which each member

should enter his name and address, receive his member's card and daily journal, inquire for telegrams and letters, and consult the list of lodgings and hotels, etc. The Reception Room will be open on Monday from 4 to 9 o'clock; and every other day of the meeting from 9 to 6 o'clock.

RAILWAY ARRANGEMENTS.

The London and South-Western Railway Company, through Mr. C. Scotter, their general manager, have shown every courtesy and assistance in making arrangements for the convenience of members of the Association attending the annual meeting at Bournemouth. They have offered to convey members and their families accompanying them, any class, to Bournemouth and back from any of their stations at a single fare for the double journey, the tickets being available for two calendar months, on presentation at the booking office of members' visiting cards, and explaining that they are desirous of attending the annual meeting of the British Medical Association at Bournemouth as members; and the Company will also issue return tickets at single fare at Bournemouth on July 29th, 30th, and 31st, and August 1st, to any station to enable members and their families to make excursions to places of interest in the neighbourhood.

[For particulars of arrangements on the Midland line, see advertisement page 7.]

Through the kindness of Mr. Dykes, General Manager of the Somerset and Dorset Railway, return tickets to Bournemouth at single fares will also be issued to members on presentation of an address card at stations on this line during the week of the meeting.

Members of the Glasgow and West of Scotland Branch who intend being at the Bournemouth meeting are informed that the Glasgow and South Western and Midland Railway Companies are prepared, should a sufficient number offer, to provide special through accommodation *via* Bath and Templecombe or *via* London. Gentlemen who intend being present are requested to communicate at once with the Secretary of the Branch, stating the night on which they intend to travel and the route they prefer, when special arrangements will be made.

EXCURSIONS ON SATURDAY, AUGUST 1ST.

THE London and South-Western Railway Company will issue return tickets at single fares to any station on their system.

Weymouth and Portland (limited to 150; tickets, 10s., inclusive).—Members will proceed by steamer at 10 A.M. from Bournemouth pier, and arrive at Weymouth about 12.30 P.M. Luncheon will be provided at the Royal Victoria Jubilee Hall, 1 P.M., by members of the medical profession of Weymouth. The 2.12 P.M. train will be taken to Portland, where the quarries, the Convict Prison, and Verne Fortress will be visited, and tea will be provided by the members of the medical profession of Portland. Arrangements are made to enable members to reach London and Bournemouth the same evening, a special train leaving Weymouth at 6.5 P.M.

Southampton and Netley (limited to 200; railway fare only).—A special train will leave Bournemouth West Station at 10 A.M., calling at the East Station at 10.5 A.M., and arriving at Southampton at 11 A.M. A drive will be made through the town past the old walls to the Ordnance Office, which will, by the courtesy of the Director, Sir Charles Wilson, K.C.B., be thrown open. Luncheon will be provided by the members of the medical profession of Southampton. After luncheon brakes will be ready to drive members to Netley Abbey, after visiting which the drive will be continued to Netley Hospital, where, after inspecting the hospital, members will be entertained by Surgeon-General Madden, P.M.O., and staff. A return train will leave Netley about 6.30 to enable members to proceed to London or Bournemouth.

Salisbury and Stonehenge (limited to 100; railway fare, 3s. 3d.; brakes, 3s. 6d.).—To leave Bournemouth West at 9.20 A.M., arriving at Salisbury at 10.46. Members will be met at the station. The Cathedral will be shown, and all points of interest explained by the Hon. and Rev. Canon Gordon and Mr. Doran Webb. The Bishop's Palace and grounds will be open to members by the courtesy of the Bishop. The organist, Mr. South, will play a selection on the organ about noon. Luncheon will be provided by the members of the medical profession of Salisbury at 12.45 in the Council Chamber. After luncheon carriages will be ready to drive members to

Stonehenge, the Druidical Circle, and then to Amesbury, where tea will be provided by Mr. Barcroft, F.R.C.S. After tea the drive back to Salisbury will be begun, calling to inspect Old Sarum on the road. Members will be able to take trains to London or Bournemouth the same evening, leaving at 7.15 P.M. for Bournemouth and at 8.11 P.M. for London.

New Forest and Lyndhurst (limited to 100; tickets, 10s. 6d., inclusive).—To leave Bournemouth West Station at 10 A.M., calling at the East Station at 10.5 A.M., arriving at Brockenhurst about 10.35 A.M. Brakes will be ready to drive members through the Forest to Boldre Wood, where luncheon will be served, weather permitting, on the grass at 12.45. Splendid views of the Forest will be seen *en route*. Brakes, after luncheon, will convey members to Lyndhurst, where the Verderers' Hall, etc., will be thrown open by the courtesy of the deputy surveyor, Hon. G. Lascelles, and the Church may be inspected. The members will then return to the brakes to proceed to the residence of Mr. Lawson Tait, near Lyndhurst Road Station, who has kindly asked members to accept of his hospitality. Train to London at 7.40 P.M.; train to Bournemouth about 7 P.M. *Alternative Route*, 2s. 6d. extra, if sufficient number of tickets are taken: Drive from Bournemouth by Bistern to Ringwood, where the party will be met by Dr. Dyer, and conducted to Stoney Cross, Rufus's Stone, and Boldre Wood, joining the other party for lunch. On returning members are invited to accept of the hospitality of Dr. Dyer, at Ringwood.

SHORT EXCURSIONS.

On *Tuesday afternoon* there will be an excursion to Christchurch; limited to 50, conveyance, 2s. *Chars-à-banc* will leave the Square at 2 P.M. The party will be conducted through the Priory Church by the vicar, the Rev. T. H. Bush, who has kindly undertaken to describe the architectural features of this ancient pile, and has also asked members to accept of his hospitality. The return drive will be through Southbourne.

On *Wednesday afternoon* there will be an excursion to Wimborne and Canford; limited to 50; conveyance, 2s. 6d. *Chars-à-banc* will leave the Square at 2 P.M., and will drive through Talbot Village and Bear Cross to Canford Magna, the seat of Lord Wimborne, who has kindly thrown open his grounds; the drive will be continued to Wimborne, where time will be allowed to inspect the old Minster Church. Tea will be provided at Wimborne by the members of the medical profession of the town. The return drive will be through Longham and Kinson.

On *Thursday* there will be an excursion to Swanage and Corfe Castle; limited to 100. Special steamer, 2s. carriages and train. The steamer will leave Bournemouth Pier at 11.30 A.M. and arrive at Swanage at 12.15 P.M. The party will then proceed in carriages to Durlston Castle, where luncheon will be provided at 12.30 P.M., by the hospitality of Mr. George Burt. Members will return to Swanage to take the 1.55 P.M., special train to Corfe Castle, where the guide will show the fine old ruins. Members must return to Swanage Pier not later than 5 P.M., to take the special steamer to Bournemouth. There is a return train at 3.55 P.M. from Corfe Castle.

On *Friday afternoon* there will be an excursion to Wimborne and Badbury Rings; limited to 50, conveyance 3s. 6d. *Chars-à-banc* will leave the Square at 2 P.M., and drive by Constitution Hill to Wimborne, where time will be allowed for inspecting the Minster. The drive will then be continued to Badbury Rings—an old British fortification—and after inspecting this, the return will be made through the grounds of Ralph Bankes, Esq., of Kingston Lacy, and to Bournemouth through Longham and Kinson.

There are numerous other *chars-à-banc* excursions daily, starting from the Square. The longer drives which take the whole day are to the New Forest and to Wareham and Corfe Castle. Shorter afternoon drives are made to Branksome Chine, Canford Cliffs, and Parkstone; Southbourne, Christchurch and Heron Court (the seat of Lord Malmesbury); and Wimborne and Canford Manor (the seat of Lord Wimborne).

By sea, there is a regular daily service to Swanage. The following are among the usual day excursions; to Yarmouth, Ryde and Portsmouth, round the Isle of Wight, to Weymouth, Portland, Ventnor, Southampton, or Lulworth.

RAILWAY ARRANGEMENTS.

The following special arrangements have been made by the London and South Western Railway Company:

1. Return tickets at single fares to be issued to medical gentlemen and their families accompanying them to Bournemouth East and West from any Station on the London and South-Western Railway, on presentation of an address card or voucher from the Association.

2. Return tickets at single fares to be issued at Bournemouth East and West to any station on the London and South-Western Railway to medical gentlemen attending the meeting, or to any member of their families accompanying them, on July 29th, 30th, and 31st, and August 1st, on presentation of an address card or voucher from the Association.

3. A special train to leave Bournemouth West for Wareham, Dorchester, and Weymouth, at 10.35 P.M., calling at Poole, and connecting with the up night mail at Broadstone Junction.

4. On Saturday, August 1st, a special train for the conveyance of those attending the meeting to leave Bournemouth West at 10 A.M., calling at the East Station, for Brockenhurst and Southampton.

5. On Saturday, August 1st, a special train to leave Weymouth at 6.5 P.M. for London, calling at Lyndhurst at 7.40 P.M. for the convenience of medical gentlemen and their friends, some of whom will have made excursions to Weymouth and the New Forest on the morning of that day.

6. On Saturday, August 1st, the 4.55 P.M. train from London to call at Lyndhurst Road at 7.5 P.M. to take up passengers for Bournemouth.

7. On Saturday, August 1st, a special train to leave Bournemouth West at 9.22 A.M. for Salisbury, for the conveyance of members making the excursion to that place.

PROGRAMME AND ARRANGEMENTS FOR LADIES.

A ladies' room and cloak room, with attendant, is provided in the Havergal Hall, Beckford Road. Afternoon tea will be provided each day in this room for ladies and members accompanying them, from 3.30 to 4.30 P.M.

Ladies are invited to attend:

TUESDAY.—4 P.M. Service in St. Peter's; Sermon by the Bishop of Winchester.

4.45 to 6.30 P.M. After the Bishop's address.—Garden Party at Ascham House, Gervis Road, given by the Rev. Dr. and Mrs. West.

WEDNESDAY.—4 to 6 P.M. Garden Party at the Royal Bath Hotel, by Mr. Merton Russell Cotes, F.R.G.S., and Mrs. Russell Cotes. The Band of the Grenadier Guards will play in the grounds.

8.30 P.M. Reception at the Royal Bath Hotel, by the President and Joint Committees.

THURSDAY.—11.30 A.M. Excursion to Swanage. (See previous column.)

4.30 to 6.30 P.M. Garden Party at Monkchester, Manor Road, given by Dr. and Mrs. Roberts Thomson.

9 P.M. The speeches after the Annual Dinner at the Royal Bath Hotel. Light refreshments will be provided. Tickets will be limited to fifty, and may be obtained by Members when purchasing their dinner tickets.

FRIDAY.—4 to 6.30 P.M. Garden Party at Kiverstone Grange, Manor Road, given by Mr. and Mrs. Leveson Scarth.

8.30 P.M. Reception by the Mayor and Corporation of Bournemouth, at the Hotel Mont Doré.

SATURDAY.—Excursions. (See page 145.)

Daily short excursions to places of interest in the neighbourhood. (See previous column.)

THE ANNUAL MUSEUM.

Mont Dore Ball Room, St. Stephen's Road.

THE Museum in connection with the fifty-ninth annual meeting of the British Medical Association will be arranged in the following Sections:—

SECTION A.—Foods and Drugs, including Prepared Foods, Pharmaceutical and Chemical Preparations, Antiseptic Dressings, etc. (Honorary Secretary, Mr. MacGillivuddy, Pendennis, Bournemouth.)

SECTION B.—Pathology, comprising Casts, Models, Apparatus, Microscopical and Macroscopical Specimens, etc. (Honorary Secretary, Dr. Bright, RoccaBruna, Bournemouth.)

SECTION C.—Anatomy and Physiology, comprising Specimens and Apparatus as above. (Honorary Secretary, Mr. G. Schofield, Durham House, Bournemouth.)

SECTION D.—Surgical Appliances and Books, comprising New Books, Atlases, Diagrams, Tables; Medical and Surgical Instruments and Appliances, Ambulances, etc. (Honorary Secretary, Dr. Grabham Lys, Inglewood, Bournemouth.)

St. Peter's Schoolroom, St. Peter's Road.

SECTION E.—Sanitary Appliances, comprising Apparatus and Appliances connected with Sanitation, Equipment of Houses, Public Institutions, Hospitals, etc.; Improvements in Drainage, Water Supply, Ventilation, Illumination, and Clothing. (Honorary Secretary, Mr. W. H. L. Marriner, Westbourne Tower, Bournemouth.)

The Secretary of the Museum will be glad to hear from members of the profession who are willing to send objects for exhibition in the Sections of Anatomy and Physiology and Pathology. There is no hospital museum in the neighbourhood. (Address, Mr. George Mahomed, Astolat, Bournemouth.)

The Museum will open on Monday evening and close on Thursday evening.

To Non-Professional Exhibitors.

Inventors and manufacturers wishing to exhibit in the annual Museum are invited to apply for space early to the Honorary Secretary of the Museum, Mr. George Mahomed, Astolat, Bournemouth.

The charge to exhibitors (other than members of the medical profession) will be 2s. per square foot of table space in Sections A, B, C, D, and 6d. per square foot of floor space in Section E, and in Section D for ambulance appliances.

In considering applications for space the Committee will give preference to *bonâ fide* inventions and improvements not previously exhibited.

A Catalogue will be printed, prepaid advertisements will be inserted in the Catalogue.

On Monday, July 27th, at 8 o'clock in the evening, an inspection of the Museum by invitation of President and Museum Committee.

All exhibits should be addressed to the "Secretary of the Museum, British Medical Association, Bournemouth," with the name of the Section for which they are intended. Packages should not be addressed to a firm's representative at the Museum.

Exhibits must be delivered between July 15th and 21st.

Every packet must bear a card showing the name and address of the exhibitor.

The Committee will exercise every care regarding the objects entrusted to them, but all risks and expenses must be borne by the exhibitor.

The arrangement of signs, placards, etc., will in every case be subject to the approval of the Committee.

No exhibits will be received except on the understanding that the above regulations will be complied with.

A. G. S. MAHOMED, M.R.C.S.,
Honorary Secretary Museum Committee,
Astolat, Bournemouth.

Dr. HUGH WOODS hereby gives notice that he will move an addition to By-law 17, subsection (a) in the words following, that is to say:

And for the purposes of this election every member of the Association resident within the area of a Branch, whether attached to the Branch or unattached, shall be considered a member of the Branch, and entitled to vote accordingly.

State Registration of Midwives.—Dr. R. R. RENTOUL gives notice that he will move:—

That this meeting—while anxious to improve the education of obstetric nurses, and believing such improvement can be effected without the intervention of the Legislature—records its emphatic protest against any efforts made to bring about State registration of midwives. It earnestly requests the Council and Parliamentary Bills Committee of the Association to oppose any Bills which may be introduced into Parliament having for their aim the registration of midwives by State authority.

Increase in the Number of Direct Representatives on the General Medical Council.—Dr. RENTOUL also gives notice that he will move:—

The members of the British Medical Association (numbering over 13,000 practitioners) earnestly request the Privy Council to exercise the power vested in them by Section 19 of the Medical Act, 1886, and order that Section 8, subsection 10, paragraph c, of that Act be put into opera-

tion, so that the registered medical practitioners in the three divisions of the United Kingdom be given the power of returning an additional direct representative for each of the three divisions; and that this prayer be granted forthwith, as the next quinquennial election of direct representatives takes place in November, 1891.

This meeting also earnestly requests that—when the Privy Council next year exercises the power, vested in it by Section 7 (1) of the Medical Act, 1886, to nominate five persons to serve on the General Medical Council—the Privy Council will be pleased to nominate three persons, who shall be representatives of medical practitioners in general, and not of the examining bodies and colleges.

That a copy of this resolution be forwarded forthwith by the General Secretary to the Lord President of the Privy Council.

Payment of Branch Representatives on the Council of the Association.—Dr. RENTOUL also gives notice that he will move:

This meeting, anxious to make the representation of each Branch on the Council of the Association as perfect as possible, taking into consideration the long distances which members from Scotland, Ireland, and the provinces have to travel, and the great loss of time and money incurred in so doing; and having regard to the irregular attendance of some members on the Council, resolves to adopt the scale of payments made to members of the General Medical Council, and to order:

a. That each member attending a Council meeting be paid five guineas a day.

b. That each member who resides more than 200 miles from London shall receive five guineas for the day of coming and five guineas for the day of his return.

c. That members not residing in London shall each be paid one guinea a day for hotel expenses.

d. That the above rates of payment be made to each member of the Parliamentary Bills Committee attending, and also that each be paid first-class railway fare—thus following the rule relating to the payment of railway fares to members of the Council of the Association.

Opening of Poor-law Infirmarys for Clinical Instruction of Students.—Dr. RENTOUL also gives notice that he will move:

This meeting, recognising that Poor-law infirmaries contain a large amount of clinical material which should be used to forward the better training of medical students, requests the President of the Local Government Board to take steps to repeal Section 20 of the Metropolitan Poor Act (1867) Amendment Act, 1899, so that the metropolitan Poor-law infirmaries shall be opened for the training of students; also to arrange that all Poor-law infirmaries outside the metropolitan area be made available for the training of students.

That a copy of this resolution be forwarded forthwith by the General Secretary to the President of the Local Government Board.

Foreign Laws relating to the Suppression of Irregular Practitioners and Quacks.—Dr. RENTOUL also gives notice that he will move:

That the Council of the Association be authorised to obtain a copy of the laws of Germany, France, Italy, and Spain, relating to the suppression of irregular practitioners and quacks, and that a translation of such be published in an early issue of the JOURNAL, for the use of members.

Foreign Laws relating to Prescribing and Dispensing of Medicines by Medical Practitioners and Chemists.—Dr. RENTOUL also gives notice that he will move:

That the Council of the Association be authorised to obtain a copy of the laws of Germany, France, Italy, and Spain, relating to the duties of medical practitioners and chemists in so far as such duties relate to the prescribing and dispensing of medicines, and that a translation be published in an early issue of the JOURNAL, for the use of members.

Repeal of the Act relating to Stamp Duties on Patent Medicines.—Dr. RENTOUL also gives notice that he will move:

This meeting, recognising the many evils associated with the use of patent medicines and their deleterious effects on infants, earnestly requests the Council of the Association to petition Government to repeal the Act of George III, 1812, relating to the stamp duties on patent medicines.

Dr. R. R. RENTOUL gives notice he will move that the following memorandum be forwarded forthwith to the Lords Committee on Medical Charities:

Memorandum of the British Medical Association to the Committee of the House of Lords on Medical Charity Administration, etc.

The British Medical Association beg to offer the following recommendations for the consideration of the Lords Committee upon Medical Charities:

I. That an Act be passed through Parliament providing for the formation of a Central Board of Supervision of the Voluntary Medical Charities of England and Wales; such Board to form a Department under the Local Government Board.

II. That the same Act provide for the formation of local voluntary medical charity boards in every city and town, these to be elected yearly and by the committees of the voluntary medical charities, medical practitioners, the clergy, Poor-law guardians, Hospital Sunday Fund, and other charities.

III. That the same Act give the Central Board power to draw up, issue, and enforce general instructions relating to voluntary medical charity administration, deciding as to the persons who shall be eligible for treatment; providing for the recovery from patients, their relatives, or guardians of expenses incurred on behalf of those who have received treatment when such patients are found to be ineligible for relief or when relatives or their guardians are able to pay for them.

IV. That the same Act provide, not only for the recovery of expenses from out, in, home, and accident patients who have received temporary treatment, but that it enact that all medical charity committees and officials of the medical charities who grant treatment to ineligible appli-

cants shall be made to refund to the charity the expenditure connected with the treatment of such patients.

V. That the same Act provide for the opening of the metropolitan and other Poor-law infirmaries and Poor-law dispensaries for the training of medical students.

VI. That it provide for the adoption of a uniform system of annual medical charity reports by each local medical charity board; also of a uniform system of balance sheets, cost of in- and out-patients, and cost of each bed; and that a Blue-book containing full information relating to all voluntary medical charities be yearly presented to both Houses of Parliament.

VII. That it provide for the use of a system of election of medical practitioners, and the payment of the same, to the out and home patient medical staffs of voluntary medical charities; that such be elected by examination and for a limited number of years only; and that no practitioner hold more than one appointment in the voluntary medical charities.

VIII. That it provide for the provision of lock hospitals by each municipal authority for the treatment of primary and secondary syphilis, gonorrhoea, and local venereal diseases, and for the detention of patients therein.

IX. That it provide that those in receipt of Poor-law relief and members of friendly societies and provident dispensaries be ineligible for treatment at the voluntary medical charities.

X. That the Central Board provide for the adoption of a uniform system of inquiry into the pecuniary circumstances of all applicants for relief from the voluntary medical charities. (The Association would recommend the adoption of a modification of the "Manchester system" of enquiry.)

As regards the qualifications for the receipt of medical relief from the voluntary medical charities, the Association recommend the adoption of the following "wage limits" and suggestions:—

(a) *For Out, Home, and Accident Patients.*—That all those making under 7s. per week, from all sources, with an allowance of 1s. per week for each member of the family under 14 years of age, be eligible for relief as out, home, and accident patients—thus adopting the "wage limit" of the Preston Infirmary.

(b) *In-patients: (1) Single Wage-earners.*—When single wage-earners have been in receipt from month immediately preceding the application for in-patient treatment and continue to be during sickness in receipt of an income not exceeding 15s. per week from all sources, such applicants only shall be eligible for in-patient treatment.

(2) *Families.*—When the combined weekly income of a family does not exceed 25s. per week from all sources for one month immediately preceding the application for relief and continues so during sickness, any member of such family shall be eligible for in-patient treatment. Provided that when an illness has existed for more than three weeks and when the relatives refuse to support the patient, the above wage limit may be subject to some modification.

(c) *Temporary Treatment for those making over the Wage Limits.*—Whenever any in, out, home, or accident patients in receipt of weekly incomes over the above-mentioned wage limits have received treatment from a medical charity, such patients shall be made to pay to the charity a sum of money equal to that charged by practitioners to such class of patients, as well as the amount expended upon them by the charity.

In-patients making over the wage limit shall receive continuous treatment only until they can be removed with safety from the charity; while out-patients and accident cases shall receive treatment on the first occasion only.

(d) That the system of pay beds, pay patients, or the farming of beds is derogatory to the true aims of voluntary medical charities, and should be abolished. Moreover, there is little hope of charities being exempted from taxation if they become business undertakings.

(e) That the system of home hospitals—self-supporting and absolutely distinct from charity, and in which pay patients would be treated by their own medical adviser—should be extended into every city and large town, so that pay wards in the charities would be uncalled for.

(f) That the resident medical staffs of the voluntary medical charities receive only board and attendance, their services being more in the nature of an apprenticeship; but that such recommendation do not apply to those in fever hospitals and Poor-law infirmaries.

(g) That, believing compulsory charity is not charity, it strongly disapproves of any proposals made for the levying of either an imperial or municipal tax for the support of voluntary medical charities.

(h) That the growth of "special" hospitals should be severely restricted, and the existing special hospitals be diminished in number, and that special departments should be attached to the general hospitals. It, however, must be noticed that so long as the majority of medical practitioners are excluded from the staffs of voluntary medical charities, and so long as the public consider the practitioners attached to a charity possess superior knowledge to those who are not so attached, no reasonable limit can be placed to the further increase of medical charities and special hospitals.

(i) That as charity cannot be sold, the system of giving so many "letters of recommendation" for an amount of money subscribed to the funds of a medical charity should be discontinued. The payment of poor rate does not entitle the donor to "letters of recommendation," or the right to obtain medical relief from the Poor-law.

(j) The Association also recommend that a public medical service of England be established; that it be composed of two departments (1) a provident department, at which medical, surgical, obstetric, and dental treatment and medicines shall be obtainable by persons who make periodic payments during health and sickness; and (2) a cash, or immediate payment department, at which treatment shall be given on the payment of a small cash fee. Such a service should embrace only that portion of the industrial classes whose income from all sources amounts to for single persons 15s. per week, for families 30s. per week. The rules of such a service should be registered under the Friendly Societies Act, and penal clauses introduced, so that those who wilfully abuse it be punished.

(k) Lastly, it is recommended that all the voluntary medical charities in England and Wales combine to form a "voluntary medical charities association," and that conferences should be held in different towns.

[The following Reports of the Council, and of the Committees, will be presented at the Annual Meeting to be held at Bournemouth, on July 28th, 29th, 30th, and 31st, and are published in accordance with the regulations for the conduct of Annual Meetings, which require that all Reports of Committees of the Association shall be printed in the JOURNAL before the Annual Meeting.]

REPORT OF COUNCIL.

In pursuance of By-law 19, your Council has pleasure in presenting its yearly report. It will be remembered that at the last annual meeting your Council was empowered to arrange for an invitation for 1891, and to appoint a President-elect. At the October meeting three invitations were received, namely, from Scarborough, Bournemouth and Portsmouth. Having regard to the fact that the Association had met at Leeds in 1889, and that it is some years since it had held the annual meeting so far south as Bournemouth, the invitation to the latter town was accepted, and Dr. Roberts Thomson appointed President-elect.

The cordial thanks of the Council were given to Scarborough and Portsmouth for their courteous invitations, and a hope expressed that they would be renewed, and thus enable the Association to visit these towns at no distant date. Your Council has since received from the members at Scarborough an expression of satisfaction at the receipt of this resolution.

The President-elect, at the Council meeting at which the invitation was presented and accepted, reminded the members present that this would be the first meeting held in the Dorset and West Hants Branch; and from the exertions that have been made your Council anticipates a most successful and pleasurable meeting, and trusts that it will be the means of largely increasing the importance and useful work of the Branch.

The number of members on the books last year was 13,360. During the year 978 have been elected, 132 have died, and 345 resigned, leaving on the books the unprecedented total of 13,861.

The financial statement which is appended to this report is fairly favourable considering the large and increasing expenditure. The revenue for the year amounted to £31,815, while the expenditure, including an amount written off on subscriptions from deaths and resignations, was £29,438, leaving a surplus for the year of £2,376, which sum has been invested in 3 per cent. Local Loans Stock. The total amount of invested funds in railway debenture, Bank of England, English Corporation, Local Loans, and India Stocks is £26,871. The excess of assets over liabilities is £41,333.

The Treasurer, having drawn the attention of the Journal and Finance Committee to the rapid and large increase in the expenditure of the Association, was requested to furnish a report. On the presentation of this report, the Journal and Finance Committee appointed a subcommittee to consider the various details, and to suggest such measures as might seem desirable to check the growing expenditure. This subcommittee has held several meetings, and has made certain suggestions which are under the consideration of the Journal and Finance Committee.

The Branches, both home and colonial, have been greatly augmented in number during the past year, more especially the Australian Branches. The Melbourne and Victoria Branch now numbers 173 members, and the Sydney and New South Wales Branch has 151 members, while Adelaide and South Australia has an active and ably worked Branch of 97 members. Large and important colonial Branches have been formed in Burmah and Hong Kong. Your Council cannot leave the subject of the colonial Branches without drawing attention to the brilliant inauguration of the Leeward Islands Branch held in St. John's, Antigua. The Governor-General of the Leeward Islands, Sir William F. Haynes-Smith, K.C.M.G., in January last delivered an address of welcome, in which he expressed his pleasure in being able to take part in the inauguration of the Branch. After entertaining the members at dinner and, together with Lady Haynes-Smith, at a garden party, the Governor proposed that all papers and discussions of interest to the colonies should be published in pamphlet form at the Government expense. The reports of

the transactions of the colonial Branches are becoming numerous and most interesting.

The Council have had the pleasure of receiving, in the month of July, three applications almost simultaneously for the recognition of three new Branches of the Association in the Dominion of Canada. They come from the great central cities of Montreal (Province of Quebec), Toronto (Province of Ontario), and Winnipeg (Province of Manitoba). Accompanying them was a considerable number of new applications for membership, and leading members of the profession in each locality have signified their willingness to accept office in the respective Branches. The meetings for constituting these new Branches were held at the instance of Mr. Ernest Hart, who was visiting Canada, and were addressed by him. The Council have had great pleasure in cordially sanctioning the formation of the Branches, subject to suitable by-laws. They welcome this large accession of fellow-members in the great Canadian Dominion, and hope that the anticipations expressed by the founders of a considerable further accession of members will be fulfilled, and that thus the union of medical practitioners throughout the Empire in a common bond in furtherance of the great objects of the Association will be provided. The Council feel that thanks are due to Mr. Hart for his successful exertions in this matter.

The number of members attached to the Home Branches has also largely increased during the past year, their meetings have been numerous, and the work done most satisfactory. The numerical augmentation of the Branches is mainly due to the earnest and untiring exertions of the Branch Secretaries, and to those gentlemen your cordial thanks are due.

Dr. Cleland, of the South Australian Branch, has resigned the duties of Secretary, which he had performed zealously and ably since the formation of the Branch; also Dr. J. D. Macdonald, of the Colombo and Ceylon Branch; Dr. Saundby, the Birmingham and Midland Counties Branch; Mr. J. A. Bratton, the Shropshire and Mid-Wales Branch; and Dr. Alex. Napier, the Glasgow and West of Scotland Branch. The vacancies thus made have been filled by Dr. Poulton, of Adelaide; Dr. H. Marcus Fernando, of Colombo; Dr. Simon, of Birmingham; Mr. John Gray, of Shrewsbury; and Mr. R. H. Parry, of Glasgow, respectively.

At the annual meeting an animated discussion took place in the Psychological Section, on hypnotism, and a resolution was carried protesting in the strongest manner against the public exhibition of the phenomena of hypnotism, and a committee was appointed to consider the subject in all its bearings, with Dr. Needham as chairman, and Dr. Outtersson Wood as honorary secretary. Your Council hopes that the committee will be able to report upon this important subject during the ensuing meeting.

The question also arose at the meeting at Birmingham as to whether foreigners could be legally elected members of the Association, seeing that a large number then and there presented themselves with that end in view on their way to the Berlin International Congress. The Solicitor to the Association was consulted, and a report upon the subject was made to the Council by Mr. Lawson Tait at its request. Whereupon the following resolution was carried by the Council:

That while recognising it as both a duty and a pleasure to accord a hearty welcome to foreign medical practitioners attending the annual general meeting of the Association, the Council is of opinion and is advised that it cannot extend to such practitioners the privilege of actual membership, having regard to the origin and constitution of the Association, and to the fact that in the opinion of the Council the word "qualified" by By-law No. 1 means British subjects who are registered in the Medical Register of Great Britain and Ireland, or British subjects residing in any part of the British dominions who are legally entitled to practise in such dominions, and that such definitions cannot be further extended.

At the last annual meeting a resolution on the increase of direct representatives on the General Medical Council was referred to the Council, which passed a resolution, a copy of which is as follows, namely:

Resolved: That the elected members of the General Medical Council be respectfully requested to move that Council to represent to the Privy Council the desirability of exercising the powers conferred by Section 1c, Clause 10, of the Medical Act, 1886, and to increase the number of elected representatives.

"At a meeting of the General Medical Council held on November 25th last, Sir Walter Foster, in an exhaustive speech,

which was formally seconded by Dr. Glover, moved the following resolution:

That in the opinion of the Council the time has come when it would be expedient to confer upon the registered medical practitioners resident in the United Kingdom the power of returning an increased number of direct representatives to the General Medical Council as provided for in Section 10, subsection 1, paragraph c of the Medical Act, 1886.

After some discussion of this motion by the Council, an amendment was proposed by Sir Dyce Duckworth and seconded by Dr. Bell Pettigrew:

That the Council, instead of proceeding to vote on the question originally proposed, do pass to the next order of the day.

The amendment was carried. Upon these steps being reported to your Council on April 15th last, it was

Resolved: That the Council of the British Medical Association regret much that the representation made to the General Medical Council by Sir Walter Foster, as coming from the British Medical Association, did not receive the serious consideration that it deserved, and that a Committee be appointed to consider the best means of furthering the object of securing an increased direct representation of the profession on the General Medical Council.

The number of members visiting the Library during the year ending December 31st last was 1,612. During the past year more than 500 volumes have been presented, also some valuable *Public Health Reports* by the Right Hon. the Speaker of the House of Commons. The thanks of the Association are due to the gentlemen who have given these works, either as authors or from their shelves, and who have thus materially added to the value and usefulness of the Library. Many duplicate volumes having been received, 687 of these volumes were, upon application from the Bristol Medico-Chirurgical Society, presented to their library, and 269 to that of the Medical Institute for Women. The grant made towards the expenses of the Library for the year was £200.

The prize founded by the late Dr. Stewart for the recognition of important work regarding the origin, spread, and prevention of epidemic disease has been awarded to Dr. James Burn Russell of Glasgow. Your cordial thanks are due to Professor Gairdner, Dr. Klein, F.R.S., and Dr. Saundby for having acted as adjudicators of the prize.

Your Council regrets to have to report the death of Mr. Richard Middlemore, who it will be remembered founded the Middlemore Fund, the interest of which is awarded triennially for the best work or essay on the science of ophthalmic medicine.

The prolonged efforts which the Association has made, through its Parliamentary Bills Committee, to obtain substantive rank for army medical officers, which was so seriously impaired by the warrant of 1887, have at length been crowned by a large measure of success. The promise of the Minister for War to grant substantive rank and compound titles and to redress several other minor grievances must be taken as great a step in advance, and as marking a stage in the evolution of the Medical Staff into a Royal Medical Corps.

The subject which has mainly engaged the attention of the Parliamentary Bills Committee has been the proposal in the Government Factories and Workshops Bill to abolish the system of certifying the fitness of children for employment in factories. This would have involved the abolition of certifying surgeons. Largely owing to the representations made by the Parliamentary Bills Committee to the Grand Committee on Trade, to which the Bill was referred, this clause was struck out by a large majority.

The unfavourable influence of the provisions of the Mortmain Acts upon the medical charities has been the subject of consideration and inquiry, and memoranda by the Chairman and Sir John Simon having been submitted to the Committee and to several eminent lawyers, a Bill was drafted upon the lines suggested, and was introduced into the House of Lords by Lord Herschell on May 29th.

With regard to the Midwives Bill great differences of opinion were found to exist within the profession, and a special subcommittee of the Parliamentary Bills Committee was appointed, which, with the assistance of counsel, drafted amendments, but the Bill never advanced beyond the initial stage.

A special Committee was appointed to watch the course of the Public Health (London) Bill, which is an amending as well as a consolidating Bill, and affects medical interests in several respects. Amendments in the direction recommended

by the Council have been introduced in the Bill as reprinted in its present form.

The representations on the question of habitual intemperance made to the Government and the Legislature by the Association, in concert with the Society for the Study of Inebriety, have aided in the securing of practical legislative effort. Mr. Ernest Hart's exhaustive paper on Ether Drinking in Ireland, read to the Society for the Study of Inebriety, drew attention to the extraordinary development of ether intoxication over a considerable area in Ireland, and emphasised the growing demand for prompt and effectual legislation to arrest, and if possible stamp out, this now rapidly increasing and cheap form of intemperate indulgence. The authorities adopted the drastic measure of scheduling ether as a "poison," with the excellent result that in Ireland the sale has declined some 90 per cent. For years past the Association has actively taken part in impressing on the Home Secretary and the Cabinet the urgent need for amended legislation for more effective dealing with inebriates. A valuable result of this action has been the appointment of a committee of the House of Lords, on the motion of Lord Herschell, to inquire into the causes of the failure of our present procedure with inebriate criminals, and into the best method of amending the Inebriates Acts, so as to ensure proper and efficient treatment of such cases with a view to reformation and cure. The country is now ripe for really efficient legislation.

The amount granted by the Scientific Grants Committee for aid in scientific research was £700, and was divided amongst eighteen gentlemen, most of whom have reported upon the investigations in which they have been engaged.

Dr. Ralph Stockman, who was appointed one of your research scholars in 1888 to investigate the chemical changes which menthol, camphor, and similar bodies undergo after absorption, the action of the camphor group on the heart and circulation, and other researches, having now held the appointment for the three years, retires, and Dr. Ernest H. Starling has been appointed to fill the vacancy. He proposes to investigate intracardiac pressure, the origin of the secondary waves of the pulse curve, and the causation of morbid changes in the pulse curve.

Dr. Monckton Copeman was appointed last year in the place of Dr. Sidney Martin (who retired upon completing his third year of appointment) to investigate the etiology, pathology, and treatment of diabetes.

During the past year the Therapeutics Committee have continued the investigation of the action of various new hypnotics—sulphonal, paraldehyde, urethan, chloralamid. A report on this subject was presented to the Council last year and published in the *BRITISH MEDICAL JOURNAL*. The Committee will complete the report on hypnotics this year. An investigation into the action of the nitrites of ethyl and sodium in relieving various forms of dyspnoea and in producing diuresis has been conducted by observers in different parts of the country. It is not yet completed, but a short report will be presented to the Council. Under the Committee, Professor Cash, of Aberdeen, and Mr. T. J. Bokenham, of St. Bartholomew's Hospital, have been engaged in pharmacological researches. Mr. Bokenham contemplates bringing forward his results at the annual meeting at Bournemouth.

It is with grief your Council has to report the loss by death of two of your vice-presidents—Dr. Edward Waters and Dr. William Strange, both active members of the Council. Dr. Edward Waters was President in 1866. His name will be honourably remembered in connection with the successful institution of direct representation on the General Medical Council, and which now the Association desires to see extended. Dr. Strange, President in 1882, when the Association met at Worcester in its Jubilee year, was an active member of the Council, and attended the last meeting just before his death. Amongst other members of the Association who have died during the past year are Dr. J. W. T. Smith, of Belfast, who was president of the North of Ireland Branch several years ago; Dr. Alexander Boggs who was the senior member of the English medical colony in Paris; Mr. C. H. Rogers-Harrison, in his 80th year, and one of the oldest members of the Association; Dr. Anthony H. Corley, of Dublin, who was ex-president of the College of Surgeons of Ireland; Dr. Walter Strang, of Alloa; Mr. A. F. McGill, of Leeds; Dr. John Armstrong, of Dartford, who was an old

and much respected member of the South-Eastern Branch; Mr. John Marshall, F.R.S., president of the General Medical Council; Mr. Edward Bellamy, who was Lecturer on anatomy at Charing Cross Hospital; Dr. W. Orlando Markham, a former editor of the *BRITISH MEDICAL JOURNAL*; Mr. H. M. Fernie, of Macclesfield; Mr. Richard Middlemore, of Birmingham, in his 87th year, one of the oldest members of the Association; Dr. F. W. O'Connor, of Limerick; Mr. J. E. Kershaw, Dr. Peter Hinckes Bird, Dr. W. Royston Pike, Dr. G. B. Hoffmeister, Mr. John Spear, Dr. Stephen Winter Fisher of Brighton; Mr. T. H. Bartleet, of Birmingham, who rendered valuable service as one of the local secretaries at the annual meeting held in Birmingham in 1873, and at the annual meeting last year was president of the Surgical Section; Dr. A. J. Manson, Dr. Henry Hensley, of Bath; Dr. W. W. Young, of Aldershot; Dr. William Burnie, of Bradford, vice-president of the Yorkshire Branch; Dr. Geo. Rae, of New Pittsligo; Dr. Robert Martin, Dr. Henry Tizard, of Weymouth; Dr. M. R. O'Connor, of Limerick; Dr. W. E. Steavenson, Dr. Henry Monro, Dr. Fordyce Barker, of New York, who was an honorary member of the Association; Dr. John Tibbits, of Warwick, who was president of the Birmingham and Midland Branch in 1877-8; and Dr. William Haining, of Chester.

W. WITHERS MOORE, President of Council.

REPORT OF THE PARLIAMENTARY BILLS COMMITTEE.

It is satisfactory to be able to report that the work of the Parliamentary Bills Committee in respect to more than one matter which has engaged its attention for successive years has been crowned with a large measure of success.

Army Rank Question.—The Parliamentary Bills Committee during the past year did not relax the efforts made during previous years to obtain some intelligible settlement of the military rank accorded to medical officers of the army. They continued to urge the question upon the War Minister both by direct representation through its Chairman, and by free discussion in the pages of the *BRITISH MEDICAL JOURNAL*. It is not too much to say that it was mainly through their persistent efforts that the Camperdown Commission was appointed, and that at last Mr. Stanhope has largely adopted the recommendations of that Commission, even after they had been set aside through the unreasonable but determined hostility of his "military advisers." The able and even enthusiastic advocacy of the claims of army medical officers by Sir Andrew Clark, both as the representative of the schools and the profession at large, must be fully acknowledged in the varying stages of the controversy. To him army medical officers owe a deep debt of gratitude. The delay of the War Office in offering any reasonable settlement of the question was not an unmixed evil, as it enabled it to be fully discussed, and to undergo that evolution so necessary to final issues. How far Mr. Stanhope's promised concession of substantive rank and compound military titles will meet the fair requirements of the army position and duties of the medical officers remains to be tested. We hope it will have a fair trial. Should it prove insufficient, then army rank in a Royal Medical Corps is probably not far distant.

Factories and Workshops Bill.—Early in the year a series of Bills for the amendment of the law relating to factories and workshops was introduced into the House of Commons, the most important of which was the Government Bill backed by Mr. Matthews. By Clause 19 of this Bill it was proposed to abolish summarily the whole system of medical certificates of fitness of children and young persons for employment in factories and workshops. The immediate effect of this would have been to remove the only safeguard imposed by the State for preventing the employment of those who, by reason of physical ailment or imperfect development, are unfit for such labour, and to deprive a valuable body of medical officers of a considerable portion of their income without compensation. The Bill, which was introduced on February 10th, was on February 26th, after an important debate, read a second time, and referred to the Standing Committee on Trade. The Parliamentary Bills Committee, which had the advantage of the co-operation of the Association of Certifying Factory Surgeons, and the active assistance of Sir Walter Foster, M.P.,

was enabled to render most effective service both in the way of organisation and by the weight of its influence as a representative body. Dr. Farquharson, M.P., championed the cause of the factory surgeons in the Standing Committee with untiring zeal, and to him was very largely due the rejection by a large majority of Clause 19, which the Home Secretary to the last fought vigorously to retain.

The Law of Mortmain.—After a correspondence with Sir John Simon on the subject of the effete and ancient law of mortmain and its effect on hospitals and charities, the Chairman, Mr. Ernest Hart, put himself into communication with the governing bodies of many of these institutions, from whom he elicited information showing in an unmistakable manner how largely hospitals and medical charities are sufferers under the existing statutes. This information, together with suggestions for the amendment of the law, was embodied in a memorandum laid before the Committee on October 14th, 1890, and subsequently printed in the *BRITISH MEDICAL JOURNAL*. This memorandum was accompanied and supplemented by a valuable minute by Sir John Simon on "Charitable Bequests forbidden by Law." Copies of these documents were forwarded to the highest legal authorities, including the Earl of Selborne, Lord Herschell, Sir Horace Davey, and Sir Edward Clarke, from whom replies were received expressing great interest in the subject, and an earnest desire that in some way the suggestions made for diminishing the injury to hospitals should be carried out. The Committee authorised the drafting by counsel of a Bill on the lines indicated, copies of which were sent to Lord Selborne, Lord Herschell, and others. It is satisfactory to report that this Bill was, with certain modifications in detail, introduced by Lord Herschell into the House of Lords on May 29th, and read a second time on June 18th, Lord Selborne supporting the motion.

Lunacy Law.—Some hitches having been found to occur in the working of the New Lunacy Act, the Parliamentary Bills Committee appointed a subcommittee to consider the subject and make a report. The subcommittee consisted of Dr. Needham, Dr. Deas, Dr. Langdon Down, Dr. Jones (Earlswood), Dr. Bower (Bedford), Mr. Whitcombe, Dr. Alfred Carpenter, Mr. Galton, and Dr. Mickle (Convener). The chief difficulties in the working of the new Lunacy Act, as actually brought before the subcommittee, related to the justices "specially appointed" to sign reception orders in the cases of private (that is, non-pauper) lunatics. Owing to the different ways in which the justices in quarter sessions acted in different parts of the country, in relation to the appointment of such specially appointed justices, it was found that some districts were inadequately supplied. In some instances, also, the appointed justices did not know the limits of their own jurisdiction; in others, difficulty was found by friends of lunatics in ascertaining who were the appointed justices and where they lived; in others the justices deferred much to the clerk of the justices, and thus and otherwise made great delays in acting, or put the friends and medical men concerned to much trouble or inconvenience; so that some modification of the existing arrangements appeared to be desirable for some parts, especially, perhaps, for the metropolis. The subcommittee met and made the following recommendation, which was brought by the Convener before, and adopted by, the Parliamentary Bills Committee, and at his suggestion copies of it were sent to the Lord Chancellor, the law officers of the Crown, and the medical and legal members of the House of Commons. The recommendation was: "It is suggested that in each county or borough all the justices in the county or borough be especially appointed by the justices at the Michaelmas Quarter Sessions to act under the Lunacy Act, 1890; or if this recommendation be not adopted, it is suggested that all the justices be specially appointed by the said justices of the said sessions, except such as have previously during that year intimated their objection to so act by letter to the clerk of the peace for the county or borough, and that the justices appointed in either of these ways be appointed to act, under the Lunacy Act, 1890, for the year following, beginning on the 1st day of January and ending on the 31st day of December thereafter following. And that between the date of the said appointment of the said justices at the Michaelmas Quarter Sessions and the 1st day of December following it be a duty of the clerk of the peace for each respective county or borough to prepare and have printed a

list of the justices thus specially appointed, together with their addresses and a statement as to the area within which each of them is appointed to act, and that such printed list be by him sent to any person who at any time may make application for the same."

Midwives Bill.—With regard to the Midwives Bill, great difference of opinion had existed within the profession, but the Committee took the view that as the proposed legislation had originated outside the profession it was desirable to attempt to obtain such modifications in the Bill as would bring its provisions into accord with suggestions made at an earlier period. With this view a special subcommittee was appointed, which, with the assistance of counsel, drafted amendments, but the Bill never advanced beyond the initial stage. The Lord President, upon whom a deputation waited, was understood to consider that the Bill was not at the present time within the scope of work which Parliament could undertake this year.

Public Health (London) Amendment Bill.—Two Bills were introduced into Parliament by the President of the Local Government Board, the Public Health (London) Amendment Bill and the Public Health (London) Consolidation Bill. A subcommittee was appointed to consider these Bills, and with the assistance of counsel various amendments were drafted, which were placed in the hands of Sir Guyer Hunter. During the passage of the Bill through the Standing Committee it was modified in directions recommended by the subcommittee, and the Bill in its present form, which consists of an amalgamation of the two Bills above-mentioned, embodies these alterations. One of the most important is the enactment of a clause which provides that no medical officer of health shall be removed except with the consent of the Local Government Board. The importance of such a provision has more than once been represented to the President of the Local Government Board by the Committee. It may be hoped that at an early date this principle will be extended throughout the country. Other matters not dealt with in this Bill the President of the Local Government Board has promised to consider at the earliest opportunity, probably next session.

Medical Practice in Sierra Leone.—The attention of the Committee having been called by correspondence to the absence of any satisfactory medical ordinance in the colony of Sierra Leone, Dr. Lamprey, who was acquainted with the circumstances of the colony, attended the meeting of the Committee on April 28th, and made a statement, as an outcome of which a Bill was drafted by the Committee, and forwarded to the Colonial Office with a covering letter. The Committee is informed that Lord Knutsford is now taking steps to bring about an improvement in the regulations existing in the colony.

ERNEST HART, Chairman.
S. SIBLEY, Vice-Chairman.

REPORT OF INEBRIATES LEGISLATION COMMITTEE.

YOUR Committee has much pleasure in recording the prompt action of the Government in grappling boldly with the recent rise and progress of the baneful habit of intoxication by ether, to which Mr. Ernest Hart drew general attention in an exhaustive paper read by him in October, 1890, to the Society for the Study of Inebriety. Your Chairman, acting by your authority and also on behalf of the Society for the Study of Inebriety, held repeated communications on this subject with the Home Secretary, the Chancellor of the Exchequer, and the President of the Board of Inland Revenue. The authorities, alive to the serious expansion of this form of inebriety, which had spread with remarkable rapidity, mainly owing to the cheapness of ether prepared from methylated spirit, took the effective course of scheduling sulphuric ether as a "poison," to be sold only by chemists and druggists under the provisions of the Pharmacy Act. The result has been most satisfactory, the sale of ether in Ireland having decreased 90 per cent. A still more recent development, over a more restricted Irish area, of methylated spirit drinking is to be dealt with also by Government.

For years past your Committee has, with the Society for

the Study of Inebriety, been urging upon the Government the need for an inquiry into the working of the Inebriates Act, 1879. An Amendment Act was passed in 1889, which made permanent the previous temporary Act, in addition to one or two minor improvements. For this the community is greatly indebted to the good offices of Mr. Matthews, the Home Secretary, whom your Chairman has always found sympathetic and ready to render legislative help so far as the exigencies of parliamentary work would allow.

Existing legislation has these chief defects: There is no provision for the poor; admission of a voluntary applicant for reception in a licensed retreat is rendered forbidding by an enforced appearance before two justices; and an inebriate can be received and detained in such a retreat only at his own request.

It is essential that well equipped retreats for the treatment of the disease of inebriety, on such lines as those on which the Dalrymple Home is conducted, should be established, in which the poorest could be treated under conditions most favourable to a permanent cure. All obstacles to the admission of voluntary applicants should be removed, cases being received and detained on a simple request in writing, without appearance before magistrates, due care being taken to safeguard the liberty of the subject. Above all, compulsory powers should be vested in properly constituted authorities, in order that inebriates of all classes, whose will has been so broken down that they are unable to apply for admission of their own accord, might be secluded for sound treatment in the hope of cure.

Police-court and other criminal inebriates, with whom our present judicial procedure has been a conspicuous failure, should be similarly treated as diseased individuals, whereby a substantial proportion of such offenders against the law might be converted into healthful, useful, and orderly citizens.

Your Committee, therefore, gladly notes that a Committee of the House of Lords has been appointed, on the motion of Lord Herschell, to inquire into the present treatment of inebriate criminals and into the working of the Inebriates Acts.

Your Committee regrets that Mr. Morton's proposed Restorative Homes (Scotland) Bill has not been introduced into Parliament, and reaffirms its formerly expressed approval of this legislative proposal in so far as it provides for compulsory reception and detention, for the reception and detention of voluntary inebriate patients without magisterial proceedings, and for contributions from the public funds.

The Committee recommend its re-election as follows: the President and President-elect *ex officio*: Dr. Withers Moore, President of Council; Mr. D. B. Balding, J.P.; Dr. T. Bridgwater, J.P.; Dr. C. Cameron, M.P.; Dr. Alfred Carpenter, J.P.; Dr. G. B. Clark, M.P.; Dr. C. R. Drysdale; Mr. Geo. Eastes; Dr. J. W. Eastwood, J.P.; Dr. R. Farquharson, M.P.; Sir Walter Foster, M.P.; Dr. W. T. Gairdner; Mr. W. C. Garman; Dr. J. Hill Gibson; Dr. A. Grant; Mr. F. J. Gray; Dr. C. J. Hare; Dr. Norman Kerr; Mr. H. R. Ker; Mr. R. N. B. Nicholson; Surgeon-Major G. K. Poole, M.D.; Mr. J. Prankerd; Surgeon-Major R. Pringle, M.D.; Fleet-Surgeon Geo. Robertson, M.D.; Dr. G. Danford Thomas, Coroner; Dr. H. W. Williams; Dr. Wynn Westcott, Deputy Coroner; and Dr. E. Hart Vinen.

NORMAN KERR, M.D., Chairman.

REPORT OF THE SCIENTIFIC GRANTS COMMITTEE.

THE Scientific Grants Committee have to report that during the past year 1890-91 the sum of £750 has been granted in aid of scientific research, of which the following are particulars:—

	£	s.	d.
Ballance, Dr. C. A., 56, Harley Street, W.—For continuing Investigations into the Pathology of Cancer	30	0	0
Bayliss, Mr. W. M.—Physiological Laboratory, University College, W.C.—1. For an Investigation on the Course of the Cardiac Contraction Wave in the Mammalia, and Photographic Apparatus. 2. For a Research on the Nervous Supply of the Pancreas, and its Relation to Diabetes	50	0	0
	£80	0	0

	£	s.	d.
Brinck, Dr. Julia, 30, Devonshire Street, Portland Place, W.—An Investigation of the Nutritive Action of Muscle of different kinds of Proteids	20	0	0
Brown, Dr. John, Bacup.—To determine the Factors which chiefly Influence Moorland Water in Dissolving Lead, such as—1. (a) Softness; (b) Acidity; (c) Temperature; (d) Seasonal Influences; (e) Dissolved Gases; (f) Influence of Fish, etc. 2. Methods of Preventing the Plumbo-solvent Action of Moorland Water. 3. To determine the Primary Action of Lead by Experiments on Rabbits, Frogs, etc.	25	0	0
Clarkson, Dr. A., the Owens College, Manchester.—Proposes to work on the Structure Development and Functions of the Suprarenal Capsules	10	0	0
Delépine, Sheridan, M.B., 6, Chapel Place, W.—For the purpose of carrying out some Investigations in Pneumo-cardiography	40	0	0
Edington, Dr. Alexander, 44, Great King Street, Edinburgh.—To prosecute Inquiries into the Etiology of Suppuration, the action of Micro-organisms on the Blood, etc.	20	0	0
Edkins, Dr., the Owens College, Manchester.—Proposes to work on Pancreatic Digestion	15	0	0
Halliburton, Dr. W. D., 25, Maitland Park Villas, Haverstock Hill, N.W.—A research into the Regeneration of Albumin, namely, the Reconversion of the Peptone formed in the Stomach and Intestine into the Proteids of the Blood. The first experiment would be a repetition of those which Kroneser's pupils have recently published, and to amplify these by a more complete chemical examination of the materials obtained, and to attempt to discover the agent by which the so-called regeneration is accomplished	30	0	0
Hankin, Mr. E. H., St. John's College, Cambridge.—1. Continuation of an Investigation into the Nature of an Albumose that has been obtained from Anthrax Cultures under certain conditions, which has been already found to possess highly interesting Poisonous Properties. 2. To find out whether the changes in the Suprarenal Capsule that has been noticed in Animals poisoned with this albumose are or are not causally connected with its injection. 3. To find out whether the difference between Virulent and Attenuated Anthrax depends on the power that the former has of producing a Ferment; for evidence has been found of the existence of this power in Virulent Anthrax, and no such evidence with the Attenuated Bacilli	50	0	0
Horsley, Professor V.—Prosecuting research in Epilepsy, Compression and other Disorders of the Central Nervous System (with Dr. Beevor, Mr. Spencer, Mr. Gotch, and Dr. Semon)	150	0	0
Jones, E. Lloyd, M.B.—For prosecuting research on Variations of Specific Gravity of Blood in Health and in Disease, and some special points connected with the last named	50	0	0
Martin, Mr. C. J., Physiological Laboratory, King's College, W.C.—Inquiry into the Mechanism by which CO ₂ passes from the Blood into the Air in the Pulmonary Alveoli	50	0	0
Mott, Dr. F. W., Charing Cross Medical School, 60, Chandos Street, W.C.—Continued Investigation upon Bilateral Associated Movements, especially in reference to their return after Hemisection of the Spinal Cord	60	0	0
Reid, E. W., M.B., Physiological Laboratory, University College, Dundee.—Continued Investigation to determine to what extent the Vitality of the various Epithelia covering the Cavities of the Body influences the Absorption of Different Substances	20	0	0
Symes, William L., M.R.C.S., Physiological Laboratory, St. Mary's Medical School.—Towards the expenses of a series of Experiments with the view of Elucidating the Properties of Haemoglobin and its Derivatives	20	0	0
Starling, E. H., M.B., Physiological Laboratory, Medical School, Guy's Hospital, S.E.—In aid of a research on the Reaction of Degeneration	40	0	0
White, Dr. W. Hale, 65, Harley Street, W.—Required towards the expenses of continuing the Investigations upon the Control of the Nervous System upon Heat Regulation and Production	20	0	0
	£700	0	0
Savage, Dr. G.—Amount spent out of grant of £100 for expenses of committee for investigating State of Children Unfit from Mental and Nervous Conditions for Ordinary School Teaching	50	0	0
	£750	0	0

The following amounts have been returned as unused:—

Mr. W. M. Bayliss	2	7	7
Dr. Brown	1	15	0
Dr. S. Delépine	35	4	0
Mr. J. S. Edkins	2	12	6
Dr. W. D. Halliburton	25	0	0
Mr. E. H. Hankin	4	6	5
Professor V. Horsley	28	16	11
Mr. E. Lloyd Jones	17	8	10
Dr. F. W. Mott	11	4	7
Dr. E. W. Reid	2	15	0
Dr. E. H. Starling	40	0	0
Dr. W. L. Symes	15	0	0
Dr. W. H. White	7	10	9
	£194	1	7

DR. C. A. BALLANCE has been engaged, jointly with Mr. S. G.

SHATTOCK, on a series of experiments to determine whether an infective disease, and possibly carcinoma, could be induced by the inoculation of psorospermial material from the rabbit's liver. Experiments were made on the ears of rabbits, monkeys, and dogs by way of intravenous injection into the jugular veins of dogs. In all cases the results were negative, although the experiments themselves were in all respects satisfactory. A portion of the grant has been spent in another branch of the same research, a record of which will be published at some future date.

Mr. W. M. BAYLISS and Dr. E. H. STARLING give the main results of their research on *the mode of contraction of the mammalian heart* as follows: The contraction of the mammalian heart is in the form of a wave travelling from the auriculo-ventricular groove to the apex. The cause of the deceptive appearance of contraction at the apex before that of the base has been shown to be due to abnormal conditions, namely, local cooling of the base. The statement of Frédéricq that the contraction is of a tetanic nature has been found to be totally unsupported by the character of the electrical changes in the ventricle, which consist in a single wave of negativity travelling from base to apex. A large number of measurements of latent periods under artificial stimulation has been made, partly with the view of elucidating the nature of the transmission of the contraction from auricle to ventricle, whether by direct muscular continuity or by nervous tracts; the results show a large delay at the auriculo-ventricular groove, but the authors are inclined to look upon a nerve network, such as has been shown to exist in the ventricle by Dogiel and others, as the medium of transmission.

Miss JULIA BRINCK, M.D., has been carrying out some experiments on *nutrition of muscle*. The results of these experiments on excised frog's muscle indicate that solutions of peptone, casein, egg albumin, and glycogen are incapable of restoring to activity the exhausted skeletal muscle, and that serum albumin is the nutritive proteid *par excellence*. This result is in accordance with previous results obtained by Kronecker and his pupils on cardiac muscle, to the effect that even a minute addition of serum albumin to any circulating fluid speedily restores the heart's beat. In the same way an exhausted voluntary muscle, after immersion in a solution of serum albumin, regains its contractility from zero to its normal amount; this restoration can be effected repeatedly. The various proteid fluids and solutions of muscle extractives and of neutral salts, which are ineffective in sustaining the ventricle, are equally incapable of restoring the contractility of skeletal muscle. The substances which have been examined in this respect are egg albumin, albumose, peptone, glycogen, creatin, creatinin, Liebig's extract of meat, and Ringer's fluids I and II.

Dr. JOHN BROWN has been conducting experiments to determine the *factors which chiefly influence moorland water in dissolving lead*. He says the following are the main conclusions which he has formed: 1. That the acidity in moorland water is more marked in winter than in summer. That no definite free acid has as yet been isolated. That the acidity may be due to an acid salt; possibly and probably a double salt of alumina and iron derived from the shale. 2. That the plumbo-solvent action is lessened with the increase of the temperature of the water. That this is probably due to the fact that less gases are held in solution with increase of temperature. 3. That oxygen held in solution is an important factor in the plumbo-solvent action of moorland water. 4. That powdered chalk and bicarbonate of soda will lessen, if not altogether destroy, the plumbo-solvent action of water.

Dr. CLARKSON has been working on the *comparative histology and functions of the suprarenal capsules*, and states that he has found (*inter alia*) the presence of a duct to the gland in the case of the crocodile and flamingo, a fact of great interest, as the cells of the suprarenal capsule have all the characters of arrangement and form which we are accustomed to find in glands with ducts, whereas the suprarenal is always regarded as a ductless gland.

Dr. S. DELÉPINE says that his investigation on the *meaning of the cardio-pneumatic impulses*, etc., is not yet completed. It is composed of three parts: (1) a search for improved methods; (2) an inquiry into the meaning of the movement; (3) a study of its physiological and pathological variations.

Under the first head he is able to say that, after trying all the methods which seemed to him likely to yield any result at all, and after modifying them in the ways indicated by circumstances, he has been able to obtain both the means of demonstrating the phenomenon in almost any person, and also of recording it in a simple way. Secondly, by chromographic measurements and by the comparison of simultaneous tracings of the cardio-pneumatic waves and of the carotid and cardiac pulses obtained by others and himself. He has been able to connect clearly certain parts of the cardio-pneumatic waves with certain events taking place during the passage of the blood through the heart and blood vessels. As his results are not in perfect agreement with those of certain observers, he has been obliged to go into a critical comparison of their and of his own results, in which he believes he has fully proved the correctness of his contentions. Thirdly, the study of the physiological and pathological variations has so far been only tentative, and the results which he has obtained not capable of application yet. When he began this investigation, he was aware that Cerdini and Landois had already studied the subject, but since, he has found that the question had also been treated by Régnard and François Frank. According to Beaunis, Voit and Lesser were the first to notice the phenomenon.

Dr. EDINGTON, who has gone to Capetown upon his appointment as Government Bacteriologist, has been written to, but there has not been time at present for a reply.

Mr. EDKINS has endeavoured to show the *changes produced in casein by the action of pancreatic and rennet extracts*. The chief results obtained were as follows: 1. There exists in pancreatic extracts a ferment which has the power of causing an alteration of the casein of milk, and this may be made manifest by a clotting of the milk. The action of the ferment may be to some extent differentiated from the proteolytic ferment, and it appears quite comparable to the recent ferment of gastric extracts. 2. The presence of neutral salts has a considerable influence in determining the clotting of milk by this change in the casein. 3. Though no clotting occurs, yet the change in the casein may be recognised by the application of heat, which causes heat coagulation, or by the addition of an equal bulk of saturated solution of sodium chloride, which causes a precipitation of the altered casein. 4. If minimal quantities of calves' rennet be added to milk, the changes referred to in (3) will occur, and the milk will resemble that treated with specimens of pancreatic extracts to some extent.

Dr. W. D. HALLIBURTON, during the last year, has completed his researches on *milk*, and published a report on the Proteids of Milk in a recent number of the *BRITISH MEDICAL JOURNAL*. Owing to the pressure of other work, he has been unable to do little more than start his investigation on the regeneration of albumin from peptone, but hopes to continue the work next year.

Mr. HANKIN has continued his researches on *defensive proteids*. A short account of his earlier work on this subject has already appeared in the *BRITISH MEDICAL JOURNAL* (July 12th, 1890). Mr. Hankin has latterly confined his attention to the defensive proteid of the rat. This substance is a globulin having an alkaline reaction, and a power of killing anthrax bacilli which enables it to prevent the development of anthrax in mice. A paper dealing with this subject, entitled "Ueber der schützende Eiweisskörper der Ratte," has appeared in the *Centralblatt für Bacteriologie und Parasitenkunde* for March of this year. The researches on defensive proteids in reference to infectious disease are being continued.

In the research on the *mammalian nervous system; its functions, and their localisations determined by an electrical method*, which is being published *in extenso* by the Royal Society, Messrs. GOTCH and HONSLY have employed the existence of the negative variation as both a qualitative and quantitative index of the localisation and extent of development of nerve function, in the spinal cord and in the peripheral nervous system, when the brain or spinal cord and peripheral system are excited. As soon as the full paper has been published a comprehensive abstract will appear in the *BRITISH MEDICAL JOURNAL*.

Mr. C. I. MARTIN has been appointed to the Physiological Laboratory, Sydney, where he now is. He has been written to, but there has not been time at present for a reply.

Mr. E. LLOYD JONES states the objects of his investigations as (1) to attempt to define as accurately as possible the causes leading to variations in the specific gravity of the blood in healthy persons; (2) to investigate the variations of the specific gravity of the blood in diseases of various kinds; (3) to pay attention to the diagnostic value of such observations upon persons suffering from nervous diseases, the specific gravity of the blood in chlorosis and the other forms of anæmia. Some parts of the subject are not dealt with in the report, because he has not been able to cover so large a ground in so short a time. He proposes to devote more attention to these points as time and opportunity may permit. A full report of the investigation, so far as it has gone, will appear in the next number of the *Journal of Physiology*.

Dr. F. W. MORR says the result of his researches on *hemisection of the spinal cord in monkeys* may be summarised as follows: 1. Return of associated movements in the lower limb on the side of injury. 2. The sensory disturbances were not found to accord with the dictum of Brown-Séquard and Ferrier. (3) Vasomotor disturbances on the side of the lesion. (4) Degeneration above and below the section on the side of the injury. 5. Stimulation of cortex cerebri on both sides after hemisection. A full report of the experiments and the inferences deduced was sent to the Royal Society. He has also commenced some other work on the tracts of the cord.

Professor WAYMOUTH REID has continued during the past year his work upon *vital absorption*. The facts elucidated in the course of the osmosis experiments with frog skin—an abstract of the results of which appeared in the *BRITISH MEDICAL JOURNAL* early last year—have been studied by another method, and it has been found possible to demonstrate the passage of fluid across living frogs' skin by virtue of its own unaided activity in cases where osmotic transfer is excluded. The results of this work will shortly be ready for publication. In addition to the above, experiments of a similar kind have been instituted with the alimentary mucosa of both cold and warm blooded animals. So far as these experiments have proceeded it has been found that a very active transfer of fluid, independent of osmotic and dependent upon vital action, is capable of demonstration.

In consequence of the great importance of mapping out the so-called cardiac and respiratory centres in the medulla oblongata, Mr. W. G. SPENCER has commenced an elaborate series of excitation experiments, and has presented a paper on the subject to the Royal Society, but inasmuch as that has not yet been published, only the briefest outline can at present be given of his work on the *changes produced in the circulation and respiration by electrical excitation of the floor of the fourth ventricle*. The method employed was to make an accurate plan of the floor of the ventricle by measurement on paper ruled with one millimetre squares, and each of these little areas was then stimulated, blood pressure and respiratory tracings being taken simultaneously. In this way the representation of respiratory and cardiac movements has been distinctly localised in cats, dogs, and monkeys. A full account will be given in the *BRITISH MEDICAL JOURNAL*, as well as the modes in which it directly bears on clinical research, as soon as the publication of the paper is completed.

Mr. E. H. STARLING has returned the amount of grant made to him, not being able to prosecute his research, as he has been so fully occupied working with Mr. Bayliss at the *electro-motive phenomena of the mammalian heart*.

The experiments in which Mr. W. L. SYMES is engaged are concerned with the *histological changes that occur in nerves after severance from their trophic centre*. He says the experiments are in full progress, but not yet far enough advanced to enable him to make a report this summer.

Dr. HALE WHITE has continued his work on the *effect of cerebral lesions on bodily temperature*, and has shown that in the rabbit lesions of the corpus striatum and septum lucidum will cause a considerable rise, but that lesions of the optic thalamus, if care be taken to avoid the corpus striatum, do not cause any rise. Experiments on the cortex cerebri show that only the posterior part has any thermic influence. Lesions of the cerebellum do not alter the body temperature.

JOSEPH LISTER, Chairman.

REPORT OF THERAPEUTIC COMMITTEE.

HYPNOTICS.

DURING the past year the Therapeutic Committee have continued the investigation on the therapeutical effects of hypnotics, which formed the subject of a report in the *BRITISH MEDICAL JOURNAL* of last year. The drugs selected for investigation were sulphonal, paraldehyde, urethan, and chloralamid.

The report this year deals only with sulphonal and chloralamid, and is the result of investigations undertaken by Drs. Charles Angus, William Bullock, and John Gordon, under the direction of Professor T. Cash, F.R.S., of Aberdeen.

The Committee also present a preliminary report on the action of nitrites of ethyl and sodium in dyspnoea of various origin. The great part of this investigation has been done by Professor Leech, of Manchester, and by gentlemen under his direction, namely, Drs. J. Hervey Jones, Alex. Duncan, and A. E. Pownall.

SULPHONAL.

Melancholia.—In three cases of melancholia sulphonal was given in doses of 40 to 45 grains. Sleep followed in from a quarter of an hour to one hour, and lasted from six to nine hours. In one case it was sound and refreshing and in another interrupted, and in the third continuous but not refreshing. In one case the patient had not slept for seventy-two hours. The after-effects noticed were: Giddiness in two of the cases, drowsiness and confusion of mind, inco-ordination of gait in two cases. In one of these cases (acute suicidal mania) sulphonal was given over thirty times, and always with good effect. Chloralamid was not so beneficial in this case, the sleep being more interrupted. In another of the cases (melancholia) bromides in 20-grain doses produced little or no effect. In the third case (acute suicidal mania) chloralamid in 40-grain doses produced a better effect than sulphonal.—(Dr. Charles Angus, Royal Lunatic Asylum, Aberdeen.)

Various Diseases.—A case of insomnia in *Dyspepsia* with general debility and emaciation, in a middle-aged woman, was treated with sulphonal in 20 and 40-grain doses; in an hour to an hour and a half a dreamless refreshing sleep was produced and lasted for five to six hours and a half. Insomnia had lasted many months. The patient slept for twelve hours after the 40-grain dose, and she suffered from pronounced giddiness and headache, with vomiting and a feeling of faintness.

In a case of *Heart Disease* (mitral and aortic regurgitation with dropsy) in a man, aged 40, sulphonal was given in 10, 20, 30, and 40-grain doses. A ten-grain dose produced only a slight sleep; a 20-grain dose, in an hour and a half, produced sleep lasting four to six hours; the dose of 30 grains caused profound sleep for three hours, drowsiness for four hours, followed by three hours more refreshing sleep; after 40 grains the patient slept eight hours, and was drowsy the whole of the next day. There was no giddiness, headache, or other bad after-effect.

In a case of *Mitral Regurgitation* with bronchitis and emphysema, in a patient aged 72, the patient rarely slept more than two hours at a time. Ten grains of sulphonal had no effect; 15 grains produced a sleep lasting five hours; 20 grains produced sleep lasting six to seven hours. Sleep was easy and refreshing, and came on in from one to two hours. Dyspnoea was relieved. Drowsiness was noticed after the 20-grain dose. In the same patient 10 grains of chloralamid induced sleep lasting five hours, one hour after administration.

In a case of *Cancer* of the lung in which insomnia was due to a violent cough and had lasted three months, morphine gave only slight relief, and chloralamid in 20 and 30-grain doses had no effect. Sulphonal in 40 and 60-grain doses produced in half an hour sleep lasting from thirty minutes to two hours and a half. Both the pain and the cough were relieved, but drowsiness was a well-marked after-effect.—(Dr. W. Bullock, Aberdeen.)

CHLORALAMID.

Cardiac Disease.—In two cases of dilated heart with dropsy, in which insomnia had lasted some months, chloralamid was given. In one case 25 grains produced in half an hour a

ACTION OF NITRITES¹ IN RELIEVING DYSPNOEA. I.—*In Organic Lung Disease, with or without Cardiac Disease.*

No.	Nature of Disease.	Age of Patient.	Remedies previously used for Dyspnoea.	Their Effect.	Dose of Nitrite.	Frequency of Administration and Length of Treatment.	Result.	Bad Effects.
1	Bronchitis and emphysema with spasmodic attacks; mitral disease	38	Alcohol	—	Ethyl nitrite 5jss	Three doses at intervals of ten minutes on three successive days	After the first dose dyspnoea relieved in seven minutes, after the third dose relieved for the rest of the day	None.
2	Double mitral disease; secondary renal, and pulmonary congestion	44	Diffusible stimulants, digitalis, morphine, pot. iodid.	Morphine gave most relief	Ethyl nitrite 5j Nitrite of sodium gr. v	Some months Two doses	Slight relief for a few minutes No relief	None. None.
3	Bronchitis with asthmatic attacks	70	Tr. camph. co., senega, inhalations, amyl-nitrite	Effect soon lost	Ethyl nitrite 40 minims every three hours	Seven days, and at intervals for six months	Relief for only thirty minutes, but the result varied	None.
4	Chronic bronchitis	70	Ordinary bronchitic remedies	None	Ethyl nitrite 60 minims every four hours	Five weeks	Relief obtained in fifteen minutes, and lasted an hour; after five weeks the drug lost its effect	None.
5	Bronchitis with asthmatic attacks, dilatation of right side of heart	65	Amyl-nitrite inhalations	No effect	Ethyl nitrite 60 minims three times a day	Four weeks	Slight relief in fifteen minutes, of very variable duration	None.
6	Bronchitis and emphysema	36	Stramonium cigarettes and lobelia	No marked relief	Ethyl nitrite 5jss	Some weeks	Greater relief than from any previous remedy; in half an hour patient could walk upstairs easily	None.
7	Bronchitis and emphysema, hæmoptysis, phthisis (?)	—	None	—	Ethyl nitrite 5j	When dyspnoea was troublesome fourteen days	Relief in five to ten minutes, lasting some hours; drug did not lose its effect	Occasional nausea.
8	Bronchitis and emphysema with severe attacks of dyspnoea	36	Stramonium, lobelia, and many other remedies	Very little relief obtained	Ethyl nitrite 5j	Given for the attacks two to three times weekly for six weeks to two months.	Relief in two to three minutes; in five to ten minutes rhonchi ceased to be heard over chest; drug did not lose its effect	Beating sensation in the head, sometimes severe; patient a neurotic female.
9	Bronchitis with asthmatic attacks chiefly at night, lasting one to three hours; food excites attacks	37	Various remedies	—	Ethyl nitrite 5j; sodium nitrite gr. 1½	Two to three weeks	Both drugs relieved the dyspnoea in a few minutes, the ethyl nitrite being the most effective; bronchitis and dyspnoea much better in three weeks	Sodium nitrite caused a feeling of contraction at epigastrium; but not the ethyl nitrite.
10	Bronchitis with great dyspnoea on exertion; cardiac dilatation	41	None	—	Ethyl nitrite 5jss	Some time	During severe dyspnoea, while ascending stairs, the drug relieved in five minutes; in fifteen minutes so completely that he could ascend stairs without difficulty	None; did not lose its effect.
11	Bronchitis	42	Ordinary stimulants and anti-spasmodics	Not immediate	Ethyl nitrite 40 minims	Occasionally three or four times daily if necessary; a few days	Relief obtained in a few minutes, lasting several hours; wheezing removed by drug	None; drug did not lose its effect.
12	Bronchitis and emphysema; slight cardiac dilatation; paroxysmal dyspnoea	55	Hinrod's powder, stramonium, etc.	Very slight	Ethyl nitrite 5j; sodium nitrite 2 grains	For the attacks during two months	Two doses of ethyl nitrite relieved dyspnoea in ten minutes, relief lasting twenty-four hours; sodium nitrite acted just as well; both drugs acted well in the slight attacks	None; drugs did not lose their effect.
13	Bronchitis in angina pectoris without organic cardiac disease	50	Amyl nitrite, iso-butyl nitrite	Relief of the dyspnoea and the angina	Ethyl nitrite 5j; sodium nitrite ½ gr. to 4 grs.	Five days	Not much relief	None after ethyl nitrite; severe headache and fullness in head after 4 grains of sodium nitrite.
14	Bronchitis with spasmodic attacks of asthma in winter	25	?	?	Ethyl nitrite 5j, sodium nitrite 2 grs.	Three doses of ethyl nitrite for the attack at intervals of five minutes; two doses of sodium nitrite at an interval of half an hour	Not much effect from ethyl nitrite; much more relief from the sodium nitrite.	—

II.—*In Spasmodic Asthma, with or without Bronchitis.*

15	Asthma for several years, acute bronchitis	21	Ether and belladonna	Slight relief	Ethyl nitrite 5j	Every three hours for four days	Relief after second dose; relief continued during administration of drug; night attacks of dyspnoea have disappeared.	No loss of effect; cyanosis after four or five doses, gradually disappearing on reducing dose.
16	Asthma with severe bronchitis; partial collapse	20	Ether and belladonna	No effect	Ethyl nitrite 5j	Every three hours for four days	Relief after first dose; in six hours dyspnoea relieved markedly; permanent relief on continuing the drug	None; no loss of effect.
17	Asthma and bronchitis	35	Lobelia and various remedies	No effect	Ethyl nitrite 5j to 5jss	Two to three times daily for a week	Relief in a few minutes after administration, but drug appeared to lose its effect	Drug had to be discontinued for nausea, which came on fifteen to thirty minutes after taking it.
18	Asthma and bronchitis, cardiac dilatation	52	Not known	—	Ethyl nitrite 5j	Every four hours for seven days	In twenty minutes dyspnoea relieved for two hours after each dose; drug did not lose its effect	None.

¹ Ethyl Nitrite was administered in a 3 per cent. solution in absolute alcohol. Dose 5j to 5j. Where ethyl nitrite is written in the tables, this solution is meant. Sodium Nitrite was given in solution in doses of 1 to 3 grains. In one case 4 grains and in another 5 grains were given.

ACTION OF NITRITES IN RELIEVING DYSPNŒA—continued. II.—In Spasmodic Asthma, with or without Bronchitis—continued.

No.	Nature of Disease.	Age of Patient.	Remedies previously used for Dyspnœa.	Their Effect.	Dose of Nitrite.	Frequency of Administration and Length of Treatment.	Result.	Bad Effects.
19	Spasmodic asthma	16	Ether, belladonna, Himrod's powder	Very slight	Ethyl nitrite 3j	Every three hours for three days	Relief in half a day; gradual improvement under drug; drug did not lose its effect	None.
20	Spasmodic asthma "from bronchial catarrh"	29	Belladonna, pot. iod., pot. brom.	Slight relief; not immediate	Ethyl nitrite 3j followed in fifteen minutes by 3ss	These two doses given	Breathing easier in ten minutes, when dyspnœa returned	Throbbing in head and nausea, so that drug had to be discontinued.
21	Spasmodic asthma	34	Belladonna, ammonia	No immediate relief	Ethyl nitrite 3j	Every one or two hours for the attacks	Relieved after third dose; relief not permanent, as drug appeared to lose its effect	Faintness after first dose, but not after the later ones.
22	Spasmodic dyspnœa, (?) asthma	29	Various remedies	No relief	Sodium nitrite 3 grains	Every four hours for three weeks	No relief; ethyl nitrite also gave no relief	None.
III.—In Cardiac Dyspnœa.								
23	Cardiac dyspnœa, with no organic disease; death from hemiplegia during third attendance	75	Strophanthus, digitalis, etc.	Strophanthus steadied cardiac action, but did not relieve dyspnœa	Ethyl nitrite 3j	Every four hours for a week on three occasions	Shortly after administration breathing relieved and heart more regular	None.
24	Aortic regurgitation, with dyspnœa	36	Ammonia	No relief	Nitrite of ethyl 3j doses; sodium nitrite 1 grain to 1½ and 2 grains	Several weeks	Ethyl nitrite relieved very slightly, if at all; sodium nitrite gave relief to pain and dyspnœa	Disagreeable eruptions from ethyl nitrite, no bad effects from sodium nitrite; it did not lose its effect.

refreshing sleep of six hours, with no bad after-effects. The drug was frequently given to this patient, with always a beneficial result.—(Dr. John Gordon.)

In the second case, 30 and 40 grains produced in two to four hours a deep and refreshing sleep lasting two to twelve hours. Drowsiness was pronounced after the 40-grain dose. This patient was also treated with strophanthus.—(Dr. W. Bullock, Aberdeen.)

In a case of *Phthisis* in a man of middle age, insomnia had lasted for six weeks; 30 grains of chloralamide produced in half an hour a tranquil sleep lasting five hours, with no bad after-effects. In this case several drugs had been tried; 15 grains of sulphonal and 13 grains of ammonium bromide produced no effect, 1½ grain of opium produced a restless sleep, and 15 grains of chloral with 30 grains of ammonium bromide produced about an hour's sleep.—(Dr. John Gordon.)

In a case of *Neuralgia* in a young woman, in whom insomnia had lasted seventy-two hours in consequence of neuralgia, antifebrin in 5-grain doses and quinine in 3-grain doses were tried, and produced no effect. A 30-grain dose of chloralamid produced in forty minutes a sound and refreshing sleep of eight hours' duration, no bad after-effects being noticed.

In a case of *Acute Melancholia* in a young married woman in whom insomnia had lasted for forty-eight hours, sulphonal in 40-grain doses produced five to eight hours' sleep, while 35 grains of chloralamid in eighty minutes produced a light sleep lasting only one hour, giddiness and vomiting ensuing, with a feeling of constriction in the back and the thighs and legs.—(Dr. Charles Angus.)

W. T. GAIRDNER, Chairman.

REPORT OF COMMITTEE ON THE EXCLUSION OF IRISH AND SCOTCH DIPLOMATES FROM HOSPITAL AND OTHER APPOINTMENTS.

In accordance with the resolution of the Council on the exclusion of Scotch and Irish diplomates from Scotch and Irish universities and colleges from certain hospital appointments, the Committee have held two meetings. Considerable delay has necessarily occurred in investigating the question.

The Chairman undertook to correspond with the various public hospitals, infirmaries, and medical charities in Great Britain. The Committee are aware that in Ireland such restrictions as formerly existed on the holding of Irish medical

appointments by English and Scotch diplomates have long since been removed.

In reply to the Chairman's letters, the information tabulated as follows has been obtained: Number of medical charities applied to, 268; of these, 28 have not replied, 130 admit Irish and Scotch diplomates, 89 do not state the qualifications necessary, 6 admit Irish and Scotch diplomates in surgery, while 15 state in their by-laws that diplomates of the Colleges of Physicians and Surgeons of London only are eligible.

The Committee consider that it is unnecessary to continue the inquiry further.

The Committee believe that the restrictions at present existing were not intended to act unfairly, but were originally meant to provide what the authorities of the various hospitals, etc., believed to be securities that none but properly qualified practitioners shall be appointed as officers. The exclusion of persons holding qualifications which in the profession are known to be of the best possible character was probably owing to the ignorance of those who originally drafted the rules, and probably the restrictions are maintained for similar reasons.

W. T. GAIRDNER, *pro* Chairman.

REPORT OF COMMITTEE APPOINTED TO CONSIDER A TEACHING UNIVERSITY FOR LONDON.

THIS subject has received the serious attention of a Committee of Council, appointed during the annual meeting of the Association at Birmingham. The Committee, after the publication of the third revised scheme of the London University, addressed a letter to the Lord President of the Council on the subject, informing his lordship that in the opinion of the Committee "the proposals embodied in the draft charter of the London University were unsatisfactory as far as the medical faculty is concerned, since they do not afford facilities by which London medical students can obtain degrees in Medicine and Surgery corresponding to those obtainable at other Universities." Convocation subsequently threw out this scheme, and the Lord President having determined to submit the charter prepared by University College and King's College, London, to the Lords of the Privy Council, the Association was called on to give its opinion on this scheme to the Privy Council. The Committee met and adopted the following resolutions, which were forwarded to

the Privy Council:—1. That the establishment of a university, with powers to grant degrees and licences in Medicine and Surgery, to meet the requirements of the London medical schools, is urgently required. 2. That the new university should include as constituent bodies the medical schools, as scheduled and recognised by the University of London, and that these schools should rank equally as colleges. 3. The third resolution, which was carried by the casting vote of the Chairman, was to the effect, that candidates for degrees in Medicine and Surgery in the new university should reside during a part of their period of study in the metropolis. 4. That the name of the present University of London should be changed to the "Imperial, or the British University," and that the new University should be called the University of London. These resolutions were forwarded to the Privy Council, and at the same time the Chairman of the Committee expressed his own views on the subject more fully to the Lord President in Council. The Lord President, in acknowledging the receipt of these communications, requested that twenty-five printed copies should at once be forwarded to the Council, which request was complied with on June 20th.

N. C. MACNAMARA, Chairman.

REPORT OF THE COMMITTEE ON HYPNOTISM.

THE Committee appointed to investigate the subject of hypnotism regret that the time at their disposal has been too limited to allow of their completing their researches into a subject of such width and complexity. They are, therefore, as yet unable to express any definite conclusions to the Council. So far as their investigations have gone they seem to prove that the phenomena of hypnotism are such as to favour the belief that it may prove of service as a therapeutic agent when employed legitimately by properly qualified scientific persons.

They have no doubt, and they desire to give emphatic expression to this conviction, that the use of hypnotism by persons who are not so qualified, or without due precautionary restrictions, is greatly to be deprecated, and might properly be limited by legal enactment.

The Committee would suggest their reappointment.

FRED. NEEDHAM, M.D. Chairman.

REPORT OF COMMITTEE ON THE SCIENTIFIC INVESTIGATION OF THE CONDITION OF SCHOOL CHILDREN.

YOUR committee has seen 50,027 children in schools. Much interest has been taken in the investigation, and it is hoped that the work in hand will establish many points of importance to the profession; detailed statistics are being prepared. The large number of cases noted may enable us to determine with some accuracy the value of the signs observed in their respective correlation with mental dulness, low nutrition and other defects. It appears that the nerve-condition of pupils varies greatly in different schools, while certain defects in development appear to be local in different districts around London. Defects and diseases of the eye are common; the number of cripples will be determined. Children definitely exceptional in mental status are about 1 in 250: the percentage of those feeble in development and brain power will be determined: epileptics appear to be about 1 to 1,000 of the school population.

GEORGE H. SAVAGE, Treasurer to Committee.

FRANCIS WARNER, Hon. Secretary.

BIRMINGHAM MEDICAL BENEVOLENT SOCIETY.—The sixteenth annual report just published shows that this Society fully maintains its useful function of affording help to those of its members or their widows and families who are in need of assistance. During the year sixteen annuitants received help from the Society, the yearly value of the grants ranging from £40 to £20, and the total sum expended in grants was £460. The invested funds now amount to £11,267. At the annual meeting Mr. H. M. Morgan, of Lichfield, was elected President, Sir James Sawyer and Dr. Savage Treasurers, and Mr. W. F. Haslam Secretary.

SPECIAL CORRESPONDENCE.

LEEDS.

Leeds Workpeople's Hospital Fund.—Treatment of Cancer of the Stomach.—Report of Medical Officer of Health.

A SACRED concert on Woodhouse Moor, in aid of the medical charities, afforded pleasure to about 12,000 or 14,000 people of all ranks on Sunday afternoon. From speeches by Alderman Spark and other gentlemen it appeared that the contributions to the Workpeople's Hospital Fund amounted in 1888 to £4,326, in 1889 to £5,170, and in 1890 to £5,261. Towards these totals the North West Ward concerts produced in 1889 £71, and in 1890 £56 net.

In the Leeds Infirmary at the present time are two interesting cases illustrating the treatment of cancer of the stomach. In one case pylorotomy was successfully performed three weeks ago, the patient having recovered without a bad symptom; whilst in the other case, the disease involving the whole of the stomach, jejunostomy was performed, and through the opening in the jejunum the patient is being fed. It is said that this is the first case of successful pylorotomy which has been performed in England by the ordinary method of suture, the only other case being the one by Dr. Rawdon, where apposition was effected by decalcified bone plates.

The annual report of the medical officer of health, Dr. J. S. Cameron, has just been presented to the Sanitary Committee. The annual death-rate for 1890 was 22.7, or 1.53 in excess of the previous five years. The death-rate from the seven common infective diseases was slightly below the rate of the five years, but that from bronchitis, pneumonia, and pleurisy was 5.32 as against 3.92 for the previous years. The report drew attention to the fact that though the houses erected at the present time are well built and in airy situations, sufficient attention was not given to thorough draught. The report stated that the whole question of accommodation for the working classes, and the putting in force of the Act of 1890 would come up for consideration with a report which the medical officer proposed to present at an early date.

CORRESPONDENCE.

THE IRISH DISPENSARY DOCTOR.

SIR,—As one of a class which largely supports the BRITISH MEDICAL JOURNAL, I ask for a little space to bring under notice one of the many grievances of the Irish dispensary doctor. He receives, on an average, £100 a year to attend the poor of his district. As the area is large a horse, car, and groom are essential. This means at least a deduction of £60; so that really all we receive for our services is £40 a year. It is quite obvious that this is entirely an inadequate sum for the labour entailed. The districts are large—rarely under 12 miles in length, by the same number or more in width; so that scarcely a day passes but we have a few visits to make, and often at night we have to rise, as we are bound to attend a visiting ticket whenever presented. Besides, we have to attend at an appointed station at least three days in each week for two hours each day to give advice and medicine to the poor; so that our days are well occupied, and we have little time for aught but to mourn over the sad fatality which made us take up our present position. Fifteen shillings a week is, indeed, nice remuneration for men invested with great responsibility, and who are liable at all hours to make long journeys and to have a clear head and a steady hand. How long will we continue to give our services at less than the remuneration of a healthy labourer? So long as we have no association. Let us form a union; herein is the remedy. We are a numerous body, and if we pulled together and in sympathy, the profession, the journals, and the medical schools would support us; and what their influence can do the favours that have been granted to army surgeons amply prove.—I am, etc.,

A COUNTRY DISPENSARY DOCTOR.

interest in Volunteering, and he was surgeon to the local Engineer Battalion, and was accustomed to give special lectures to the corps on ambulance work, while he also held the post of surgeon to the Boys' and Girls' Hospital under the old *régime*. Possessed of marked literary and fine musical tastes, Dr. Hall was an active member of the Choral Union, Philharmonic Society, and other kindred bodies. He had a good knowledge of harmony and counterpoint, and on the 'cello especially he was no mean performer.

Dr. Hall was a man of an amiable and unobtrusive disposition, and was quietly and gradually growing into esteem as a painstaking and conscientious general practitioner and surgeon. Naturally rather reserved and retiring, and much devoted to his invalid mother, he took little interest in public affairs.

Dr. Hall was unmarried, and was 39 years of age. Much regret is felt at his being snatched away in the prime of life and on the threshold of what promised to be a successful career.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF OXFORD.

BACTERIOLOGY.—A new department for the study of bacteriology has been inaugurated by the Regius Professor of Medicine, who has appointed Dr. Menge, of the University of Munich, to take charge. Several students are working at the subject practically, and a larger class, consisting of about twenty practitioners, has been formed to attend Dr. Menge's demonstration.

SECOND M.B. EXAMINATION.—The following have passed:

C. P. Lovell, St. John's College; A. B. Roxburgh, Exeter College; F. H. Burton-Brown, Magdalen College; A. M. Passage, Magdalen College; G. Jones, Oriel College; E. J. Moore, Christ Church; L. E. Parkhurst, Jesus College; G. E. Pritchard, Hertford College; E. T. Withington, Balliol College.

FIRST M.B. EXAMINATION.—The following have passed in Anatomy and Physiology:

A. Butler-Harris, Trinity College; G. J. Conford, Christ Church; H. Cooper, Queen's College; H. R. Hickman, Christ Church; L. L. Jenner, Trinity College; W. J. Maurice, Keble College; R. J. Porter, Pembroke College; F. C. Poynder, St. John's College; W. Ramsden, Keble College; E. H. Saunders, St. John's College; F. W. Walton, Keble College.

UNIVERSITY OF EDINBURGH.

GRADUATION IN PUBLIC HEALTH.—The following gentlemen have passed the examination necessary for the degree of B.Sc. in Public Health, and will be admitted to graduation on August 1st next:

R. Cattle, M.B.; C. C. Douglas, M.B.; H. C. Gordon, M.B.; A. C. Houston, M.B.; J. Smith, M.B.; H. M. Wilson, M.D.

UNIVERSITY OF ABERDEEN.

DR. WILLIAM FINLAY, M.A., has been appointed after competitive examination to the Thomson Fellowship in Aberdeen University.

THE VACANT CHAIR.—The only candidates now in the field for the chair of Practice of Medicine are Dr. Finlay, London; Dr. Angus Fraser, Aberdeen; Dr. Alex. Macgregor, Aberdeen; Dr. Middleton, Glasgow; Dr. Blaikie Smith, Aberdeen. Memorials are being signed by their former pupils in favour of each of the local candidates. It is rumoured that the appointment will probably be made before Parliament rises.

INSPECTION OF THE AMBULANCE CORPS.—The University Volunteer Medical Staff Corps were inspected at the Recreation Grounds recently, by Deputy Surgeon-General Irwin, Principal Medical Officer for the North British District. Surgeon A. Macgregor, M.D., was in command, and the other officers present were Surgeon Scott-Riddell, Quartermasters A. A. D'Lessert, and Chaplain Rev. James Smith; Surgeon-Major Macguibbard and Commander Davies of the Coast Guard were also present in uniform. Sergeant-Instructor Humphries, 3 staff-sergeants, 3 sergeants, and 84 rank and file were on parade. The equipments were minutely inspected, and the men were put through the various drills and exercised in giving assistance to supposed wounded men in the field. It is understood that the inspecting officer was much satisfied with the condition of the corps.

UNIVERSITY COMMISSION ORDINANCES.—Within the last month the Universities Commission have issued draft ordinances dealing with regulations for degrees in Science, Degrees in Medicine in Aberdeen No. 1, regulations for degrees in Arts, and for the constitution of Boards of Studies: regulations for the General Council. These have been sent down to the University Court, General Council, and Students' Representative Council, and are now being discussed by committees of these bodies, who will report in course of the early autumn.

EXTENSION OF MARISCHAL COLLEGE.—The joint committee of the University Court and the Senatus have approved of plans for the extension of Marischal College, and the Town Council have passed them over to their Improvements Committee for consideration. The Medical Faculty is to be fully accommodated with laboratories, lecture rooms, and space for museums. Rooms are to be provided for the Law Faculty, and for the classes in English history and literature. The old Chemical Department is made available for agriculture, with a laboratory, lecture room, museum, and workshops. Within the buildings it is proposed to have a students' room, professors' room, two secretaries' offices, University Court Room, a Faculty room, inquiry office, and two dwelling-houses for the sacrist. It is intended to acquire the Greyfriars Church for a graduation and examination hall. The total cost is estimated at £61,450, of which £27,450 is put down for the purchase of buildings. The University authorities suggest that the Town Council should contribute £13,800 to the cost of acquiring the buildings, and that would make the outlay to the University £47,650. It is hoped that the whole may be completed before the quatuor-centenary of the University in 1894.

CLOSE OF SESSION.—The summer session of the medical classes closed on July 10th. The professional examinations began on the 11th, and will continue for a fortnight.

EXAMINING BOARD IN ENGLAND BY THE ROYAL COLLEGES OF PHYSICIANS AND SURGEONS.—The following gentlemen passed the Second Examination of the Board in Anatomy and Physiology at a meeting of the Examiners on July 8th:

J. Griffiths and J. G. Williamson, students of Edinburgh University; E. Michels, of Berlin University; A. S. Barrow and W. R. Trythall, of Middlesex Hospital; C. M. Perry, of King's College and Edinburgh University; R. M. Wood, of King's College; R. H. Fletcher, H. P. Miles, and J. I. Johnson, of University College; F. C. James, A. W. V. Clarke, and W. G. Stone, of St. Thomas's Hospital; J. P. O'Hea, C. J. MacDonald, and S. E. Rigg, of St. Bartholomew's Hospital; and H. W. Beach, of Guy's Hospital.

Passed in Anatomy only:

S. S. Wallis, T. M. Nicholson, F. A. Evison, and J. W. Sweetlove, of Guy's Hospital; W. Royden and M. N. J. Rigby, of St. Bartholomew's Hospital; M. J. Longinotto, of St. Thomas's Hospital; and A. H. P. Crosby and A. T. Davey, of Middlesex Hospital.

Passed in Physiology only:

G. S. S. Marshall, of Middlesex Hospital; W. A. B. Smith, of King's College; and A. M. Cowie, of McGill College and St. Thomas's Hospital.

Passed in Anatomy and Physiology on July 9th:

L. Feaver, G. Cawley, W. J. Codrington, and A. Kennington, of St. Bartholomew's Hospital; J. S. Pearce, J. F. W. Waters, and F. W. Lewis, of Middlesex Hospital; J. H. Bennett, F. W. Barrett, E. P. R. Treaskis, and J. C. Spillane, of London Hospital; J. Phillips, of University College; C. R. Lucas and W. H. Peake, of Guy's Hospital; W. R. Hanbury, of St. Thomas's Hospital; and E. V. R. Fookes, of Charing Cross Hospital.

Passed in Anatomy only:

V. Graham, W. Pomeroy, A. D. Cowburn, and S. B. Stedman, of St. Thomas's Hospital; T. Rhind and P. Best, of University College; L. Bensted, W. M. Price, and E. S. Roberts, of Guy's Hospital; T. Barker, of St. Bartholomew's Hospital; E. W. Gregor, of Middlesex Hospital; P. L. Watkin-Williams, of Middlesex Hospital and Mr. Cooke's School of Anatomy and Physiology; and S. M. Meyrick, of St. Mary's Hospital.

Passed in Physiology only:

B. J. Collyer, of St. Bartholomew's Hospital; and L. T. Wells, of St. Mary's Hospital.

Passed in Anatomy and Physiology on July 10th:

F. Pershouse, of St. Thomas's Hospital; R. Ballard, of St. Bartholomew's Hospital; J. B. Bayfield, of King's College; L. C. Bean, of University College; and W. G. Mumford, of Guy's Hospital.

Passed in Anatomy only:

L. A. Williams, L. J. A. de Gèbert, T. H. P. Morris, and H. Williams, of Middlesex Hospital; J. S. Williams, of London Hospital; A. J. Campbell and G. R. Harcourt, of St. Thomas's Hospital; J. E. Manlove, W. E. Lee, and F. E. Feilden, of St. Bartholomew's Hospital; E. G. Annis, H. Hewetson, and A. J. Mathison, of Guy's Hospital; Reginald Willie Lake and A. M. Watts, of University College; A. Barnes, H. W. Whitley, and W. J. Robertson, of Charing Cross

Hospital; E. Shepherd and John Grech, of St. Mary's Hospital; and A. W. Austen, of Westminster Hospital.

Passed in Physiology only:

W. C. Pitt and R. Serjeant, of Guy's Hospital; W. H. Armit, H. A. Andrews, A. A. Humphrys, and H. C. Wimble, of St. Bartholomew's Hospital; C. H. Ackland, of Charing Cross Hospital; A. E. Syme, of Melbourne University and Mr. Cooke's School of Anatomy and Physiology; Alick C. Strand and H. J. W. Barlee, of Middlesex Hospital; B. Saul, of Charing Cross Hospital and Owens College, Manchester; H. A. Madge and E. J. Rowbotham, of Charing Cross Hospital; S. E. Price, of London Hospital and Mr. Cooke's School of Anatomy and Physiology; W. S. Newton, of London Hospital; C. C. Parsons, J. W. Summerhayes, J. E. B. Wells, and H. J. Kinahan Bamfield, of St. Mary's Hospital; and H. M. Harrison, of St. Thomas's Hospital.

Passed in Anatomy and Physiology on July 13th:

A. K. Matthews, Frank Cowan, and T. Burrow, of Guy's Hospital; T. O. Halliwell and A. L. Fuller, of St. Thomas's Hospital; T. G. Wake-ling, of St. Bartholomew's Hospital; F. J. Clowes, of St. Bartholomew's Hospital and Mr. Cooke's School of Anatomy and Physiology; and G. D. Kettlewell, of London Hospital.

Passed in Anatomy only:

E. D. J. O'Malley, of Middlesex Hospital; J. N. Hall and R. D. Evans, of St. Mary's Hospital; P. V. Denne, of Westminster Hospital and Mr. Cooke's School of Anatomy and Physiology; David Evans, of University College; W. C. Hutley and A. C. B. Casson, of St. Bartholomew's Hospital; and E. R. Badcock, of London Hospital.

Passed in Physiology only:

S. R. Hallam, of St. Thomas's Hospital; Frank Romer, of St. George's Hospital; and H. Harrison, of London Hospital.

PUBLIC HEALTH

AND

POOR-LAW MEDICAL SERVICES.

HEALTH OF ENGLISH TOWNS.

IN twenty-eight of the largest English towns, including London, 5,719 births and 3,029 deaths were registered during the week ending Saturday, July 11th. The annual rate of mortality in these towns, which had declined in the preceding six weeks from 30.9 to 17.7 per 1,000, further declined to 16.8 during the week under notice. The rates in the several towns ranged from 12.4 in Norwich, 12.8 in Sheffield, 13.2 in Derby, and 13.6 in Bristol to 20.4 in Liverpool and in Cardiff, 21.3 in Salford and in Oldham, and 21.7 in Preston. In the twenty-seven provincial towns the mean death-rate was 16.9 per 1,000, and slightly exceeded the rate recorded in London, which was 16.7 per 1,000. The 3,029 deaths registered during the week under notice in the twenty-eight towns included 310 which were referred to the principal zymotic diseases, against 339 and 309 in the preceding two weeks; of these, 98 resulted from whooping-cough, 78 from diarrhoea, 66 from measles, 28 from diphtheria, 22 from scarlet fever, 17 from "fever" (principally enteric), and one from small-pox. These 310 deaths were equal to an annual rate of 1.7 per 1,000; in London the zymotic rate was 2.0, while in the twenty-seven provincial towns it averaged 1.5 per 1,000. No death from any of these principal zymotic diseases was recorded in Bristol, Birkenhead, and Bolton, while in other towns the zymotic death-rates ranged upwards to 2.2 in Liverpool, 2.4 in Preston, 2.5 in Plymouth, and 2.8 in Sunderland. Measles caused the highest proportional fatality in Plymouth, Cardiff, Preston, and Sunderland; and whooping-cough in Manchester and Plymouth. The mortality from scarlet fever and from "fever" showed no marked excess in any of the twenty-eight towns. Of the 28 deaths from diphtheria in these towns, 21 occurred in London. One fatal case of small-pox was recorded in London, but not one in any of the twenty-seven provincial towns; 3 small-pox patients were under treatment in the Metropolitan Asylum Hospitals on Saturday, July 11th. The number of scarlet fever patients in the Metropolitan Asylum Hospitals and in the London Fever Hospital on the same date was 857, against 891 and 866 at the end of the preceding two weeks; 79 new cases were admitted during the week under notice, against 76 and 91 in the previous two weeks. The death-rate from diseases of the respiratory organs in London was equal to 2.3 per 1,000, and was slightly below the average.

HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday, July 11th, 837 births and 484 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had declined in the preceding five weeks from 25.3 to 20.6 per 1,000, further fell to 18.8 during the week under notice, but exceeded by 2.0 per 1,000 the mean rate during the same period in the twenty-eight large English towns. Among these Scotch towns the lowest rates were recorded in Perth and Aberdeen, and the highest in Paisley and Glasgow. The 484 deaths in these towns included 44 which were referred to the principal zymotic diseases, equal to an annual rate of 1.7 per 1,000, which corresponded with the mean zymotic death-rate during the same period in the large English towns. The highest zymotic death-rates were recorded in Edinburgh and Glasgow. The 235 deaths registered in Glasgow included 10 from measles, 7 from whooping-cough, and 6 from diarrhoea. The death-rate from diseases of the respiratory organs in these towns was equal to 3.0 per 1,000, against 2.3 in London.

HEALTH OF IRISH TOWNS.

IN sixteen of the principal town districts of Ireland the deaths registered during the week ending Saturday, July 4th, were equal to an annual rate of 21.3 per 1,000. The lowest rates were recorded in Cork and Wexford, and the highest in Armagh and Limerick. The death-rate from the principal zymotic diseases averaged 1.0 per 1,000. The 143 deaths re-

gistered in Dublin were equal to an annual rate of 21.1 per 1,000 (against 25.1 and 17.9 in the preceding two weeks), the rate for the same period being 16.8 in London and 16.7 in Edinburgh. The 143 deaths in Dublin included 9 which were referred to the principal zymotic diseases (equal to an annual rate of 1.3 per 1,000), of which 6 resulted from whooping-cough and 3 from different forms of "fever."

DOUBTFUL writes to ask who should have the fee in the following case: A. and B. are union medical officers of adjoining districts, and each acts as substitute for the other. During A.'s absence B. is called to A.'s patient to certify to lunacy. On A.'s return B. thinks A. should have the fee, A. thinks B. is entitled to it.

. We are not aware of any general rule which can be made applicable to this case, and if there is no understanding between the parties the fee may be very properly divided.

AWARDS TO PUBLIC VACCINATORS.

PUBLIC VACCINATOR.—A large number of vaccination grants have been made throughout the country from time to time, and paid by the County Councils under the certificate of the Local Government Board. But there has been much greater delay under the new arrangement than there formerly was, as the Local Government Board only forward the necessary certificates to the County Councils "from time to time, when," in the words of their circular letter of October 16th, 1889, "the Board are in a position to make them in respect of a sufficient number of unions, wholly or partially situate in the country, to render it desirable that they should be forwarded to the Council." Hence payment of awards have sometimes not been made until upwards of a year after the Government Inspector's visit. We would suggest application direct to the County Council or to the Local Government Board in case of undue delay.

HOSPITAL AND DISPENSARY MANAGEMENT.

BRADFORD EYE AND EAR HOSPITAL.

THE annual report for 1890 states that 3,462 cases of disease of the eye and 490 cases of diseases of the ear were treated; 1,935 came from Bradford, and 2,017 other places. The attendance of out-patients was 14,740; the number of in-patients 424; the average stay in the hospital was 17.72 days. Four hundred and thirty-two major operations were performed, of which 70 were extraction of sessile cataract. In nearly all these cases preliminary iridectomy was done about six weeks before the extraction. There was not a single case of suppuration after operation. The mastoid antrum was opened with Schwartze's chisel five times. The expenditure was £1,983.

SALFORD INFECTIOUS HOSPITALS.

THE annual report of the hospital department of the county borough of Salford for the year 1890, prepared by the Medical Superintendent, Dr. J. W. Mullen, has recently been issued. It appears from it that there was a marked diminution in the number of cases coming under the notice of the department in 1890 as compared with 1889, the total number of admissions being 939, as against 1,127. Dr. Mullen believes that the sentimental objection to a fever hospital is rapidly giving way, especially among the wage-earning classes, who are beginning to realise the advantages which such a hospital, with its appliances and trained nurses, affords, especially in the management of infectious disease in children. Three probationer nurses contracted enteric fever during the year, and one probationer nurse died of diphtheria. The report is illustrated by charts of the incidence of infectious diseases, and by a map showing the position of houses from which cases of infectious disease had been removed. The chief diseases which had to be dealt with were scarlet fever, diphtheria, and enteric fever; 30 cases of measles were treated during the year. There was a marked decrease in the number of cases of typhus fever and small-pox.

HOSPITAL FOR EPILEPSY AND PARALYSIS, REGENT'S PARK.

At the annual meeting of the Hospital for Epilepsy and Paralysis, Regent's Park, on June 13th, Lord Roberts stated that the Committee had recently been enabled to purchase the remaining unexpired term of ten years of the lease of the building, and expressed the hope, in which he was joined by Canon Barker, that the hospital might eventually be able to acquire the site, which was peculiarly well adapted for its purpose, being in a healthy and cheerful locality.

MEDICAL NEWS.

DR. TUCKER WISE has received permission from the Sanitätsrath of the Grisons to practise in Davos.

THOMAS GODFREY, M.D., J.P., died recently at his residence, Broom Hill, Dripsey, co. Cork, aged 89 years.

THE death is reported of Dr. George Montray, which occurred at his residence, Ballygawley, co. Tyrone, after a few days' illness, on July 12th.

THE summer general meeting of the Irish Medical Schools' and Graduates' Association will be held in Bournemouth on Wednesday, July 29th, that is to say, during the annual meeting of the British Medical Association.

A SERIES of articles by Dr. R. R. Rentoul on the German laws of insurance against sickness, accident, infirmity, and old age are now appearing in the *Liverpool Daily Post*, beginning in the issue of July 3rd.

DR. NACHTEL, who is pretty well known in London and in Paris for his persevering and able support of the organisation of urban ambulances and of night relief for the sick, has received the cross of the Legion of Honour.

THE prizes of the Dental Hospital of London will be distributed on Wednesday, July 22nd, at a *conversazione* at the Royal Institute, Princes' Hall, Piccadilly, by the Ven. Archdeacon Farrar, D.D., F.R.S.

BEQUESTS.—Mr. Thomas Keay Tapling, late M.P. for the Harborough Division of Leicestershire, has by his will bequeathed £1,000 to the Royal Hospital for Diseases of the Chest.

THE Duchess of Albany will be present at the Sanitary Institute on July 25th, at 3 P.M., to present the certificates awarded to ladies in a course of lectures on domestic hygiene.

THE Middlesex County Council, after considering what steps should be taken to provide a separate asylum for idiots, have decided to build the necessary accommodation on the Wandsworth Asylum estate as an annexe to the existing asylum buildings.

SURGEON O. L. THEOBALDS, of the Eastern Telegraph Company's s.s. *Amber*, has been awarded the bronze medal of the Royal Humane Society for the assistance he rendered in saving life at the wreck of the *Utopia* at Gibraltar on March 17th last.

INDIAN PRINCES AND SANITARY REFORM.—It is satisfactory to note that other Indian princes have shown the deep interest they take in the subjects of hygiene and sanitation by making similar donations to the funds of the International Congress of Hygiene. The Maharajah of Cooch Behar, G.C.I.E., Honorary A.D.C. to the Prince of Wales, has subscribed £50, and the Dewan of Jeypore £100.

THE Duke of Westminster, accompanied by the Duchess, will visit the National Hospital for the Paralysed and the Epileptic (Albany Memorial), Queen Square, Bloomsbury, on July 18th, to inaugurate the new surgical wing. It was hoped the building would have been fully completed by the day named; but the carpenters' and joiners' strike has prevented this, and the opening ceremony therefore will be formal.

WE have received a specimen page of Dr. C. R. Illingworth's *Medical Practitioner's Cashbook*. It has been prepared with care, and is very comprehensive; the various details of receipts and expenditure are neatly arranged, and the *Cashbook* will, we believe, be found useful by any medical man desirous of keeping his accounts in a simple and businesslike manner. It is manufactured and sold by Jas. Broadley, Gutenberg Works, near Accrington.

MATLOCK.—The inhabitants of Matlock are showing signs of a desire to turn to better advantage their famous scenery and not less famous waters. New baths, built on Continental models, were formally opened on July 7th. The arrangements are in duplicate in order to facilitate the treatment of patients of both sexes, and experienced attendants have been

engaged for the purpose. Those interested are doing well to endeavour to restore to Matlock the prestige which it enjoyed even in the time of the Romans.

DR. CROOKSHANK PASHA, at a private audience with the Khedive on July 3rd, explained to His Highness his proposals for the establishment of a boys' home for juvenile criminals under 15 years of age, which His Highness warmly supports. His Highness, in view of Dr. Crookshank's approaching marriage, presented him with a magnificent scarab and gold necklace as a wedding present to his fiancée, and cordially wished him every happiness.

GRY'S HOSPITAL MEDICAL SCHOOL.—The prizes were distributed on July 8th by Mr. J. A. Shaw Stewart. The treasurer's gold medals for clinical medicine and surgery were gained by Mr. J. H. Bryant, who also secured the Beane prize for pathology. The Gurney Hoare prize was won by Mr. A. S. Wohlmann, the Golding-Bird prize and medal by Mr. A. T. Rake, and the Michael Harris prize by Mr. G. E. Manning.

SOCIETY FOR RELIEF OF WIDOWS AND CHILDREN OF MEDICAL MEN.—The quarterly court was held on July 8th, the President, Sir James Paget, in the chair. Three new members were elected, and the deaths of Dr. Monro and Sir Prescott Hewett (a Vice-President) reported. It was resolved that £1,366 should be given to the 63 widows, 12 orphans, and 4 orphans in the Copeland Fund as grants for the current half-year. The expenses of the quarter were £45 16s. On the recommendation of the Committee of Visitors the grants to two widows were increased by £10 per annum each.

A VISIT TO ÆSCULAPIUS.—The Berlin Photographic Company, 43, New Bond-street, have reproduced by photogravure the famous picture by Mr. E. J. Poynter, R.A., entitled a Visit to Æsculapius. This beautiful picture, which is of special interest to the members of the medical profession, is likely to find a place in many a study and drawing-room. As a delicate reproduction of an interesting scene of classical life, it takes a high place in contemporary art, and has won great fame. Special terms are, we are told, allowed by the publishers to medical men, whether for artist proofs or India prints. Of the artist's proofs on Japanese paper very few are left.

MEDICAL TEMPERANCE ON THE CONTINENT.—In the struggle to check inebriety, which has of late so occupied the most cultured intellects on the Continent of Europe, very little has been done in the advocacy of abstinence. The prevailing idea, even among Continental members of the medical profession, has been that the increase of insanity and of other evils from drinking has arisen from the heavier alcohols, and that pure unsophisticated spirits, wines, and beers are really temperance beverages. A new departure has, however, been taken by a few of our Continental *confères*. Professor Forel of Zurich, Professor Bunge of Basle, and Dr. Wilhelm Bode of Dresden, have established strictly abstinence societies in those cities, and these associations are now vigorously at work.

GENERAL PRACTITIONERS' UNION.—A meeting of the executive committee of the above Society was held on Friday, July 3rd. Present: Mr. George Brown (Chairman), Messrs. F. H. Alderson, M.D., T. R. Atkinson, Campbell Boyd, F. H. Corby, W. E. Dawson, and Hugh Woods, M.D. The following registered medical practitioners were elected members of the Association: G. J. Eady, J. P. Granger (Walsall), A. O. Grosvenor, W. W. Hall, R. E. Hardwicke, J. C. Maddever (Browhills), J. W. J. Oswald, W. H. Platt, R. R. Rentoul (Liverpool), E. H. Roe, W. J. Scott (Lucan, co. Dublin), H. T. Wharton, O. K. Willis, and Julian Willis. The Chairman reported that Mr. W. E. Dawson and himself gave evidence before the Lords' Committee on the Management of Hospitals, etc., on Monday, June 29th, and read extracts from the evidence given, whereupon it was moved by Dr. Alderson, seconded by Dr. Hugh Woods, and resolved: "That the best thanks of this Committee, as representing the members of the General Practitioners' Union, be given to the Chairman and to Mr. W. E. Dawson for their able and effective evidence before the Lords' Committee; and they would suggest that the same should be published in pamphlet form, and extensively circulated amongst the profession in the metropolis."

MEDICAL VACANCIES.

The following Vacancies are announced :

- ABBEY PAROCHIAL BOARD, Paisley.—Medical Officer for the Eastern (Newtown) District; must reside in or near the Newtown of Paisley. Salary, £35 per annum and vaccination fees. Applications to J. M. Campbell, Inspector of Poor, Abbey Parish Office, Paisley, by August 1st.
- APPLECROSS PAROCHIAL BOARD.—Medical Officer. Salary, £95 per annum, with free house and garden. Applications to Mr. D. Bain, Applecross, Ross-shire, by August 4th.
- BIRMINGHAM GENERAL DISPENSARY.—Resident Surgeon; doubly qualified. Salary, £150 per annum (with allowance of £30 per annum for cab hire), and furnished rooms, fire, lights, and attendance. Applications to Alex. Forrest, Secretary, by July 18th.
- BRADFORD INFIRMARY AND DISPENSARY.—Dispensary Surgeon; unmarried, doubly qualified. Salary, £100 per annum, with board. Applications, endorsed "Dispensary Surgeon," to William Maw, Secretary, by July 21st.
- BRIGHTON, HOVE, AND PRESTON DISPENSARY.—Honorary Surgeon-Dentist for the Western Branch. Applications to the Assistant Secretary before July 20th.
- CHARING CROSS HOSPITAL MEDICAL SCHOOL.—Demonstrator of Physiology. Honorarium, £100 per annum. Applications to Stanley Boyd, Dean, by July 21st.
- CHELSEA, BELGRAVE, AND BROMPTON DISPENSARY, 41, Sloane Square, S.W.—Physician; must be M.R.C.P.Lond. Applications to the Secretary by July 22nd.
- CHELSEA HOSPITAL FOR WOMEN, Fulham Road, S.W.—Anæsthetist. Applications to A. C. Davies, Secretary, by July 21st, of whom application forms can be obtained.
- CHORLTON-UPON-MEDLOCK DISPENSARY, Manchester.—Resident House-Surgeon; doubly qualified. Salary, £100 per annum, with furnished rooms and attendance. Applications to the Honorary Secretary by July 28th.
- CHORLTON-UPON-MEDLOCK DISPENSARY, Manchester.—Honorary Medical Officer for the out-district of Rusholme; doubly qualified. Applications to the Honorary Secretary by July 28th.
- CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST, Victoria Park, E.—House-Physician. Board, residence, and allowance for washing provided. Appointment for six months. Applications to the Secretary at the office, 24, Finsbury Circus, E.C., by July 31st.
- CORK UNION (Queenstown No. 2 Dispensary).—Medical Officer. Salary, £125 per annum with fees. Applications to Mr. Thomas Miller, Honorary Secretary, Harbour Row, Queenstown. Election on July 23rd.
- DERBYSHIRE ROYAL INFIRMARY.—Resident Assistant House-Surgeon. Appointment for six months. Salary, £10 for first six months, and, if re-elected, £25 for second six months, with apartments, board and washing. Applications to Dr. C. H. Taylor, House-Surgeon, by July 22nd.
- DEVON COUNTY LUNATIC ASYLUM.—Assistant Medical Officer, unmarried. Salary, £120 per annum, with board, lodging, and washing. Applications to Arthur E. Ward, Clerk to the Visitors, 9, Bedford Circus, Exeter, by August 1st.
- DEVON AND EXETER HOSPITAL, Exeter.—Two Resident Pupils. Applications to G. A. Townsend, Secretary.
- GENERAL HOSPITAL, Birmingham.—Three Assistant House-Surgeons must hold surgical qualification. Appointment for six months. Board, residence, and washing provided. Applications to Dr. J. D. M. Coghill, House Governor, by August 1st.
- GENERAL HOSPITAL, Nottingham.—Senior Resident Medical Officer; doubly qualified. Appointment for two years. Salary, £120 per annum, with an addition of £10 a year up to £150, with board, residence, and washing. Applications to the Chairman of the Weekly Board by July 20th.
- GENERAL HOSPITAL, Nottingham.—Junior Resident Medical Officer; doubly qualified; appointed for two years. Salary, £100 per annum, with an addition of £10 a year up to £120, with board, residence, and washing. Applications to the Chairman of the Weekly Board by July 20th.
- GREAT NORTHERN CENTRAL HOSPITAL, Holloway Road, N. House Physician. Salary, £50 per annum, with board and lodging. Applications to W. T. Grant, Secretary, by July 28th.
- GROSVENOR HOSPITAL FOR WOMEN AND CHILDREN, Vincent Square, Westminster, S.W.—Assistant Physician; must be Fellows or Members of the Royal College of Physicians, London.—Applications to the Secretary by July 18th.
- HAMPSTEAD PROVIDENT DISPENSARY, New End, N.W.—Medical Officer; doubly qualified; must reside in Hampstead. Applications to J. W. Fenn, Secretary, 23, High Street, Hampstead, by July 31st.
- HOSPITAL FOR SICK CHILDREN, Great Ormond Street, Bloomsbury.—Assistant Physician; must be F.R.C.P. or M.R.C.P.Lond. Applications to Adrian Hope, Secretary, by July 28th.
- HOSPITAL FOR SICK CHILDREN, Great Ormond Street, Bloomsbury.—Two Casualty Medical Officers. Appointment for one year. Applications to Adrian Hope, Secretary, by July 28th.
- HOSPITAL FOR WOMEN, Soho Square, W.—House-Physician; doubly qualified; appointment for six months. Salary, £30, with board, etc. Applications to David Cannon, Secretary, by July 23rd.
- INGHAM INFIRMARY AND SOUTH SHIELDS AND WESTOE DISPENSARY.—Senior House-Surgeon; doubly qualified. Appointment for two years. Salary, £80 per annum, rising to £70, with board and residence. Applications to James R. Wheldon, Secretary, 17, King Street, South Shields, by July 21st.

- LANCASHIRE COUNTY ASYLUM, Rainhill, near Liverpool.—Assistant Medical Officer to act as Pathologist; must devote his whole time to his duties. Salary, £200 per annum, with furnished apartments, board, attendance, and washing. Applications to the Medical Superintendent by July 22nd.
- LIVERPOOL DISPENSARIES.—Assistant Surgeon, unmarried, Salary, £30 per annum, with apartments, board, and attendance. Applications to R. R. Greene, Secretary, Liverpool Leith Offices, Moorfields, Liverpool, by July 27th.
- LONDON THROAT HOSPITAL, 201, Great Portland Street, W.—Two Clinical Assistants. Appointments for three months. Applications to the Honorary Secretary of the Medical Commissioners by July 30th.
- LUNATIC HOSPITAL, The Coppice, Nottingham.—Assistant Medical Officer; unmarried; doubly qualified. Salary, £100 per annum, with board, apartments, attendance, and washing. Applications to Dr. Tate, Medical Superintendent.
- MANCHESTER ROYAL INFIRMARY.—Junior Administrator of Anæsthetics; appointment for twelve months. Salary, £50 per annum. Applications to W. L. Saunderson, General Superintendent and Secretary, by July 28th.
- METROPOLITAN ASYLUMS BOARD.—Clinical Assistant for the South-Eastern Fever Hospital, New Cross Road, S.E. Appointment for three months. Board, furnished apartments, and washing provided. Applications to the Medical Superintendent.
- NORFOLK AND NORWICH HOSPITAL, Norwich.—Assistant to House-Surgeon. Appointment for six months. Board, lodging, and washing provided. Applications to the House-Surgeon by July 21st.
- NOTTINGHAM BOROUGH ASYLUM.—Locum Tenens, qualified, for a month from the middle of August. Remuneration, 2 guineas a week and travelling expenses. Applications to the Medical Superintendent.
- PARISH OF ST. LEONARD, Shoreditch.—Medical Officer of Health. Salary, £200. Applications, endorsed "Medical Officership" on forms to be provided, to H. Mansfield Robinson, LL.D., Vestry Clerk, Town Hall, Old Street, Shoreditch, E.C., by July 27th.
- PAROCHIAL BOARD OF MORVERN, Argyllshire.—Medical Officer. Salary, £130 per annum. Applications to J. C. Gordon, Esq., Chairman of the Board, Drimnin-by-Oban, by July 27th.
- ROYAL ALBERT HOSPITAL, Devonport.—Assistant House-Surgeon. Appointment for six months. Board, lodging, and washing provided. Applications to the Chairman of the Medical Committee by July 22nd.
- ROYAL ALBERT EDWARD INFIRMARY AND DISPENSARY, Wigan.—Senior House-Surgeon; doubly qualified. Salary, £100 per annum, with apartments and rations. Applications to Will Taberner, Secretary, by July 29th.
- ROYAL HOSPITAL FOR DISEASES OF THE CHEST, City Road, E.C.—Resident Medical Officer; appointment for six months. Salary at the rate of £100 per annum, with furnished apartments and board. Applications to the Secretary by July 23rd.
- ST. SAVIOUR'S UNION, Surrey.—Medical Superintendent for the Infirmary at East Dulwich Grove; doubly qualified. Salary, £400 per annum, with unfurnished house, coals, gas, and water. Applications marked outside "Applications for Medical Superintendent" to Howard C. Jones, Clerk's Office, John Street West, Blackfriars Road, S.E., by July 20th.
- SHEFFIELD GENERAL INFIRMARY.—Assistant House-Surgeon; doubly qualified. Salary, £80 per annum, with board, lodging, and washing; appointment for three years. Applications to the "Medical Staff, care of the Secretary," by July 18th.
- SHEFFIELD GENERAL INFIRMARY.—House-Surgeon; doubly qualified. Salary, £120 per annum, with board, lodging, and washing; with a prospective advance of £10 per year for the second and third years. Applications to the "Medical Staff, care of the Secretary," by July 18th.
- SHEFFIELD SCHOOL OF MEDICINE.—Tutor to take charge of dissecting room and hold classes in Anatomy and Physiology. Salary, £100 per annum. Applications to the Secretary by July 21st.
- UNIVERSITY COLLEGE, London.—Assistant Physician to the Hospital. Applications to J. M. Horsburgh, M.A., Secretary, by July 20th.
- UNIVERSITY OF DURHAM COLLEGE OF MEDICINE, Newcastle-on-Tyne.—Demonstrator of Anatomy. Salary, £100 per annum. Applications to Dr. R. Howden, Lecturer on Anatomy, by July 22nd.
- WESTERN GENERAL DISPENSARY, Marylebone Road, N.W.—Junior House-Surgeon; unmarried. Salary, £50 per annum, with board and apartments. Applications to W. Kimpton, Secretary, by July 20th.

MEDICAL APPOINTMENTS.

- ANDERTON, William, M.R.C.P., F.R.C.S. Edin., reappointed Medical Officer for the Ormskirk Urban Sanitary District.
- BADCOCK, J. H., M.R.C.S., L.R.C.P., L.D.S., appointed Assistant Dental Surgeon to Guy's Hospital.
- BAKER, A. E., M.R.C.S., L.R.C.P., L.D.S., appointed Assistant Dental Surgeon to Guy's Hospital.
- BARRITT, G. L., L.R.C.P.Lond., M.R.C.S.Eng., appointed Medical Officer for the Workhouse and the Spalding Eastern Sanitary District of the Spalding Union.
- BROOMFIELD, Humphrey John, L.R.C.P., L.R.C.S.Irel., appointed Assistant Physician to the City of Dublin Hospital.
- BUTCHER, J. O., L.D.S., appointed Assistant Dental Surgeon to Guy's Hospital.
- CAUDWELL, E., M.R.C.S., L.R.C.P., appointed Assistant Medical Officer to the Norwich City Asylum, Hellesdon, vice Dr. Paxon, resigned.

CHEEVERS, Mr., appointed Resident Medical Student to the City of Dublin Hospital.

COWIE, Dr., appointed Medical Officer for the Eastern District of the Macduff Parish.

DALGARNO, J. J. Y., M.B., C.M.Aberd., appointed Parochial Medical Officer for St. Nicholas, Aberdeen.

DAVIS, Arthur Holdsworth, M.B.Lond., M.R.C.S., L.R.C.P., appointed Honorary Surgeon to the Monkwearmouth Hospital, Sunderland, *vice* H. Shapter Robinson, M.R.C.S., L.R.C.P., resigned.

DU BUISSON, E. W., M.R.C.S.Eng., L.R.C.P.Lond., appointed Honorary Assistant Medical Officer to the Home and Infirmary for Sick Children and South London Dispensary for Women, Lower Sydenham, S.E.

FINDLAY, George, M.B., C.M.Aberd., appointed Medical Officer for the Brailes District of the Shipton-on-Stour Union.

GILL, John, L.R.C.P.Lond., M.R.C.S., reappointed Medical Officer for the Guildfield District of the Llanfyllin Union.

GRAVES, William Robert, L.R.C.P., L.R.C.S.Irel., appointed Pathologist to the City of Dublin Hospital.

GREETHAM, P. W., L.D.S.Eng., appointed Honorary Assistant Dentist to the Home and Infirmary for Sick Children, Lower Sydenham.

HARRIS, P. Traer, M.R.C.S., L.S.A., L.D.S., appointed Assistant Dental Surgeon to Guy's Hospital.

HARRISON, J. F., L.F.P.S., M.D.Glasg., appointed Medical Officer to the Independent Order of Oddfellows, Stockport District, *vice* H. Heginbotham, M.R.C.S.

HART, F. J. Lorimer, M.B. and C.M.Edin., appointed Honorary Assistant Surgeon to the Home and Infirmary for Sick Children and South London Dispensary for Women, Lower Sydenham, *vice* H. K. Roper M.B., M.R.C.S., deceased.

HASLAM, William F., F.R.C.S., Consulting Surgeon to the Hammerwich, District and Cottage Hospital, near Walsall, *vice* T. H. Bartleet, deceased.

HICKMAN, H. V., L.R.C.P.Lond., M.R.C.S.Eng., reappointed Ophthalmic Assistant to Guy's Hospital.

HUNTER, Edwin John, L.R.C.P., L.M.Edin., L.F.P.S.Glas., reappointed Medical Officer of Health to the Gosport Local Board.

LOWNDS, H. A., L.R.C.P., L.R.C.S.Eng., appointed Medical Officer for the East Sanitary District of the Doncaster Union.

PALETHORPE, Wm., L.D.S.Eng., appointed Honorary Dental Surgeon to the Birmingham Dental Hospital.

PALMER, Harold Lewis, M.R.C.S.Eng., L.S.A., reappointed Medical Officer of Health to the Newtown Urban District.

PENFOLD, Frederick William Henry, M.R.C.S.Eng., appointed Medical Officer for the Rainham District of the Milton Union, *vice* Dr. Penfold, deceased.

ROBOTHAM, J. H., M.R.C.S., appointed Medical Officer and Public Vaccinator for the Newton-on-Trent Sanitary District of the Gainsborough Union.

SCATCHARD, Walter, L.R.C.P.Lond., M.R.C.S., reappointed Medical Officer for the Boughton District of the Faversham Union.

SHIEL, Wm. Patrick, L.R.C.P., L.R.C.S.Irel., appointed Medical Officer for the Enfield and Longwood Dispensary.

SIMPSON, Francis O., L.R.C.P., M.R.C.S., appointed Third Assistant Medical Officer to the Hants County Asylum, Knowle, Fareham.

STANFIELD, William, M.D.St.And., L.R.C.P.Edin., M.R.C.S., appointed Medical Officer for Lees, Oldham.

THOMAS, Augustus William, L.R.C.P., L.R.C.S.Eng., reappointed Medical Officer of Health to the Svaitham Urban District.

TURNER, F. Charlewood, M.A., M.D.Cantab., F.R.C.P.Lond., M.R.C.S.Eng., appointed Physician to the London Hospital, *vice* Dr. Sutton, deceased.

WALKER, H. U., L.R.C.P., L.R.C.S.Eng., reappointed Medical Officer and Public Vaccinator for the Carlton Sanitary District of the Workson Union.

WITHERS, John Sheldon, L.R.C.P.Lond., M.R.C.S.Eng., reappointed Medical Officer of Health for the Township of Sale.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 3s. 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 the current issue.

BIRTHS.

BONTOR.—On July 10th, at Great Berkhamsted, Herts, the wife of Sidney Algernon Bontor, M.D., of a son.

BOND.—On July 9th, at Welford Place, Leicester, the wife of C. J. Bond, F.R.C.S., of a daughter.

CHEYNE.—On July 10th, at 53, Welbeck Street, the wife of Watson Cheyne, M.B., of a daughter.

DEATHS.

HILLIARD.—On July 8th, at St. Leonards, Robert Harvey Hilliard, M.D., F.R.C.S.Eng., of Aylesbury, Bucks, in his 53rd year.

OLIPHANT.—At 8, High Cross Street, Leicester, on July 11th, John Oliphant, M.D.Ed. and M.R.C.S.E. Friends will please accept this intimation.

RUGG.—On July 12th, suddenly, at the Dispensary, Pontefract, Yorkshire, William John Rugg, M.R.C.S.Eng., L.R.C.P.Lond., Resident Surgeon, aged 26, younger son of George Philip Rugg, M.D., of Stockwell Villa, Clapham Road, S.W.

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.

CYCLES.

NOVICE asks any practitioner who has used a safety bicycle in his practice to give particulars as to price, repairs needed, applicability to hilly districts, and winter use?

"THE DOLOMITES" AS A HEALTH RESORT.

F.R.C.S. asks for information concerning "The Dolomites," especially as to the kind of cases likely to benefit by a stay there, and the accommodation afforded.

INCONTINENCE OF FECES AFTER RUPTURE OF PERINEUM.

M.B. would be grateful for any suggestions as to treatment of the following case: A young married woman was attended by a midwife in her first confinement, three years ago. She sustained a laceration of the perineum extending through the sphincter ani. She has been most successfully operated on so far as the restoration of the perineal body is concerned, but there is just as complete incontinence of feces as before the operation.

WINTER CLIMATES.

A MEMBER writes: Many of our members have without doubt been very glad of the information conveyed through the BRITISH MEDICAL JOURNAL relating to health resorts. The statements bearing on Madeira and the Canaries have been of much interest, giving certain valuable details; it will be further useful to know whether the climate of Madeira was genial throughout the past severe winter, or whether it was cold and unpleasant, as in the case of Algiers, etc. It would be necessary to ascertain the minimum temperatures, for the mean may give a wrong impression by being raised on account of a little hot sun for a short part of the day. I conclude that for cases of rather inflammatory and irritable mucous membrane, in naso-pharyngeal laryngeal catarrh, aggravated by any exposure to cold air or wind, Madeira would be the best climate to be found. Perhaps someone would kindly furnish a reliable account as to climate and accommodation at Scilly?

ANSWERS.

M.B., M.A.—Dr. Louis Starr (Philadelphia) informs us that all essays should be type-written (if possible) and not signed, but marked with a motto for "the Jenks Prize."

H. P. MICHIGAN.—We are informed that homoeopathic practitioners are not eligible to the Fellowship of the British Gynaecological Society. If one has been elected, the disqualification must have been unknown to the Society.

HOME FOR INEBRIATES.

H. C.—We cannot undertake to recommend any particular person or institution.

CONSANGUINITY IN MARRIAGE.

R.—In the BRITISH MEDICAL JOURNAL of July 6th, 1889, p. 53, will be found a note by Dr. George Shuttleworth in reply to a similar question as to the intermarriage of cousins. Huth's *Marriage of Near Kin*, and Dr. Nathan Allen's *Intermarriage of Relations* are useful works on the subject.

BROMIDE OF ETHYL.

SUBSCRIBER.—As far as we know, bromide of ethyl has never been used hypodermically. There is, we are advised, no reason why it might not be, in doses of 10 minims at the outside. There is little necessity for such a plan being tried, however, as the constitutional effects of the drug are easily obtained by inhalation and the local effects by spray or by simple contact, by placing the substance upon lint, under oiled silk, over the part.

ITALIAN APOTHECARIES.

THE committee charged with the organisation of the Seventh International Pharmaceutical Congress, which was to have been held at Milan, have issued a circular announcing the postponement of the meeting. Italian pharmacists seem to think the time is out of joint, since a tyrannical Government insisted on controlling the sale of proprietary medicines, and otherwise interfering with their rights and privileges; and they are too busy fighting *pro aris et focis*, or, in other words, for their counters and gallipots, to have time to spare for scientific gatherings. The organising committee plaintively state that in spite of repeated announcements and invitations published in the principal Italian and foreign journals, and in spite of 25,000 circulars having been sent out, the number of adhesions received has hardly amounted to thirty. Under the circumstances, no one can doubt that the committee have been well advised in deciding to wait for quieter times.

THE CLIMATE OF NEW ZEALAND.

DR. ALBERT J. GARLAND (Oamaru, New Zealand) writes: In the BRITISH MEDICAL JOURNAL of November 24th, 1890, I pointed out the mistake of placing the whole of the middle island of New Zealand in the same zone for purposes of climatology, and spoke of the advantages to be derived by phthisical cases by residence in the sub-alpine climate of Central Otago. Dr. Cullimore, in the JOURNAL of January 3rd, falls into the error I spoke of by quoting the climate of Dunedin in refutation of my assertion; to compare the climates of Queenstown and Dunedin is like comparing the climate of the Isle of Wight and that of Glasgow.

Unfortunately I cannot obtain meteorological observations from Queenstown, as none appear to have been taken for many years; but I have them for this place, which is in the same latitude as Queenstown, or nearly so, and about seventy miles north of Dunedin. Dr. Cullimore quotes the number of rainy days in Dunedin as 182; the average number of days on which rain fell here for the last twenty-four years to December, 1890=95.6; the rainfall for the year 1888 was 29.10 inches; 1889=14.33; 1890=14.15; and I believe the rainfall at Queenstown is very similar. Reference is made to the necessity of good houses. The hotel accommodation at Queenstown leaves little to be desired, or very good private lodgings can be had; or if that is not good enough, I know of a house which cost over £10,000, which is now vacant in consequence of the death of the owner, and I have no doubt could be obtained at a small rental.

I quite agree with Dr. Cullimore in condemning laudation of unsuitable climates, but I spoke from personal knowledge of the climate. I have now before me a letter from a lady with cavities in both lungs, who has been at Queenstown for about three months. She says: "My cough is better, I am glad to say; I have not many night perspirations, only one within the last three weeks; and as for my appetite, it is always very good. I am feeling much stronger than I did a few weeks ago." And every patient that I have sent to the interior has benefited.

LETTERS, COMMUNICATIONS, Etc., received:

(A) J. Adam, M.B., Kirkcaldy; Mr. Charles Atkin, Sheffield; Dr. G. Abbott, Preston; Dr. F. S. Arnold, Bradford. (B) Dr. J. W. Byers, Belfast; Dr. Hughes Bennett, London; Dr. H. L. Bates, St. Albans; Dr. Brown, Clifton; Dr. T. Barlow, London; Dr. D. Buxton, London; Mr. J. Berry, London; Mr. J. H. Beattie, Gillygooley; Dr. Lauder Brunton, London; Mr. H. T. Batchelor, Queenstown, Cape Colony; Dr. G. Buchanan, Glasgow; Dr. Bontor, Great Berkhamsted; Mr. W. Benham, Oxford; Dr. R. Bowles, Lucerne; Dr. R. Bolton, Bangor; Dr. Bond, Gloucester; Mr. W. J. C. Brasier, London; Mr. Blackett, London; Dr. Balding, Royston. (C) Mr. J. W. Coulson, South Shields; Mr. H. J. Collins, Norwich; Mr. C. G. Campbell, Saddleworth; Mr. F. W. Cory, Bournemouth; Mr. S. Coates, Oldham; A Country Dispensary Doctor; Dr. Crookshank Pacha, Cairo; Mr. H. Close, London; Mr. E. Caudwell, Hellesdon; Dr. J. E. Cooney, Fulham; Professor Chiene, Edinburgh; Dr. Cranston Charles, London; Dr. Cartaz, Paris. (D) Mr. F. M. Dickinson, London; Mr. H. A. Dowell, London; Doubtful; D. G. Davidson, M.B., Edinburgh; A. H. Davis, M.B., Sunderland; The Dean of the Dental Hospital of London; Dr. W. Dickson, London; Mr. T. Dutton, London; Mr. A. Douglas, Birmingham; Mr. F. W. Du Buisson, Upper Norwood; Dr. J. A. Da Gama, Bombay; Dr. P. M. Davidson, Congleton. (E) Sir Peter Eade, Norwich; Mr. P. H. Eggington, Seacombe. (F) Mr. R. A. Fleming, Edinburgh; Mr. A. Foxwell, Birmingham; The Flitwick Chalybeate Company, London; Mrs. E. Finch, East Finchley; Mr. E. F. Flynn, London; G. Fitzgerald, M.B., Edinburgh. (G) Dr. G. M. Gould, Philadelphia; Dr. A. H. Griffith, Manchester; Mr. P. W. Greetham, Penge; Dr. G. A. Gibson, Edinburgh; Mr. G. M. Giles, Sanawar; Dr. Major Greenwood, London; Dr. E. Gumpert, Manchester. (H) Dr. W. J. Hodgson, Rochdale; Mr. M. J. Houghton, Birmingham; Mr. W. F. Haslam, Birmingham; Dr. Halliburton, London; Mr. H. Higgins, Cambridge; Mr. P. E. Hill, Crickhowell; Mr. T. H. Heath, London; Dr. Grailey Hewitt, London; Mr. F. J. L. Hart, Sydenham; Mr. J. Harrold, London; Mr. F. W. Hilliard, Aylesbury. (I) Dr. C. R. Illingworth, Acerrington. (J) Mr. E. Lloyd Jones, Cambridge. (K) Mr. F. St. John Kemm, Weston-super-Mare; Dr. Norman Kerr, London; Mr. R. Kenworthy, London; Dr. J. R. Kealy, Gosport. (L) Mr. R. H. Lucy, Plymouth; Dr. W. O. Lambert, Sunderland; Dr. Leet, Seaforth. (M) Mr. W. E. Matthews, Hartley; Medical Staff; Dr. H. J. Manning, Salisbury; Mr. A. A. Mackeith, St.

Thomas; Mr. S. E. Mullings, St. Leonards-on-Sea; M.S.; Dr. J. Murphy, Sunderland; Dr. Mapother, London; Mr. C. A. Morton, Clifton; James MacLachlan, M.B., Lockerbie; Mr. J. M. McCarthy, St. George's, Shropshire; Mr. A. Morison, Newcastle-on-Tyne; Dr. G. R. Murray, Newcastle-on-Tyne. (N) Dr. G. Norström, Ragaz, Switzerland; Mr. G. Nunn, Barnes. (O) Mr. H. S. Oppenheim, Widnes; Messrs. Oliver and Boyd, Edinburgh; Observer. (P) Dr. G. V. Poore, London; Pro Bono Publico; Dr. G. Piccinini, Rome; Mr. G. C. Peachey, Wantage; Mr. E. Powell, Nottingham; Dr. F. Parsons, London; Dr. Louis Parkes, London; The Publisher of the British and Colonial Druggist, London. (R) G. F. Rossiter, M.B., Weston-super-Mare; Professor E. W. Reid, Dundee; R.M.C.; Surgeon C. C. Reilly, Kasauli. (S) Mr. A. P. Stocken, London; Mr. W. Johnson Smith, London; Messrs. Street and Co., London; Dr. Sykes, Gosport; Stonehouse; Dr. R. Stockman, Edinburgh; Dr. Squire, London; Mr. Morton Smale, London; Dr. Stuart, Heckmondwike; Dr. A. Sheen, Cardiff; Dr. S. W. Smith, Cheltenham; Mr. F. O. Simpson, Fareham; Dr. Symons, Sidmouth; Dr. P. Swain, Plymouth; Dr. L. Starr, Philadelphia; Mr. F. Smith, Plumstead; Dr. W. Stirling, Manchester; Student; Dr. Snow, Bournemouth. (T) Mr. C. H. Taylor, Derby; Dr. Trevelyan, Leeds; Mr. J. H. Targett, London; Dr. H. C. Taylor, Torquay. (V) Mr. T. Jenner Verrall, Brighton. (W) Dr. White, Belfast; Mr. A. F. Williams, Guilsborough; Dr. Ward, Oxford; Professor Windle, Birmingham; Mr. H. W. White, London; Dr. Tucker Wise, Davos Platz; Dr. A. W. Whitelegge, Wakefield; Mr. J. C. Williamson, Newcastle-on-Tyne; Mr. E. White Wallis, London; Dr. Hugh Woods, London; Dr. E. Willoughby, London. (Y) Mr. S. Yearsley, Crewe; etc.

BOOKS, Etc., RECEIVED.

On Painful Menstruation. The Harveian Lectures, 1890. By Francis Henry Champneys, M.A., M.D. Oxon, F.R.C.P. London: H. K. Lewis, 1891.

Health and Hurry. By W. Henry Kesteven, M.R.C.S. London: Diprose and Bateman.

Traité Théorique et Pratique du Massage. Par le Dr. G. Norström. Second Edition. Paris: Lecrosnier et Babé. 1891.

An Atlas of Illustrations of Pathology, compiled for the New Sydenham Society. Fasciculus VIII: Diseases of Brain and Spinal Cord. London: The New Sydenham Society. 1891.

Ueber die physiologische Grundlage der Tuberculinwirkung. Von Professor O. Hertwig. Jena: Gustav Fischer. 1891.

Die Protozoen als Krankheitserreger. Von Dr. L. Pfeiffer, Zweite sehr erweiterte Auflage. Jena: Gustav Fischer. 1891.

Traité Pratique de Chirurgie Infantile. Par Edmund Owen. Traduit sur la deuxième édition par le Dr. O. Laurent. Paris: G. Stenheil. 1891.

Diseases and Refraction of the Eye. By N. C. Macnamara, F.R.C.S., and Gustavus Hartridge, F.R.C.S. Fifth edition, price 10s. 6d. London: J. and A. Churchill. 1891.

Cremation versus Burial. By William Holder, M.R.C.S. Price 1s. Hull and York: A. Brown and Sons. 1891.

Surgical Anatomy for Students. By A. Marmaduke Shield, M.B., F.R.C.S. Edinburgh and London: Young J. Pentland. 1891.

Modern Materia Medica for Pharmacists, Medical Men, and Students. By H. Helbing, F.C.S. Second edition. London: British and Colonial Druggist.

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