

what surprised that we had not seen its lower end when looking upwards under the tenth arch. The spinal cord itself was much flattened, and almost fluid for half an inch at the point of pressure, and it was also extremely soft below down to its end. Above the tumour it was obviously softened somewhat for an inch, but in the rest of its extent the cord showed no naked-eye changes except general slight softening due to *post-mortem* changes.

Microscopical examination of the cord, after hardening in ammoniac bichromate, showed complete disintegration of its structure at the point of pressure, very extensive diffuse disorganisation of both grey and white matter an inch below that point, and similar but less intense changes for about an inch above. Sections in the mid-dorsal region showed no definite degeneration.

With regard to the hydatid cyst, it had a narrow attachment close to the summit of the tenth vertebral arch, and had no visible continuity with the cysts in the muscles. No abnormal hole was found in the bone. No other hydatids were found, and the brain presented no changes beyond a slight chronic arachnitis. There was an enormous quantity of subcutaneous, pericardial, and peritoneal fat, and *post-mortem* changes were everywhere advanced, the heart muscles being honeycombed with small cavities containing gas. It was obvious that rapid infection had proceeded from the bed-sore. The right testicle was atrophied, and the right tunica vaginalis much thickened.

It is much to be regretted that the patient did not come under observation until such a late period of his illness, as, therefore, several interesting phenomena of the development of the malady escaped an accurate record. The history of intense spinal pain radiating to the legs, diminishing or even disappearing for weeks or months at a time, but at the end of a year and a half recurring in greater severity, together with loss of sensation and motor power in the legs, pointed clearly to pressure on the spinal cord; but the diffuseness of the pain and its variable character made it impossible to use this symptom pain for the purpose of accurate localisation, though these characters made it slightly probable that the tumour was extra- and not intradural. Growths of the arachnoid or pia mater tend more to produce unilateral and root symptoms. It is possible that in this case the hydatid cysts in the substance of the muscles had also some share in causing the pain.

So far as could be ascertained, the motor and sensory loss seem to have come on together; and although the patient said that his legs had been rather "stiff" for two months before admission, there seems no doubt that muscular rigidity was never marked. No increase of reflexes was at any time noted, and a month before his admission as an in-patient, it was found by the house-surgeon that the knee-jerks were absent; which fact, combined with some ataxy and loss of sexual power, suggested then the diagnosis of locomotor ataxy. It seems probable that pressure on the posterior roots of the lower dorsal region led to a certain simulation of tabes dorsalis, for the absence of knee-jerks was then not due to wasting of the muscles. With regard to the march of paralysis and anaesthesia, it should be noted that motor power was retained longest in the toes, while sensation disappeared first from the soles, and from the calves before the shins. The foot which first lost sensation retained its motor power longer than the other. Hyperaesthesia at the upper limit of the anaesthetic area was only observed, and then indistinctly, on one day.

A remarkable point is the rapidity of the final pressure effects. The patient was able to walk until the middle of December. Diminished electrical irritability of the muscles showed extensive damage to cells of the anterior cornu on January 12th, and on January 18th he was dead.

The case is of interest in regard to the diagnosis of the level of a tumour pressing on the cord, and shows how it may be higher than the anaesthesia or paralysis would suggest. Extradural tumours probably in this respect resemble dislocations of the vertebrae, in which, as Thorburn's statistics show, the damage to the cord is frequently two vertebrae higher than the level of the anaesthesia. The level of intradural growths can probably be estimated with greater accuracy. The diagnosis of the nature of the tumour was in this case impossible. There were no grounds from either history or physical signs for suspecting hydatids, and the extremely rare occurrence of echinococcus in the spinal canal made it *a priori* improbable. Neisser (quoted by Leuckart in his *Parasites of Man*) collected 986 cases of echinococcus, in only 13 of which were cysts found in the spinal canal; and Dr. Maguire,¹ after searching through the literature of the century, could find only 20 cases in all. In several of these cases the hydatids had eaten into the vertebral column from outside (pleura, peritoneum, muscles), and in one case (Reydellet) a cystic tumour pointed from the lumbar spine, was opened,

and daughter cysts escaped. This patient died a year later from suppuration in the wound. In the great majority of Dr. Maguire's cases several cysts were present, so that our case is exceptional in there being but one. In several cases the cysts were found along nearly the whole length of the spinal cord. In only 4 of Maguire's cases were the hydatids within the dura mater, but in 2 cases of cysticerci the parasite was in the substance of the cord. The duration of symptoms in the 20 cases varied from three months to four years, but most lasted between six and eighteen months. Pain seems to have been a marked and early symptom in most, but in some was not specially mentioned. Anaesthesia became usually but not always complete, and the paraplegia seems in two or three instances to have come on suddenly. No details are given as to the state of the reflexes except in Dr. Maguire's own case. In this case the cysts extended along the upper half of the spinal canal on the dorsal side of the dura mater. The paralysis of the legs was complete and extended to the arms, but sensation was never quite lost. There was retraction of the head, increased knee-jerks, and ankle-clonus.

To sum up, we may say that hydatids of the spinal canal are usually extradural and multiple, but their presence cannot be diagnosed from benign growths, such as fibromyoma and lipoma, unless other cysts are found elsewhere in the body. The fact that they are usually multiple renders them less amenable to surgical interference, but the present case shows clearly that such treatment might in some cases be of very great use.

MEMORANDA:

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

BELLADONNA AND MERCURY POISONING BY EXTERNAL APPLICATIONS.¹

CASE I. *Dangerous Poisoning from Absorption from a Belladonna Plaster.*—Mrs. E., aged 65, seen by me with Dr. Robert Browne of Bourne on August 24th, was lying unconscious with occasional muttering delirium, answering incoherently when roused. The limbs were rigid, with convulsive twitchings, arms flexed, the clenched hands pressed against the throat, pupils widely dilated, urine retained. The symptoms had commenced 24 hours before with giddiness and staggering gait; this was followed after an interval by delirium, complete loss of power and unconsciousness.

On the patient's back I found a perforated belladonna plaster, about eight inches square, the skin below it having the appearance of a healing blister. The plaster was removed and the skin well cleansed. Later, the patient, after being catheterised, became violently excited, and morphine was injected hypodermically; there was immediate improvement, the patient passing into a quiet sleep from which she woke rational and quiet, and in twenty-four hours she was convalescent.

The explanation of the raw condition of the skin which led to the absorption of the poison was, that three weeks before, Mrs. E. had applied a so-called strengthening plaster manufactured by the same firm. Ten hours after its application it had inflamed the skin, producing vesication, and Mrs. E. removed the plaster in consequence. At the end of the three weeks the back having, as she considered recovered, Mrs. E. applied the belladonna plaster; seven hours afterwards the first symptoms of poisoning set in. Dr. Browne has since had another case in his practice in which a belladonna plaster by the same maker had in six days caused inflammation of the skin with serous discharge, to cure which Dr. Browne was called in.

The manufacturers have been informed of the dangerously irritating nature of the basis of their plasters, and will doubtless change their composition. In the meantime, it is desirable that the members of our profession should know of this possible source of danger to their patients.

¹ Notes of these cases were read at the meeting of the South Midland Branch of the British Medical Association, held at Northampton October 6th, 1891.

CASE II. Pityalism caused by Application of Lotio Hydrarg. Nigra.—In connection with the foregoing case, I record that of Mrs. X., aged 42, who on June 20th last, consulted me for severe and acute eczema of the arms and legs. In addition to internal medicine and a strict dietary, she was ordered to apply lotio nigra. The eczema rapidly improved, but on the eighth day severe pityalism set in, from which the patient happily recovered without any loosening of the teeth or other permanent ill effect. Could the insoluble black oxide have formed with some organic acid contained in the serous discharge a soluble and readily absorbable salt?

T. J. WALKER,
Surgeon to the Peterborough Infirmary.

STRYCHNINE AS A "PROPHYLACTIC" IN CHLOROFORM POISONING.

WITH reference to Dr. A. Milne's note on "Strychnine as a Prophylactic in Chloroform Poisoning, I have been in the habit, for some time past, of giving 15 min. of tinct. nucis vomicae about a quarter of an hour before commencing the administration of either ether or chloroform, always taking care that the patient should not take any food for three hours previously. I have every reason to believe this practice to have been attended with beneficial results.

The idea was suggested to my mind by reading a report, I think, by the Indian Commission, in which both tincture of nux vomica and digitalis were spoken of as the best medicaments to be used in apprehended death. From a "remedy" to a "prophylactic" was not much of a mental step, hence its use by me as such.

Liverpool.

ARTHUR WIGLESWORTH.

REPORTS

ON

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

MANCHESTER ROYAL INFIRMARY.

A CASE OF ANEURYSM OF THE DORSALIS PEDIS ARTERY.

(Under the care of W. THORBURN, B.S.Lond., F.R.C.S.Eng.,
Assistant-Surgeon Manchester Royal Infirmary.)

[From notes by Mr. R. M. LITTLE, late House-Surgeon.]

W. R., aged 41, a baker, was admitted to the Manchester Royal Infirmary on April 19th, 1890. His family history presented nothing of interest. He had never had syphilis. About twenty years ago he had "rheumatism" in the knees and elbows, but this did not confine him to bed. Ten years ago he suffered from insomnia, with pain in the back of the head; his sight then began to fail, and in six months he became completely blind, as he has since remained. He says that at that time he was told by a well-known ophthalmic surgeon that the blindness was "due to his brain."

History of Present Affection.—Nine weeks before admission, as the patient was going downstairs one morning, he felt a sudden pain across the front of the right ankle; the pain was so severe that he could hardly stand, and had to shuffle down on his left foot. After rubbing the painful part he was, however, able to go on with his work for the day. In the evening he noticed slight swelling of the right foot, and, on the following evening, the whole foot was painful and much swollen, both in front and at the back of the ankle. This pain and swelling continued for a week, when he was told by a medical man that there was fluid in the ankle-joint. The pain was always worse when he was in bed, better when he stood up, and it was especially bad when the foot was raised above the pelvis. After about four weeks the swelling began to subside, especially at the back of the ankle, and, pulsation being now first noticed, his medical man told him that he had an aneurysm.

During the subsequent five weeks the general swelling about the ankle disappeared entirely, leaving only the pulsating projection, which slightly increased in size. In spite of this he followed his occupation up to the time of admission.

Condition on Admission.—The patient was a well-nourished,

healthy-looking man, but his hair was white, and he looked too old for his age. He was quite blind, and the optic nerves presented marked atrophy; the external recti of both eyeballs were paralysed. The knee-jerks were absent. With these exceptions there were no symptoms on the side of the nervous system. The accessible arteries appeared to be healthy, as was the heart, the only abnormality being some accentuation of the second sound at the base. Urine normal. All other organs healthy.

The right foot was slightly everted, but there was no pain except on raising the foot at the ankle, when slight pain was felt along its inner side. On the dorsum of this foot, immediately external to the tendon of the extensor proprius pollicis, was a distinct oval swelling, having its long diameter antero-posterior. The greatest length was 1½ inch, and width ¾ inch. It was unconnected with the skin, which was not discoloured, but it could not be isolated from the deeper structures. There was faint but distinct pulsation, synchronous with the heart, expansive in character, and at once stopped by pressure on the anterior tibial artery above it. Pressure caused no apparent diminution in size, and the consistence was firm, without fluctuation, the outer part of the swelling being harder than the inner. Pressure on the inner and softer half caused the pulsation to stop, but, unless very firm, did not check pulsation in the dorsalis pedis artery below. There was some fulness of the inner aspect of the foot between the internal malleolus and the scaphoid tubercle. Measurement round the sole, from the tip of one malleolus to that of the other, was equal on both sides (showing that these were no general enlargement of the astragalus).

On April 26th the aneurysm was completely dissected out. An incision about 4 inches in length was carried along the swelling just externally to the tendon of the extensor proprius pollicis, and the sac exposed, with the vessel above and below. It was situated at the commencement of the dorsalis pedis artery to the under and outer aspect of the vessel. The branches of the anterior tibial nerve, being spread over and attached to the wall, were removed with it. The vessel, which appeared to be healthy, was tied above and below the aneurysm, and the latter shelled out. Beneath it the astragalus was considerably eroded, presenting a sharp edge, which lay in contact with the aneurysm. The wound was then washed, all minor bleeding points stopped, and a small drainage tube being inserted at either end, was sutured.

On the fourth day the drainage tubes were removed, and on the thirteenth day, the dressing being again changed, the wound was found to be healed. All sutures were taken out, and the patient discharged. The aneurysm is about the size of a small hen's egg, and is situated laterally on the vessel, as already described. Its cavity is almost full of firm red clot, which is quite unattached to the wall, and apparently of somewhat recent origin.

REMARKS BY MR. THORBURN.—Aneurysm of the dorsalis pedis artery is so rare that Delorme, writing in 1879, was able to collect only fourteen cases, of which one was original¹ together with two instances described as cirroid aneurysms. The cause has generally been an injury—either a wound, a bruise, or over-strain of some of the tarsal joints, which almost necessarily injures the vessel. In the present case no cause whatever could be assigned, but the connection with symptoms of locomotor ataxy is of interest, and may account for an extra risk of injury to the foot.

The diagnosis is not, as a rule, difficult, although inflamed aneurysms have been mistaken for abscesses, an error which has probably been due to carelessness. More difficult is the diagnosis from pulsating sarcoma of the astragalus, and in our case there was considerable difference of opinion among those who saw the swelling before operation as to its real nature. The diagnosis was here rendered less easy by the fact that the sac was nearly full of clot, and consequently presented the characters of a tumour. The peculiar fact that comparatively light pressure on the inner side of the swelling arrested its pulsation without interfering with that of the vessel below is also explicable by the existence of this clot, which would by such pressure be driven aside into the lateralised sac so as completely to fill it, while yet the finger did not occlude the main channel. As a rule a pulsating sarcoma would be recognised by its solidity, its irreducibility by pressure, the

¹ Gazette Hebdomadaire, February 23th, 1879.

ASSOCIATION INTELLIGENCE.

NOTICE.

THE President of Council, who is abroad and will not be back again before the second week in December, requests all communications should be addressed to the Office, 429, Strand, W.C.

LIBRARY OF THE BRITISH MEDICAL ASSOCIATION.

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

BRANCH MEETINGS TO BE HELD.

LANCASHIRE AND CHESHIRE BRANCH.—The intermediate meeting of this Branch will be held at Southport on Wednesday, December 9th, at 3 P.M. Papers:—Dr. Wm. Armstrong: (1) A short note on the Treatment of Diphtheria. (2) A communication on the Treatment of Bronchitis and Broncho-pneumonia in Children. Dr. Judson S. Bury: Attitude in Disease. Dr. Brooke: On the Action of Parasites in Skin Disease. Dr. Rentoul: A Medical Practitioners' Widows and Orphans Fund. Dr. Baines: Short notes on Hypnotism with Experiments. Mr. C. G. Leewill relate a case of Double Optic Neuritis following Influenza. Mr. Hare will make a few remarks on Varix and Varicose Callous Ulcer.—CHARLES E. GLASCOTT, M.D., Honorary Secretary, 23, Saint John Street, Manchester.

WORCESTERSHIRE AND HEREFORDSHIRE BRANCH.—The next meeting of this Branch will be held at Hereford Infirmary on Thursday, December 3rd, at 3.45. Dinner at the Green Dragon at 5.30 punctually. Members intending to dine are requested to inform Mr. H. Cecil Moore, 26, Broad Street, Hereford, on or before December 1st.—GEO. W. CROWE, Honorary Secretary, Worcester.

PERTHSHIRE BRANCH.—The winter meeting of this Branch will be held at the Station Hotel, Perth, on Friday, December 4th, 1891, at 4 P.M. Business: Report of Council; election of office-bearers; election of new members; President's address. After the meeting dinner will be served in the hotel at 3s. 6d. each.—A. R. URQUHART, M.D., Honorary Secretary, Perth.

THAMES VALLEY BRANCH.—The next meeting of the Branch will be held in Richmond on Wednesday, December 9th. The Honorary Secretary will be glad to hear from members willing to read papers or exhibit cases.—CHARLES E. SCOTT, St. Margarets, Twickenham, Honorary Secretary.

BIRMINGHAM AND MIDLAND COUNTIES BRANCH. The second ordinary meeting of this Branch was held in the Library of the Medical Institute, Birmingham, on November 12th, the President, Dr. THOMAS SAVAGE, in the chair. The minutes of the last meeting were read and signed.

New Members.—The following members of the Association were elected to this Branch: Dr. E. Sadler, Messrs. N. Best, W. Rennie, G. Heaton, and J. D. Ballance.

Communications.—Mr. BARLING showed a 5 months' old baby suffering from congenital rickets, most of whose long bones had been fractured at various times, and all had been satisfactorily repaired.—Mr. JORDAN LLOYD showed: 1. A Large, Solid, Unilateral Bronchocele, weighing nearly one pound and a quarter, successfully removed from a woman, aged 51. The tumour had grown slowly for forty years, and had for several years compressed the trachea. 2. An Epitheliomatous Tongue successfully removed from a woman, aged 68; together with Three Malignant Glands dissected from off the internal jugular vein. 3. An Epitheliomatous Tongue and Anterior Part of the Floor of the Mouth successfully removed from a man, aged 62.—Dr. RICKARDS read a paper on "The Treatment of Pleurisy."—In the discussion which followed, The PRESIDENT, Mr. OAKES, Mr. J. LLOYD, Dr. SIMON, Dr. LYCETT, Mr. MAY, Dr. FOXWELL, and Mr. MARSH took part; and Dr. RICKARDS having replied, the meeting terminated.

SOUTH-EASTERN BRANCH: EAST SUSSEX DISTRICT. A MEETING of this District was held at the Calverley Hotel, Tunbridge Wells, on November 19th, Dr. PARDINGTON in the chair, owing to the unavoidable absence of the President.

New Member.—Dr. Malden, of Pembury, was proposed as a member of the Branch.

Compulsory Instruction in Hygiene.—The Honorary Secretary, by request, laid on the table for signature a memorial to the General Medical Council in favour of compulsory instruction in hygiene for medical students.

Papers, etc.—Dr. RICHARDSON read a paper on the Family History of Chlorosis. The CHAIRMAN, Dr. WILSON, and Dr. ELLIOTT joined in the discussion.—Mr. FOOTNER read notes of (1) Nephrolithotomy and (2) Suprapubic Cystotomy for Calculus; both cases recovered well and rapidly. Remarks were made by the CHAIRMAN, Mr. VERRALL, and Mr. MANSELL.—In the absence of Dr. Ranking, who was to have read a paper on Ulcerative Endocarditis, the remaining time was devoted to a discussion on cases of Transient Cardiac Murmurs and cases where *post-mortem* examination showed an absence of cardiac lesions inconsistent with the cardiac sounds heard during life. In this Dr. WILSON, Dr. ELLIOTT, the CHAIRMAN, and Dr. RICHARDSON took part.

Next Meeting.—It was decided to hold the next meeting at Brighton in March.

Dinner.—Twenty-one members and visitors dined together after the meeting.

SOUTHERN BRANCH: SOUTHAMPTON DISTRICT.

A SPECIAL meeting of the District was held on November 21st, at 1, Grosvenor Square, Southampton, the PRESIDENT (Professor Godwin) in the chair, to consider the election of direct representatives to the General Medical Council.

It was moved by Professor CAYLEY, seconded by Mr. HALL, and carried unanimously that "In the opinion of this meeting the three retiring representatives—Mr. Wheelhouse, Sir Walter Foster, and Dr. Glover—are in every way worthy of our confidence and will receive our hearty support at the coming election."

Moved by Professor NOTTER, seconded by Dr. BULLAR, and carried unanimously, that "A copy of this resolution be forwarded to all members of the district, the secretaries of the other districts of Southern Branch, and to the three representatives."

THE GLOUCESTERSHIRE BRANCH.

THE first ordinary meeting was held at the Queen's Hotel, Cheltenham, on November 17th, 1891, Dr. E. T. WILSON in the chair.

Vote of Thanks to Mr. Fowler.—The minutes of the last meeting having been read and confirmed, it was proposed by Dr. WILSON, seconded by Dr. WATTERS, and carried unanimously, that "the best thanks of the members of the Branch be given to Mr. Fowler, of Cirencester, for his cordial reception and great hospitality to the Branch on the occasion of their visit to Cirencester last July."

President's Address.—The PRESIDENT delivered an address on the Notification of Infectious Diseases Act. He suggested the making of a complete medico-topographical survey of the country through the agency of the Branches. Also the supply of some means by which the returns now collected by the sanitary authorities under the Acts for registering the cause of death and notifying infectious disease might be made available by practitioners. He drew attention to the difficulties met with in working the Act for Notification of Infectious Disease, and offered suggestions for their avoidance in the future.—A discussion followed, in which Mr. CARDEW dwelt upon the importance of fuller knowledge on the part of the medical practitioner of the area invaded by the diseases among which he was working.—Mr. BUCKELL gave instances in which the publicity given to cases of infection had caused serious loss to unoffending persons living in the immediate neighbourhood of the infected house.—Mr. TODD, as a medical officer of health, drew attention to the mistakes arising from the use in the Act of such indefinite terms as continued fever, puerperal fever, and erysipelas. He also urged that the names of infected persons should not be given to the sanitary authorities by the medical officer of health,

and that he should in all cases communicate with the medical attendant before visiting an infected house.—Remarks were also made by Mr. FOWLER (Cirencester), Dr. BATTEN (Gloucester), and Mr. WARD-HUMPHREYS.

Vote of Thanks to President.—A vote of thanks to the President for his address, and for allowing a discussion to follow, was proposed by Dr. MORLEY ROOKE (Cheltenham), seconded by Mr. EDIS (Gloucester), and carried.

Resolution.—It was proposed by Dr. BATTEN (Gloucester) and seconded by Dr. WATERS (Stonehouse), and carried: "That the Council of this Branch be requested to consider what steps should be taken to carry out a scheme for a complete medico-topographical survey of the county by the Branch, and to report on the same at a future meeting."

Supper.—The supper took place after the meeting, at which twenty members were present.

BURMAH BRANCH.

THE fifth meeting of this Branch was held on August 7th, at Rangoon, when the following members were present: Drs. Sibthorpe, Mayne, Woods, Leslie, Roy, Dey, Parak, and Sutherland.

New Member.—The minutes of the previous meeting having been confirmed, Surgeon H. James Waller, M.S., was elected a member of the Branch.

Cases of Enlarged Spleen.—Surgeon-Major MAYNE exhibited several Sepoys with very greatly enlarged spleens. The enlargement was very rapid, in some cases being less than three months after their arrival in Burmah.

THE sixth meeting of the Branch was held at Rangoon on October 9th. There were present Drs. Sibthorpe, Strachan, Baker, Woods, Parak, and De Souza.

New Members.—The minutes of the preceding meeting having been confirmed, Surgeons Blancard and Johnston were elected members of the Branch.

The Spleen in Remittent Fever.—Surgeon Woods exhibited a spleen in which there were two abscesses, taken from a patient who died of remittent fever, and read a paper on the subject.

Specimen.—Surgeon-Major O. BAKER exhibited a Kidney in which there were imbedded numerous Stones.

Larvæ in the Intestine.—Surgeon-Major O. BAKER also read a paper on a further contribution on the presence within the intestines of man of the larvæ of a dipterous fly. He also exhibited the flies alive and dead which he had reared.

SPECIAL CORRESPONDENCE.

PARIS.

Poisoning by Phosphorus in Medicinal Doses.—*Public Disinfecting Ovens.*—*Suicide of a Medical Man.*—*Prize Essay.*—*The Carcasses of Fighting Bulls.*—*General News.*

Dr. MÉTIVIER has been tried for manslaughter and acquitted. He treated a rickety child with phosphuretted cod-liver oil, a teaspoonful of which he ordered to be given daily. On the sixth day the child was seized with vomiting, and ordinary cod-liver oil was substituted, but the little patient was already suffering from phosphorus poisoning, and died soon afterwards. Dr. Legroux, in whose wards the child died, stated that the dose prescribed by Dr. Métiévier is that given in the *Codev*. The medical journals highly approve of the verdict, and say that had any other conclusion been come to surgical operations would have been rendered impossible, chloroform could no longer be used, medical men would be intimidated, and would limit their treatment to the use of *tisanes* and ointments.

The city of Paris gives, as stated in the BRITISH MEDICAL JOURNAL some time ago, to the public the use of disinfecting ovens gratuitously: there are three—73, Rue du Château des Rentiers; 6 bis, Rue des Récollets; 21, Rue Chatigny. Applications may also be addressed to the *mairies* of the twenty municipal arrondissements, to the north cemetery, Père-la-Chaise, and the cemetery Montparnasse.

Dr. Couturier, of the St. Etienne Hospital at Lyons, has

committed suicide. He had been ailing for some time, and wishing to have a definite diagnosis of his condition he went to Paris and consulted M. Potain as an out-patient under a false name, stating that he was a street singer. Dr. Potain told him he was suffering from neurasthenia, and prescribed some medicine. He laughed heartily, and exclaimed: "I am Dr. Couturier, of Lyons. I wanted to know exactly what is the matter with me. Thanks." On returning home he developed symptoms of cerebral trouble, and had to be removed to the Saint Jean de Dieu Hospital for the Insane. He succeeded in escaping, and attempted to shoot his wife, but fortunately failed.

La Société de Médecine de Paris offers in 1893 the Prix Duparcque of 1,500 francs (£60) and a gold medal value £4 for the best work, manuscript or printed, which appears in 1891 or 1892 on tuberculosis. The manuscripts or pamphlets must be sent in to the Secretary, 3, Rue de l'Abbaye, before December 31st, 1892.

The question whether the bulls killed in the bull fights in the Rue Pergolèse should be sent to the slaughter-house and offered for sale in the market is now being debated. The Society for the Protection of Animals answers in the negative, and asserts that the animals are over-fatigued, in a highly feverish condition, and consequently undergo rapid decomposition. It appears after each fight the unfortunate bull is given over to a butcher, who kills it immediately. The authorities of the Rue Pergolèse state they do not know what becomes of the animals thus slaughtered, but the meat is delicious, and sought after by epicures. A veterinary inspector at the Villette slaughter-house states that it is generally forbidden to kill animals afterwards offered for sale as food except in a slaughter-house. An exception is made to this rule for the benefit of the arena of the Rue Pergolèse. The bulls are killed there and then removed to the slaughter-house, where they are prepared for sale and examined by a veterinary inspector, who forbids or authorises them to be offered for sale according to their condition. At Villette the opinion is that fighting bulls are less over-taxed and over-fatigued than when sent from different parts of France and abroad.

M. Poydenot has bequeathed to the city of Paris a considerable sum of money to endow the hospitals with more beds.

At Robecq, Dr. Debay has been awarded a silver medal by the Minister of the Interior, for his admirable conduct and devotion during the typhoid and scarlet fever epidemics.

LIVERPOOL.

Discussion of Deaths from Chloroform.—*Prevalence of Enteric Fever.*—*Resignation of the Medical Officer of Health for West Derby.*

A DISCUSSION of more than ordinary interest and importance has lately engaged the attention of the Medical Institution at two consecutive meetings. It related to deaths from chloroform, and by what means and to what extent they may be prevented, the relative merits of ether as an anæsthetic being incidentally referred to. Mr. F. W. Lowndes, in opening the debate, alluded to the painful and increasing frequency of deaths from this cause during the last few years. The fatal cases in Liverpool during the four years prior to 1890 averaged rather less than two a year, while last year there were four, and six had occurred during the first ten months of the present year. A death took place in the Royal Infirmary in 1857, but it was so rare an occurrence that when Mr. Lowndes joined the school three years later it was still talked about. Chloroform, however, continued to be given regularly for all operations of any importance, and it was only after a wide experience during eight years that he witnessed a fatal case, and this was in a man with a tight stricture, who was probably suffering from uræmic poisoning. Since then he had administered it or seen it administered to hundreds of patients for operations of all degrees of severity, and had never again witnessed a fatal result, although he had seen some very narrow escapes. With the view of diminishing the mortality from this cause as much as possible, he recommended that the administration should never be entrusted to anyone but a qualified man, but that all students should receive practical instruction from the chloroformist in hospitals; that due care should be exercised to ensure the chloroform

sharp tirades against modern physiology in general, and certain excellent friends of mine in particular; indeed, I am not sure but that there were some glances at my own doctrines and misdeeds."

Sir Joseph Fayrer writes: "I was a pupil of Mr. Wharton Jones during the three winter sessions of 1844 to 1847, and have the most vivid and grateful recollections of the scope and value of his teaching. Indeed I may say that any knowledge of biology that I may possess is based on the instruction I received from him. He was a man of retiring habits, and of slight, almost feeble, physique, but most earnest, enthusiastic and impressive in his manner of imparting knowledge of the subjects he knew so well, in which I imagine he was hardly excelled by anyone living at that time. His personal influence on his pupils was great, and he was as much respected as he was loved by them all. Since my return to England I have been from time to time in communication with him on physiological subjects, the last on the coagulation of the blood, or rather the formation of fibrinous coagula in the vessels, especially in the pulmonary artery. I am unable at present to lay my hands on all the papers, but I enclose you one or two—which please return—which will give some idea of the subject all were interested in.

"I had hoped he would (he said he could do so) write more on the subject, embodying my views on the question, but if he did, I have never seen what he wrote.

"I deeply regret his death, though it occurred in the fulness of time and age. He was a most original thinker, and a most able man."

P. R. TOMLINSON, M.R.C.S., L.S.A.LOND.

MR. TOMLINSON, who formerly practised in Wakefield, died at Southfield, Hornsea, on November 14th. He was a student at St. George's Hospital and a well known athlete. He qualified about 1862, and soon afterwards was appointed house surgeon at the West London Hospital, Hammersmith, which office he held for about two years. His health becoming impaired he went one or two voyages as ship surgeon in Messrs. Green's service, and finally settled down in practice at Wakefield, where, unfortunately, while riding a rough horse, he injured his spine, and paraplegia supervening, he was laid up for some time, but gradually recovered so far as to be able to walk about with the aid of a stick, and at length to take carriage exercise.

He was of course compelled to resign his practice, but retained so much of his former energy that he was able to follow the hunt in his carriage, and probably saw more of the hounds than many a man who followed on horseback. In spite of his terrible calamity he was always of a most cheery and genial disposition and a universal favourite.

After 24 years in this condition, at times suffering greatly, his wonderful pluck carrying him through many a serious attack, he died, after a few days' illness, aged 50.

He was a zealous Freemason, and for many years master of his lodge in Wakefield.

JOSEPH WICKHAM, M.D. EDIN., F.R.C.S. ENG., J.P.

IT is with regret that we have to announce the death of Dr. Wickham, of Temple-Sowerby, one of the oldest members of the profession in Cumberland. Dr. Wickham studied in Edinburgh, and took his M.D. degree in 1842. In the same year he became a Member of the Royal College of Surgeons of England, and in 1858 he was elected a Fellow of the College. He settled in practice at Penrith in partnership with the late Dr. Jackson, and for many years had an extensive practice. Among other public appointments which he held was that of Surgeon to the Westmoreland and Cumberland Yeomanry Regiment, to which he was gazetted in 1847. He retired from practice several years ago, but took an active part in public life as a J.P. for both Cumberland and Westmoreland. He died on November 19th in the 74th year of his age.

A PORTUGUESE LADY DOCTOR.—Senhora A. Cardia has just taken her degree at the Medico-Chirurgical School of Medicine of Lisbon. Her thesis, which was on hysteria, was dedicated to Queen Amelia. Senhora Cardia is the first lady who has been admitted to the medical profession in Portugal.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF OXFORD.

MR. G. J. ROMANES, M.A., F.R.S., Christ Church, has presented the University with an annual sum of £25 for a lecture to be delivered once a year on some subject relating to Science, Art, or Literature.

PROFESSOR PRICE, F.R.S., and the Warden of Merton College, have been nominated, by the Hebdomadal Council and Merton College respectively, as electors to the Professorship of Human and Comparative Anatomy, now vacant.

UNIVERSITY OF CAMBRIDGE.

DUBLIN TRICENTENARY.—A letter from the Chancellor and Provost of Dublin University is published in the *Cambridge University Reporter*, in which the presence of "aliquos doctos viros ex vestro illustri coetu" is invited at the "laeta festa" in celebration of the tricentenary, to be held July 5th to 8th, 1892.

DEGREES.—At the Congregation on November 19th the following degrees were conferred:—

M.D.—P. King, B.A., M.B., B.C., Cavendish.

M.B. and B.C.—P. C. Low, B.A., Clare.

M.A. (*honoris causa*).—D. Sharp, M.B., C.M., F.R.S.

SCIENCE SCHOLARSHIPS.—Downing College: Minor Scholarships of £50; examination begins on April 19th, 1892; subjects: Chemistry, Physics, Physiology, Comparative Anatomy, Botany, Human Anatomy (not more than three to be taken). Apply to the Tutor.

UNIVERSITY OF LONDON.

M.B. EXAMINATION, OCTOBER, 1891: PASS LIST.

First Division.—W. L. Andriezen, University College; G. F. Blacker, University College; E. E. Blomfield, London Hospital; G. S. Buchanan, B.Sc., St. Bartholomew's Hospital; H. A. Caley, St. Mary's Hospital; C. C. Chidell, University College; T. F. Cooke, Manchester Royal Infirmary and Owens College; T. F. Cowen, St. Thomas's Hospital; H. J. Curtis, University College; T. B. P. Davies, Guy's Hospital; D. Drew, University College; A. E. Giles, B.Sc., Owens College and Manchester Royal Infirmary; J. C. M. Given, Royal Infirmary School of Medicine, Liverpool; A. Griffith, University College; H. Hodgson, Guy's Hospital; B. W. Hogarth, Guy's Hospital; H. Horrocks, B.Sc., Owens College and Manchester Royal Infirmary; R. E. S. Krohn, University College; A. Manknell, Yorkshire College; Elizabeth Margaret Pace, London School of Medicine and Royal Free Hospital; J. E. Paul, University College; A. T. Rake, Guy's Hospital; H. M. Richards, University College; A. G. Rider, University College; G. A. Simmons, St. Mary's Hospital; E. N. Smith, University College; C. R. Stevens, St. Bartholomew's Hospital; W. M. Stevens, University College; Mary Darby Sturge, London School of Medicine for Women; W. F. Umney, St. Thomas's Hospital; E. E. Ware, St. Thomas's Hospital; A. S. Wohlmann, Guy's Hospital; Emily Elizabeth Wood, London School of Medicine and Royal Free Hospital; J. Young, Guy's Hospital.

Second Division.—C. F. M. Althorp, Yorkshire College; V. B. Bennett, University College, Liverpool; E. H. Biddlecombe, St. Bartholomew's Hospital; J. A. Codd, B.Sc., Yorkshire College; T. A. Dukes, B.Sc., St. Thomas's Hospital; H. A. Eccles, St. Bartholomew's Hospital; W. W. Kennedy, St. Bartholomew's Hospital; M. Nicklin, Queen's College and General Hospital, Birmingham; G. D. Parker, St. Bartholomew's Hospital; C. H. Preston, Owens College and Manchester Royal Infirmary; E. L. Pritchard, King's College; C. E. Salter, Guy's Hospital; F. P. Sarjant, Guy's Hospital; A. E. Tebb, Guy's Hospital; A. Thomas, Guy's Hospital; Ethel Mary N. Williams, London School of Medicine for Women; J. G. Wilson, London Hospital.

SOCIETY OF APOTHECARIES OF LONDON.

PASS LIST, November, 1891. The following candidates passed in:

Surgery.—F. G. Bullmore, St. Mary's Hospital; G. R. S. Breeze, Royal Free Hospital; R. T. Cassal, University College; J. Crooks, Toronto; A. T. Duka, Cambridge University and St. George's Hospital; R. K. Ellis, St. Thomas's Hospital; P. Goold, Cork; A. W. C. Herbert, St. Mary's Hospital; J. P. Jones, London Hospital; P. G. Laver, St. Thomas's Hospital; C. W. H. Newington, St. Bartholomew's Hospital; R. E. Nichols, St. Mary's Hospital; D. Nowroji, Madras; S. J. Roberts, Guy's Hospital; H. E. Simpson, St. Bartholomew's Hospital.

Medicine, Forensic Medicine, and Midwifery.—F. J. A. Baldwin, London Hospital; P. C. Bardsley, Cambridge University and University College; W. Kershaw, London Hospital; F. Turner, University College; A. R. Walters, London Hospital.

Medicine and Forensic Medicine.—G. R. S. Breeze, Royal Free Hospital; J. R. Daly, Manchester; R. Freer, Cambridge University and St. Mary's Hospital.

Medicine and Midwifery.—R. S. Fairbank, King's College; E. A. Humphreys, Manchester.

Medicine.—J. N. L'Estherre, St. Mary's Hospital; W. E. S. Jones, Guy's Hospital.

Forensic Medicine.—G. W. Lilley, Yorkshire College, Leeds; W. Loades, Middlesex Hospital; A. Paling, Middlesex Hospital; J. D. H. Smyth, St. Mary's Hospital; H. J. Thomas, Bristol.

Midwifery.—T. F. Daniels, Manchester; P. A. Shore, Birmingham; W. R. Thomas, London Hospital and Montreal.

To Messrs. Baldwin, Bardsley, Bullmore, Cassal, Crooks, Daniels, Duka, Herbert, Kershaw, Paling, Smyth, Thomas (H. J.), Thomas (W. R.), Turner, and Walters was granted the diploma of the Society, entitling them to practise medicine, surgery and midwifery, enabling the holder to compete for medical appointments in the army, navy, and India service, also for Poor-law appointments.

folded in three, it is liable to get into the folds of newspapers in passing through the post, and so get lost or delayed.

The best form of certificate is that measuring 9 inches by $5\frac{1}{2}$ inches, but it should be printed on cartridge or other stiff paper, so that when folded in three it is not flimsy, and liable to be torn in the post.

All certificates should have a note printed on the back that they must not be fastened in any way by gum, wax, wafer, or postage stamp, if it is desired that they pass through the post for *id.* Gentlemen who are medical officers of health for several sanitary districts will find it to their advantage to have certificates for different districts printed on paper of different colours.

RECOVERY OF FEES FOR CHILDREN IN INFECTIOUS HOSPITALS.

M.O.H. writes: In the case of children admitted to our infectious diseases hospital, the clerk to my board advises that the cost of their maintenance while inmates cannot be subsequently recovered from the parents, on the ground that Section 132 of the Public Health Act mentions specifically the "patient" as the person liable. Surely such opinion must be incorrect.

I am, of course, well aware of the disadvantages attaching to an attempt to recover cost of maintenance in an isolation hospital; but unfortunately I not infrequently fail to persuade my authority of the wisdom of my views, and at the present time the clerk's opinion is not only resulting in considerable objection on the part of my authority to the use of the hospital, but also indirectly leads to grave administrative difficulties in the management of the institution when occupied.

. The opinion of the clerk is probably right—see note to Section 132 in Vesey Fitzgerald's Public Health Act, page 137. Any authority which wishes for a binding decision on the point can, of course, bring an action for the expenses incurred, and take it on appeal to the High Court of Justice.

LEAD IN VESSELS USED FOR PRESERVED FOOD.

THE presence of lead in the vessels used for preserved foods, and the danger thereby caused to the health of the consumer, is a matter demanding more attention than it has hitherto received in this country. There can be no doubt that a most salutary improvement would be effected if it were found possible altogether to discard lead and tin in the manufacture of the vessels which are at present necessary in the preserved food industries. It is true that the dangers arising from the use of these metals have in some respects been exaggerated, more especially in the case of tin, and that by far the greater number of the cases of acute poisoning traced to the use of canned goods have been due to substances of the nature of ptomaines rather than to metallic compounds. Lead, however, is a poisonous metal of a particularly dangerous kind. It easily enters into combination with a variety of substances, and it does so, apparently, under a variety of conditions, forming compounds which are readily absorbed; while the well-known "cumulative" property of the compound of lead, when steadily introduced into the system, even in exceedingly minute quantities, makes its introduction an especially insidious form of poisoning. It is probable that the "cumulative" property is possessed in varying degrees by several other metals, but, with the exception of mercury and arsenic when introduced in particular forms, there are none which appear to be capable of exercising this property in so effective a manner, if the term may be used, as lead. According to some recently published results, it appears that in regard to the solder used for closing cans, the composition may vary at different parts of the same vessel, that used for finally closing the can, after sterilisation, being usually richest in lead, on account of its greater fusibility and consequent ease of working. A can of American fruit was found to be "tinned" with an alloy containing 0.55 per cent. of lead, while its solder under the lid contained 50.84 per cent. of this metal. Another can containing corned beef was found to contain only traces of lead in the "tinning," while the solder under the lid was of the same composition as that above referred to, containing 50.06 per cent. of lead.

It is to be remembered that food materials may become contaminated with lead by being preserved in vessels of glass or earthenware containing lead compounds, and it therefore becomes a matter of importance to see that lead-free glass and earthenware not glazed by the acid of oxide of lead shall be used for the purpose, if adequate steps are to be taken to prevent all chance of the introduction of lead into the food. It seems that in Germany a definite limit is prescribed by law for the amount of lead in the tin-plate covering of vessels containing preserved foods and in the solder used to close them. This is, no doubt, a step in the right direction; and as no regulation whatever of this kind exists in Great Britain,

we can hardly criticise it with the view of suggesting improvements upon it. The fact remains, however, that if canning must be adhered to, it would be better to enforce its being carried out in such a way as to prevent the contact of the food with any metallic surface. This has been successfully accomplished by the use of an inner vessel, but, of course, increased cost of production is a necessary consequence.

MEDICAL NEWS.

THE German Emperor has conferred the Order of the Red Eagle, Second Class, on Professor Thiersch, of Leipzig.

THE first cremation at Venice took place on October 31st, in the new crematorium at San Michele.

THERE is said to be a serious outbreak of typhoid fever at Weston Favell, in the Northampton Union.

THE Nurses' Home and College Hospital at Plaistow were opened on November 20th by Lady Maud Wolmer, in the absence of the Duchess of Westminster.

DR. MILLER, Professor of Dentistry in the University of Berlin, has accepted an invitation to occupy the Chair of Histology in the University of Pennsylvania.

A CHAIR of Otology has recently been established in the Czech University of Prague, to which Dr. Kaufmann—till recently *Privat-docent* of that subject in the University—has been appointed.

HERR VON GOSSLER, the late Cultus-Minister of Prussia, has been elected an honorary member of the Danzig Natural Science Society in recognition of his services in the furtherance of scientific knowledge during his official career.

At the meeting of the Epidemiological Society on November 18th, 1891, Dr. Jos. Ewart delivered his presidential address, which he devoted to the subject of the evolution of the germ theory of disease as exhibited in the life-work of Pasteur.

DURING the summer vacation, the sanitary arrangements at the Royal College of Surgeons have been reinstated under the direction of Professor Corfield, and the architect Mr. Stephen Salter. The old drains have been removed throughout and new watertight drains laid. The internal sanitary arrangements have also been renewed.

SCIENTIFIC MISSIONS.—Dr. Fernand Lagrange, well known in this country as well as in France as the author of some valuable works on physical training and exercise, has been commissioned by the French Government to study matters relating to medical gymnastics in Germany and Austria.—Dr. Lejard, of Paris, has been sent to Spain to pursue certain inquiries as to the treatment of scrofula and tuberculosis.

TYPHOID FEVER AT CHICAGO.—Typhoid fever is prevalent at Chicago to an extent that is beginning to cause some alarm, especially in view of the forthcoming "World's Fair." The cause is said to be the low water in Lake Michigan and the exceeding foulness of the river. It is to be hoped that the authorities will lose no time in setting their sanitary house in order.

ARRANGEMENTS have been made to issue a quarterly *Journal of Pathology* specially devoted to "scientific memoirs on pathological subjects, doctrines of diseased actions, general pathology and bacteriology." It will be edited by Dr. G. Sims Woodhead, with the assistance of Dr. Sidney Martin and Dr. Armand Ruffer.—We learn that a *Journal of Pathology and Bacteriology*, to be edited by Professor Roy, F.R.S., is also in contemplation.

UNDER the care of the Institute for the Deaf and Dumb in Glasgow there are at present 600 deaf-mutes. The accommodation for them being very inadequate, an attempt is being made to raise a sum sufficient to acquire suitable ground and erect a convenient building. The members of the institute succeeded in raising funds for the building, but an additional £5,000 was wanted for the ground. This was more than secured by a bazaar opened last week by the Duchess of Montrose.

HOSPITAL SUNDAY IN CUMBERLAND AND WESTMORELAND.—The report of the committee which has just been issued shows that during the past year the Cumberland Infirmary received as its share of the collections £510, the Carlisle Dispensary £60, the Carlisle Fever Hospital £75, and the Silloth Convalescent Institution £100. Since the fund was organised in 1870 a sum of over £24,000 has been distributed by the committee.

VETERANS OF MEDICINE.—On November 5th the Nestor of the Berlin profession, Dr. M. Steinthal, who is now 93 years of age, celebrated the seventieth anniversary of his taking his doctor's degree. Many years ago he was President of the Hufeland Society; he was also the founder of the Berlin Medical Benevolent Fund.—On November 6th Dr. Moritz Meyer, of Berlin, celebrated his seventieth birthday. He was one of the first physicians in Germany who took up the subject of electro-therapeutics in a scientific spirit, and his writings have powerfully contributed to place that department of medical practice on a sound basis.

ABERDEEN MEDICO-CHIRURGICAL SOCIETY.—The annual meeting of this Society was held on November 19th, when the following office-bearers were elected for the year: *President*: Dr. Robert J. Garden. *Vice-President*: Dr. Angus Fraser. *Secretary*: Dr. George M. Edmond. *Recording Secretary*: Dr. Alexander MacGregor. *Treasurer*: Dr. John Gordon. *Librarian*: Dr. George Rose. *Council*: Drs. Ligertwood, Cash, Rose, Williamson, and Rodger. The annual report of the Council of the Society showed that the membership was, owing to the mortality amongst the members, slightly reduced. The funds were in a prosperous condition.

THE LISBON MEDICO-CHIRURGICAL SCHOOL.—The terrible gale of November 4th, which caused such widespread destruction in this country, seems to have caused some damage to the Medico-Chirurgical School at Lisbon. The *Correio Medico* hardly attempts to conceal its disappointment that the "ancient and decrepit building" was not blown down, but it comforts itself with the assurance that some future meteorological crisis will complete the work of destruction. There will then, our contemporary thinks, be a chance that the new buildings, which have been so long in the purely ideal stage, may become "materialised."

DURHAM UNIVERSITY ANNUAL MEDICAL DINNER.—The above took place on November 18th at the County Hotel, Newcastle, and in every way proved a great success. Dr. Limont and Professor Bedson occupied the chair and vice-chair respectively, and amongst others present were Drs. F. Page, Howden, Gibson, Arnison, Morrison, Nesham, McBean, and Stroud, the resident staff and students being also well represented. The many toasts were well proposed and ably responded to, while the evening's proceedings were much enlivened by numerous songs. Altogether the Committee, with their energetic Secretaries, Messrs. R. Daniel and T. C. Visser, must be congratulated.

NATIONAL DENTAL HOSPITAL.—The annual dinner of the staff and past and present students of the National Dental Hospital was held at the Holborn Restaurant on November 20th, Mr. John Langton in the chair. After distributing the prizes the Chairman, in proposing the toast of the evening, "The Dental Hospital and College," commented on the thoroughness of the work done there and the success of the students at their examinations. Mr. Weiss, the Dean, in replying, stated that during the last few years the patients had increased from 3,000 to 40,000, and probably in a short time the hospital accommodation would be largely increased, as it was intended to erect a more appropriate building. Other toasts were proposed and the proceedings terminated.

THE LATE MR. T. HYDE HILLS.—The death of Mr. T. H. Hills, the senior partner for many years in the firm of Jacob Hills and Co., the well-known pharmaceutical chemists, will be learnt by many medical men with great regret. He was for a long series of years a much-esteemed member of a large circle of scientific and artistic friends, so that his Friday evening dinners came to rank among the social institutions of London. His large charity, kindness of heart, upright good sense, and affectionate friendship endeared him to all his friends. For some years he has been withdrawn from active life by labial paralysis; but he will not easily be forgotten,

and the memory of his kindly personality and unostentatious but delightful hospitalities, in which medical friends were always represented, forms part of the social history of his time.

THE MAIN DRAINAGE OF LONDON.—For the purpose of ascertaining accurately at all times the volume of sewage chemically treated at the Barking outfall works, it is intended to construct three gauging weirs, as well as a self-registering side gauge, similar to those now in use at the Abbey Mills and Isle of Dogs pumping stations. The Council have been endeavouring to obtain a suitable vessel to be used specially for examining the condition of the river and its foreshores, and for other purposes connected with the main drainage. So far their efforts have not been successful, as they are limited in price to £1,500, and it is not thought possible to obtain a suitable craft for that sum. It is now intended to ask to have the price raised to £2,500, and to have a new vessel constructed to meet their requirements. During the week ended November 14th, 10,000 tons of sludge were sent to sea from the northern outfall, the amount remaining in stock being about 7,000.

MEDICAL PRACTITIONERS IN JAPAN.—According to the *Sei-I-Kwai Medical Journal* of September 26th, the total number of medical practitioners in Japan at the end of 1888 was 40,940, being an increase of 61 as compared with the previous year. At the end of 1889 the number had grown to 41,405, but this increase was only apparent, as it had not kept pace with the increase in the population. The total number of midwives at the end of 1888 was 30,860, and at the end of 1889 32,111. On comparing the numbers of these disciples of Lucina for several previous years, it is seen that their number has been slowly but steadily increasing year by year. The number of hospitals in 1888 was 504, being an increase of 48, as compared with the foregoing year. Of these new hospitals, no fewer than 47 were private institutions, which seems to show that the question of special hospitals has at least as much "actuality" in Japan as among ourselves. In 1889 the number of hospitals had risen to 573.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are Dr. J. F. Pereira, of Lisbon, physician, engineer, and agriculturist, well known both as a teacher and writer, whose chief literary and practical work, however, was not done in the domain of medicine; Dr. Antonio Fernandez Carril, a prominent practitioner of Madrid; Dr. José Seco y Baldor, formerly Dean of the Medical Faculty of the Central University of Madrid, President of the Royal Spanish Academy of Medicine, and Alcalde of Madrid; Dr. Kroll, of Crefeld, a rising oculist and a well-known medical journalist; Dr. Pierre Colombe, of Lisieux, who died of diphtheria caught from a patient, aged 37; Dr. Henri Roger, formerly President of the Académie de Médecine and of the General Association of French Medical Men, aged 83; Dr. J. M. Romero, Professor of Anatomy and Operative Surgery in the University of Lima (Peru); Dr. E. Reichardt, Extraordinary Professor of Pharmacy and Chemistry in the University of Jena, aged 64; Dr. Ripoll, Professor in the Medical Faculty of Toulouse; and Dr. A. Bleynie, Professor in the Medical School of Limoges.

LITERARY INTELLIGENCE.—We have received the first number of *The New York Journal of Gynecology and Obstetrics*, which is edited by Dr. A. H. Buckmaster and J. D. Emmet, with the collaboration of Dr. T. A. Emmet, T. Gaillard Thomas, Howard A. Kelly, and others. It contains an article on the Misapplication of the Obstetric Forceps, by Dr. Malcolm McLean; one on Sterility in the Nullipara, by Dr. J. D. Emmet; one on a Case of Twin Intra- and Extrauterine Pregnancy Treated by Electricity, by Dr. G. H. Whitcomb; besides reviews, reports of societies, etc. It is intended that the *Journal* "shall be pre-eminently American;" the chief energies of the editorial staff being devoted to chronicle the ideas and achievements of their fellow-countrymen. The *Journal*, which is published by Messrs. Fairchild and Co., of New York, is to appear monthly.—The first number of a new weekly medical paper entitled *Le Languedoc Médical* appeared in Paris on November 6th; it is edited by Drs. Artigas and Rémond, and is intended to be the organ of the medical faculty of Toulouse.—The directors of the four municipal

hospitals of Berlin—Moabit, Friedrichshain, Urban, and the Dalldorf Lunatic Asylum, propose to publish jointly a *Jahrbuch* on the lines of the "Clinical Year Book of the Prussian Universities," founded by the late Cultus Minister Herr von Gossler.

THE UNIVERSITY OF COIMBRA.—From particulars furnished by our Portuguese contemporary, the *Coimbra Medica*, it appears that the medical curriculum in the University of that city is of five years' duration. The first year is devoted to normal anatomy, histology and general physiology; the second to topographical anatomy and operative surgery, special physiology and private hygiene, pathological anatomy and histology, and toxicology; the third to *materia medica* and pharmacology, surgical pathology, general pathology and history of medicine; the fourth to internal pathology, obstetrics and clinical surgery; and the fifth to clinical medicine, forensic medicine, and public hygiene. The University is provided with several laboratories and museums for practical teaching. Besides dissecting rooms and an anatomical museum, there are histological workrooms and a physiological laboratory; a workroom and museum of morbid anatomy and histology; an "arsenal" of operative surgery; laboratories of clinical medicine and toxicology, microbiology, *materia medica* and pharmacy, and a "pharmaceutical dispensary." There are four clinics, two medical, one surgical, and one obstetrical (gynecology is nowhere mentioned, but perhaps it is included in the "toecological" department). Before entering the faculty of medicine students are obliged to go through a three years' course of preliminary study in the Mathematical and Philosophical Faculties. The first of these years is occupied with mathematics, inorganic and analytical chemistry; the second with organic and analytical chemistry and physics; and the third with botany, zoology, and advanced physics. The total course of study for the degree of Bachelor of Medicine is therefore of eight years' duration. For the higher degrees of Licentiate and Doctor further courses of special study are required, and they are only taken by "distinguished students."

MEDICAL VACANCIES.

The following Vacancies are announced:

- BALLYVAUGHAN UNION, BALLYVAUGHAN DISPENSARY.—Medical Officer. Salary, £115 per annum and fees. Applications to Mr. Michael Macnamara, Honorary Secretary. Election on December 10th.
- BISHOP'S STORTFORD UNION.—Medical Officer and Public Vaccinator for the Sawbridgeworth District. Salary, £69 per annum, with vaccination and other fees. Applications marked "Medical Officer's appointment" to H. Barker, Clerk to the Guardians, Bishop's Stortford, by November 30th.
- 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, 21, Finsbury Circus, E.C., by December 10th.
- CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST, Victoria Park, E.—Pathologist. Salary, £105 per annum. Applications to the Secretary, 21, Finsbury Circus, by December 7th.
- DARLINGTON HOSPITAL AND DISPENSARY.—House-Surgeon; doubly qualified; unmarried. Salary, £100 per annum, with board and lodging. Applications to the Honorary Secretary, 88, Northgate, Darlington, by November 30th.
- DENTAL HOSPITAL OF LONDON, Leicester Square.—Dental Surgeon; must be Licentiate in Dental Surgery. Applications to J. Francis Pink, Secretary, by December 14th.
- DENTAL HOSPITAL OF LONDON, Leicester Square.—Assistant Dental Surgeon; must be Licentiate in Dental Surgery. Applications to J. Francis Pink, Secretary, by December 14th.
- DENTAL HOSPITAL OF LONDON, Leicester Square.—Assistant Anæsthetist. Application to J. Francis Pink, Secretary, by December 14th.
- DERBY BOROUGH ASYLUM.—Assistant Medical Officer, unmarried, doubly qualified, and under 30 years of age. Salary, £100 per annum, with board, lodging, and washing. Applications to the Medical Superintendent by December 7th.
- DUDLEY DISPENSARY.—Resident Medical Officer, doubly qualified. Salary, £130 per annum, with house, coals, gas, and water. Applications to H. C. Brettell, Honorary Secretary, before December 1st. Election on December 16th.
- HOSPITAL FOR SICK CHILDREN, Great Ormond Street, Bloomsbury, W.C.—Surgical Registrar and Anæsthetist. Appointment for one year. Honorarium, £40. Applications to the Secretary by December 1st.
- HULL ROYAL INFIRMARY.—Senior House-Surgeon, unmarried. Salary, 120 guineas per annum, with board and furnished apartments. Applications to the Chairman of the House Committee by December 1st.

- HULL ROYAL INFIRMARY.—Assistant House-Surgeon. Salary, £80 per annum, with board and furnished apartments. Applications to the Chairman of the House Committee by December 1st.
- METROPOLITAN ASYLUMS BOARD.—Medical Superintendent of the Eastern Fever Hospital, Homerton, N.E.; doubly qualified. Salary, £500 per annum, with unfurnished residence, coals, gas, and washing. Applications on forms to be obtained at the chief offices of the Metropolitan Asylums Board, Norfolk House, Norfolk Street, W.C., to be sent in by December 1st.
- NEWCASTLE-ON-TYNE DISPENSARY.—Visiting Medical Assistant; doubly qualified. Salary, £120 per annum. Applications to R. W. Sisson, Honorary Secretary, by December 4th.
- NORTH-EASTERN HOSPITAL FOR CHILDREN, Hackney Road, N.E.—Junior House-Surgeon; doubly qualified. Salary, £60 per annum. Applications to Alfred Nixon, Secretary, 27, Clement's Lane, E.C., by December 5th.
- NORTHERN INFIRMARY, Inverness.—House-Surgeon and Apothecary. Salary, £100 per annum, with board, etc. Applications to Duncan Shaw, Honorary Secretary, 42, High Street, Inverness, by December 12th.
- NORTH STAFFORDSHIRE INFIRMARY AND EYE HOSPITAL, Harts Hill, Stoke-upon-Trent.—House-Physician; doubly qualified. Salary, £100 per annum, increasing £10 yearly, with furnished apartments, board, and washing. Applications to the Secretary by December 28th.
- NORTH STAFFORDSHIRE INFIRMARY AND EYE HOSPITAL, Harts Hill, Stoke-upon-Trent.—Assistant House-Surgeon. Appointment for six months. Board, apartments, and washing provided. Applications to the Secretary by November 30th.
- OWENS COLLEGE, Manchester.—Professor of Pathology. Salary, £650 per annum. Applications to the Registrar by November 30th.
- ROYAL ALBERT HOSPITAL, Devonport.—Resident Medical Officer, unmarried, doubly qualified. Salary, £100 per annum, with board and lodging. Applications, on forms to be obtained of the Secretary, to the Chairman of the Selection Committee by December 12th.
- ROYAL INFIRMARY, Bristol.—Honorary Obstetric Physician. Applications to the Secretary by December 5th.
- ST. COLUMB MAJOR UNION, St. Columb.—District Medical Officers and Public Vaccinators for the No. 1 and No. 5 Districts. Salary for No. 1 District, £26 5s.; for No. 2 District, £20 per annum, with usual fees. Applications to G. B. Collins, Clerk, by December 8th.
- SHEFFIELD PUBLIC HOSPITAL AND DISPENSARY.—Physician. Applications to the Secretary by December 5th.
- STAFFORDSHIRE GENERAL INFIRMARY, Stafford.—House-Surgeon, doubly qualified. Appointment for two years. Salary, £100 per annum, with board, lodging, and washing. Applications under cover to the Secretary of the Infirmary, Old Bank, Stafford, by November 28th.
- SUNDERLAND INFIRMARY.—House-Surgeon, doubly qualified. Salary £80 per annum, rising £10 annually to £100, with board and residence. Applications to the Chairman of the Medical Board by December 31st.
- VICTORIA HOSPITAL FOR SICK CHILDREN, Hull.—House-Surgeon. Salary, £50 per annum with board, and furnished room. Applications to the Secretary by November 30th.
- WESTERN GENERAL DISPENSARY, Marylebone Road, N.W.—Honorary Surgeon; must be F. or M.R.C.S. Eng. Applications to the Honorary Secretary by December 14th.
- WEST LONDON HOSPITAL, Hammersmith Road, W.—House-Physician. Appointment for six months. Board and lodgings provided. Applications to R. J. Gilbert, Secretary-Superintendent, by December 9th.
- WEST LONDON HOSPITAL, Hammersmith Road, W.—House-Surgeon. Appointment for six months. Board and lodgings provided. Applications to R. J. Gilbert, Secretary-Superintendent, by December 9th.
- WOLVERHAMPTON EYE INFIRMARY.—House-Surgeon. Salary, £60 per annum, with rooms, board, and washing. Applications to W. Blake Burke, Secretary, by December 14th.
- WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL, Wolverhampton.—Resident Assistant. Appointment for six months. Board and washing provided. Applications sealed and inscribed "Applications for Resident Assistant," to the Chairman of the Medical Committee by December 3rd.
- YORK COUNTY HOSPITAL.—Senior House-Surgeon, doubly qualified. Salary, £100 per annum, with board and residence. Applications to C. E. Pinfold, Secretary, by December 12th.

MEDICAL APPOINTMENTS.

- ADAMS, Thomas Rutherford, M.D., J.P., appointed Consultant to the Croydon General Hospital.
- BANKS, A., L.R.C.P., M.R.C.S., appointed Clinical Assistant in the Skin Department of St. Thomas's Hospital.
- BEAVER, Atwood, M.B., C.M. Vict., appointed Second Assistant Medical Officer to the Berks Asylum, Moulsoford.
- Box, C. R., B.Sc. Lond., L.R.C.P., M.R.C.S., appointed Assistant House-Surgeon to St. Thomas's Hospital.
- BROWN, Jas. M., M.B., C.M. F.R.C.P. Lond., appointed Assistant-Physician to the Royal Infirmary, Edinburgh.
- BUNTON, Louis C., M.B., B.Ch., B.A.O., R.U. Irel., appointed Demonstrator of Anatomy at the Queen's College, Galway.
- BUTTERFIELD, Harris, M.R.C.S. Eng., I.S.A., reappointed Medical Officer of Health for the Cranbrook Union.

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

DALGLEISH, Charles A. S., M.B., M.S.Durh., appointed House-Physician to the Radcliffe Infirmary, Oxford, *vice* J. G. Ogle, M.A., L.R.C.P. Lond., M.R.C.S.Eng.

DALZELL, A., L.R.C.P., M.R.C.S., appointed Clinical Assistant in the Throat Department of St. Thomas's Hospital.

DUNCAN, J. H., M.B., C.M., appointed Clinical Assistant to the Dundee Royal Asylum, *vice* William Peach Hay, M.B., C.M.

FITZGERALD, Michael, L.R.C.P., L.R.C.S. Edin., appointed Medical Officer to the Ballyroan Dispensary District, Queen's County.

GERVIS, A. F., M.R.C.S., L.R.C.P., appointed Medical Officer to the Haverstock Hill and Malden Road Provident Dispensary.

HARPER, J. R., L.R.C.P., M.R.C.S., appointed House-Surgeon to St. Thomas's Hospital (extension).

HAYDON, T. H., B.A., M.B., B.C. Cantab., L.R.C.P., M.R.C.S., appointed House-Surgeon to St. Thomas's Hospital (extension).

HAYES, H. W. McCauly, M.R.C.P.E., L.R.C.S. Edin., L.F.P. & S. Glas., and L.M., appointed Medical Officer for the Wroughton District of the Swindon and Highworth Union, and Public Vaccinator, *vice* G. R. Schemilt, deceased.

HUMPHRY, Sir George Murray, M.D. Cantab., F.R.S., F.R.C.S. Eng., re-appointed Surgeon to Addenbrooke's Hospital, Cambridge.

JONES, David, L.R.C.P., L.R.C.S., L.S.A., appointed Medical Officer to the St. Helen's Medical Association, *vice* D. G. V. Fourquemin, resigned.

KELLOCK, T. H., M.A., M.B., B.C. Cantab., F.R.C.S., L.R.C.P., appointed Assistant House-Surgeon to St. Thomas's Hospital.

KELLY, Robert W., L.R.C.S., L.K.Q.C.P. Irel., appointed Medical Officer to the Workhouse of the Claremorris Union, *vice* John P. Burke, M.D.

LATTER, C., B.A., M.B., B.C. Cantab., appointed Resident House-Physician to St. Thomas's Hospital.

LIPSCOMB, Eustace H., M.B., B.C. Camb., L.R.C.P. Lond., M.R.C.S., appointed Medical Visitor to the Lunatic Asylum, Harpenden.

LIPSCOMB, J. T. N., M.D. St. And., F.R.C.S. Eng., reappointed Medical Visitor to the Lunatic Asylum, Harpenden.

LONGHURST, B. W., M.R.C.S., L.R.C.P., appointed House-Surgeon at King's College Hospital, *vice* J. J. N. Morris, resigned.

LOWSON, Geo. M.B., C.M. Glas., appointed Medical Officer for the Eastern District of the City of Dundee, *vice* Dr. Mathers, resigned.

PERKINS, J. J., B.A. Cantab., L.R.C.P., M.R.C.S., appointed Resident House-Physician to St. Thomas's Hospital.

PURVIS, W. P., B.Sc. Lond., L.R.C.P., M.R.C.S., appointed Non-resident House-Physician to St. Thomas's Hospital.

REES, Hugh, M.R.C.S., reappointed Medical Officer of Health for the Carnarvonshire Combined Sanitary District.

RUSSELL, William, M.D., C.M., F.R.C.P. Edin., appointed Assistant-Physician to the Royal Infirmary, Edinburgh.

SCUDAMORE, L. G., L.R.C.P., M.R.C.S., appointed Clinical Assistant in the Skin Department of St. Thomas's Hospital (extension).

SHEARER, D. F., B.A., B.M., B.Ch. Oxon., appointed Non-resident House-Physician to St. Thomas's Hospital (extension).

SOMERVILLE, James W., M.B., C.M. Edin., appointed Medical Officer of Health for Galashiels, *vice* J. J. Hardesty, L.R.C.P. Edin.

STRONG, Henry John, M.D., J.P., appointed Consultant to the Croydon General Hospital.

STUART, Charles, M.B., C.M. Edin., appointed House-Surgeon to the County and City Royal Infirmary, Perth, *vice* Dr. R. Haldane Cook, resigned.

SUTHERLAND, G. A., M.A., M.B., M.R.C.P., appointed Physician to the North London Hospital for Consumption.

TAYLOR, Frederick, M.D. F.R.C.P. Lond., appointed Medical Officer of the General Insurance Company, *vice* Sir J. Risdon Bennett.

TEIXEIRA, Juan, L.R.C.P., L.R.C.S. Edin., appointed Supernumerary Medical Officer to the British Guiana Government.

TOLLER, S. G., L.R.C.P., M.R.C.S., appointed Junior Ophthalmic House-Surgeon to St. Thomas's Hospital.

TYNDALE, W. R., M.B., C.M. Aberd., L.R.C.P. Lond., M.R.C.S., reappointed Medical Officer of Health for the Hampton Sanitary District of the Kingston Union.

UMNEY, W. F., M.B. Lond., L.R.C.P., M.R.C.S., appointed Senior Obstetric House-Physician to St. Thomas's Hospital.

USHER, C. H., B.A., M.B., B.C. Cantab., appointed Senior Ophthalmic House-Surgeon to St. Thomas's Hospital (extension).

WAINWRIGHT, W. L., L.R.C.P., M.R.C.S., appointed Junior Obstetric House-Physician to St. Thomas's Hospital.

WALLACE, C. S., L.R.C.P., M.R.C.S., appointed Clinical Assistant in the Ear Department of St. Thomas's Hospital.

WHERRY, George Edward, M.A., M.B. Cantab., F.R.C.S. Eng., reappointed Surgeon to Addenbrooke's Hospital, Cambridge.

WYMAN, C. M.A., M.B., B.C. Cantab., L.R.C.P., M.R.C.S., appointed House-Surgeon to St. Thomas's Hospital (extension).

DIARY FOR NEXT WEEK.

MONDAY.

LONDON POST-GRADUATE COURSE, Royal London Ophthalmic Hospital, Moorfields, 1 P.M.—Mr. A. S. Morton: On Ocular Injuries. Hospital for Sick Children, Great Ormond Street, 4 P.M.—

Mr. Bernard Pitts: Selected Surgical Cases from the Out-patient Department. Great Northern Central Hospital, 8 P.M.—Dr. Galloway: Malignant Growths.

MEDICAL SOCIETY OF LONDON, 8.30 P.M.—Dr. Savill: The Epidemic Skin Disease at the Paddington Infirmary; illustrated by Drawings and Microscopical Specimens. Patients will be shown at 8 P.M. Dr. Haig: A case of Raynaud's Disease with Paroxysmal Hemoglobinuria.

TUESDAY.

LONDON POST-GRADUATE COURSE, Bethlem Hospital, 2 P.M.—Dr. Percy Smith: Alcoholic Insanity. Hospital for Diseases of the Skin, Blackfriars, 4 P.M.—Dr. J. F. Payne: On Bacteria in Relation to Diseases of the Skin.

PATHOLOGICAL SOCIETY OF LONDON, 8.30 P.M.—Dr. J. J. Clarke: (1) Dilatation of Sphenoidal Sinus into which the Left Internal Carotid Artery opens. (2) Imperforate Rectum, with Accidental Result of Exploratory Operation. Mr. J. Bland Sutton: Implantation Cyst from an Ox. Mr. S. G. Shattock: Pigmentation of the Glans in the Negro after Circumcision. Dr. H. D. Rolleston: Liver with Nodular Cirrhosis. Dr. F. C. Turner: Endocarditis, with Softening on the Right and Hemorrhage on the Left Side of the Brain. Card Specimens: Dr. H. D. Rolleston: (1) Gall Stones Encysted in a Sacculus of the Gall Bladder. (2) Bifid Apex of the Heart. Dr. F. C. Turner: Sarcoma at Root of Right Lung invading Right Bronchus and Superior Vena Cava.

WEDNESDAY.

LONDON POST-GRADUATE COURSE, Hospital for Consumption, Brompton, 4 P.M.—Dr. Robert Maguire: On Aneurysm of the Aorta. Royal London Ophthalmic Hospital, Moorfields, 8 P.M.—Mr. J. B. Lawford: On Colour Blindness.

OBSTETRICAL SOCIETY OF LONDON, 8 P.M.—Specimens will be shown by Dr. John Phillips, Dr. Herman, and others. Dr. Herman: (1) On the Relation between Backward Displacements of the Uterus and Sterility and Abortion. (2) On the Relation between Backward Displacements of the Uterus and Prolonged Hemorrhage after Delivery and Abortion. Dr. J. Inglis Parsons: Twenty cases of Fibroma and other Morbid Conditions of the Uterus treated by Apostoli's method.

THURSDAY.

LONDON POST-GRADUATE COURSE, National Hospital for the Paralyzed and the Epileptic, Queen Square, 2 P.M.—Mr. R. Brudenell Carter: On Ocular Symptoms in Diseases of the Nervous System. Hospital for Sick Children, Great Ormond Street, 4 P.M.—Dr. Penrose: On Congenital Heart Disease. London Throat Hospital, Great Portland Street, 8 P.M.—Mr. George Bailey: On Anæsthetics.

HARVEIAN SOCIETY OF LONDON, 8.30 P.M.—Dr. J. F. Goodhart: The Harveian Lecture on Common Neuroses, the Neurotic Element in Disease and its Rational Treatment. Lecture III.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, 4 P.M.—Mr. J. W. Hulke: The Bradshaw Lecture: On some Mechanical Injuries of the Vertebral Column.

FRIDAY.

LONDON POST-GRADUATE COURSE, Bacteriological Laboratory, King's College, 11 A.M. to 1 P.M.—Professor Crookshank, Lecture: Typhoid Fever and Diphtheria. Practical Work: Examination of Sections. Hospital for Consumption, Brompton, 4 P.M.—Dr. R. Maguire: On Pulmonary Cavities.

WEST KENT MEDICO-CHIRURGICAL SOCIETY, Royal Kent Dispensary, Greenwich, 8 P.M.—Clinical evening. Living cases will be exhibited.

WEST-LONDON MEDICO-CHIRURGICAL SOCIETY.—Clinical Meeting. Cases will be exhibited by Dr. Abraham, Dr. Herringham, Dr. Clippingdale, Mr. Keetley, and Mr. Swinford Edwards.

SATURDAY.

LONDON POST-GRADUATE COURSE, Bethlem Hospital, 11 A.M.—Dr. Percy Smith: On Insanity due to Syphilis or Organic Brain Disease.

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.

DUCKWORTH.—On November 18th, at 11, Grafton Street, Piccadilly, London, the wife of Sir Dyce Duckworth, M.D., LL.D., of a son.

JESSOP.—On November 15th, at 73, Harley Street, W., the wife of Walter H. Jessop, M.B., F.R.C.S., of a daughter.

DEATHS.

DEAN.—On November 18th, suddenly, Thomas Nainby Dean, M.R.C.S., L.S.A., Honorary Lieutenant-Colonel 4th V.B.M.R., Honorary Consulting Surgeon Ardwick and Ancoats Dispensary, of Apsley Place, Ardwick, Manchester, in the 70th year of his age.

HINTON.—On November 16th, at his residence, Wellesley Court, Croydon, James Thomas Hinton, M.D., M.R.C.S., aged 44 years.

ROWLAND.—On October 22nd, at Philadelphia House, New Amsterdam, British Guiana, Lionel Stratford, aged 7½ months, infant son of Ernest Daniel Rowland, M.B., British Guiana Medical Service.

HOURS OF ATTENDANCE AND OPERATION DAYS AT THE LONDON HOSPITALS.

- CANCER, Brompton (Free).** *Hours of Attendance.*—Daily, 2. *Operation Days.*—Tu. S., 2.
- CENTRAL LONDON OPHTHALMIC.** *Operation Days.*—Daily, 2.
- CHARING CROSS.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetric, Tu. F., 1.30; Skin, M., 1.30; Dental, M. W. F., 9; Throat and Ear, F., 9.30. *Operation Days.*—W. Th. F., 3.
- CHELSEA HOSPITAL FOR WOMEN.** *Hours of Attendance.*—Daily, 1.30. *Operation Days.*—M. Th., 2.30.
- EAST LONDON HOSPITAL FOR CHILDREN.** *Operation Day.*—F., 2.
- GREAT NORTHERN CENTRAL.** *Hours of Attendance.*—Medical and Surgical, M. Tu. W. Th. F., 2.30; Obstetric, W., 2.30; Eye, Tu. Th., 2.30; Ear, M. F., 2.30; Diseases of the Skin, W., 2.30; Diseases of the Throat, Th., 2.30; Dental Cases, W., 2. *Operation Day.*—W., 2.
- GUY'S.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetric, M. Tu. F., 1.30; Eye, M. Tu. Th. F., 1.30; Ear, Tu., 1; Skin, Tu., 1; Dental, daily, 9; Throat, F., 1. *Operation Days.*—(Ophthalmic), M. Th., 1.30; Tu. F., 1.30.
- HOSPITAL FOR WOMEN, Soho.** *Hours of Attendance.*—Daily, 10. *Operation Days.*—M. Th., 2.
- KING'S COLLEGE.** *Hours of Attendance.*—Medical, daily, 2; Surgical, daily, 1.30; Obstetric, daily, 1.30; o.p., Tu. W. F. S., 1.30; Eye, M. Th., 1.30; Ophthalmic Department, W., 2; Ear, Th., 2; Skin, F., 1.30; Throat, F., 1.30; Dental, Tu. Th., 9.30. *Operation Days.*—Tu. F. S., 2.
- LONDON.** *Hours of Attendance.*—Medical, daily, exc. S., 2; Surgical, daily, 1.30 and 2; Obstetric, M. Th., 1.30; o.p., W. S., 1.30; Eye, Tu. S., 9; Ear, S., 9.30; Skin, Th., 9; Dental, Tu., 9. *Operation Days.*—M. Tu. W. Th. S., 2.
- LONDON TEMPERANCE HOSPITAL.** *Hours of Attendance.*—Medical, M. Tu. F., 2; Surgical, M. Th., 2. *Operation Days.*—M. Th., 4.30.
- METROPOLITAN.** *Hours of Attendance.*—Medical and Surgical, daily, 9; Obstetric, W., 2. *Operation Day.*—F., 9.
- MIDDLESEX.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetric, M. Th., 1.30; o.p., M. F., 9. W., 1.30; Eye, Tu. F., 9; Ear and Throat, Tu., 9; Skin, Tu., 4. Th., 9.30; Dental, M. W. F., 9.30. *Operation Days.*—W., 1, S., 2; (Obstetrical), W., 2.
- NATIONAL ORTHOPEDIC.** *Hours of Attendance.*—M. Tu. Th. F., 2. *Operation Day.*—W., 10.
- NORTH-WEST LONDON.** *Hours of Attendance.*—Medical and Surgical, daily, 2; Obstetric, W., 2; Eye, W., 9; Skin, Tu., 2; Dental, F., 9. *Operation Day.*—Th., 2.30.
- ROYAL FREE.** *Hours of Attendance.*—Medical and Surgical, daily, 2; Diseases of Women, Tu. S., 9; Eye, M. F., 9; Dental, Th., 9. *Operation Days.*—W. S., 2; (Ophthalmic), M. F., 10.30; (Diseases of Women), S., 9.
- ROYAL LONDON OPHTHALMIC.** *Hours of Attendance.*—Daily, 9. *Operation Days.*—Daily, 10.
- ROYAL ORTHOPEDIC.** *Hours of Attendance.*—Daily, 1. *Operation Day.*—M., 2.
- ROYAL WESTMINSTER OPHTHALMIC.** *Hours of Attendance.*—Daily, 1. *Operation Days.*—Daily.
- ST. BARTHOLOMEW'S.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetric, Tu. Th. S., 2; o.p., W. S., 9; Eye, W. Th. S., 2.30; Ear, Tu. F., 2; Skin, F., 1.30; Larynx, F., 2.30; Orthopaedic, M., 2.30; Dental, Tu. F., 9. *Operation Days.*—M. Tu. W. S., 1.30; (Ophthalmic), Tu. Th., 2.
- ST. GEORGE'S.** *Hours of Attendance.*—Medical and Surgical, M. Tu. F. S., 12; Obstetric, Th., 2; o.p., Eye, W. S., 2; Ear, Tu., 2; Skin, W., 2; Throat, Th., 2; Orthopaedic, W., 2; Dental, Tu. S., 9. *Operation Days.*—Th., 1; (Ophthalmic), F., 1.15.
- ST. MARK'S.** *Hours of Attendance.*—Fistula and Diseases of the Rectum, males, W., 8.45; females, Th., 8.45. *Operation Day.*—Tu., 2.
- ST. MARY'S.** *Hours of Attendance.*—Medical and Surgical, daily, 1.45; o.p., 1.30; Obstetric, Tu. F., 1.45; Eye, Tu. F. S., 9; Ear, M. Th., 3; Orthopaedic, W., 10; Throat, Tu. F., 1.30; Skin, M. Th., 9.30; Electro-therapeutics, Tu. F., 2; Dental, W. S., 9.30; Consultations, M., 2.30. *Operation Days.*—Tu., 1.30; (Orthopaedic), W., 11; (Ophthalmic), F., 9.
- ST. PETER'S.** *Hours of Attendance.*—M., 2 and 5. Tu., 2. W., 2.30 and 5. Th., 2. F. (Women and Children), 2. S., 3.30. *Operation Day.*—W., 2.
- ST. THOMAS'S.** *Hours of Attendance.*—Medical and Surgical, daily, exc. W. and S., 2; Obstetric, Tu. F., 2; o.p., W. S., 1.30; Eye, Tu., 2; o.p., daily, exc. S., 1.30; Ear, M., 1.30; Skin, F., 1.30; Throat, Tu. F., 1.30; Children, S., 1.30; Dental, Tu. F., 10. *Operation Days.*—W. S., 1.30; (Ophthalmic), Tu., 4, F., 2; (Gynaecological), Th., 2.
- SAMARITAN FREE FOR WOMEN AND CHILDREN.** *Hours of Attendance.*—Daily, 1.30. *Operation Day.*—W., 2.30.
- THROAT, Golden Square.** *Hours of Attendance.*—Daily, 1.30; Tu. and F., 6.30; *Operation Day.*—Th., 2.
- UNIVERSITY COLLEGE.** *Hours of Attendance.*—Medical and Surgical, daily, 1.30; Obstetrics, M. W. F., 1.30; Eye, M. Th., 2; Ear, M. Th., 9; Skin, W., 1.45; S., 9.15; Throat, M. Th., 9; Dental, W., 9.30; *Operation Days.*—W. Th., 1.30; S., 2.
- WEST LONDON.** *Hours of Attendance.*—Medical and Surgical, daily, 2; Dental, Tu. F., 9.30; Eye, Tu. Th. S., 2; Ear, Tu., 10; Orthopaedic, W., 2; Diseases of Women, W. S., 2; Electric, Tu., 10. F., 4; Skin, F., 2; Throat and Nose, S., 10. *Operation Days.*—Tu. F., 2.30.
- WESTMINSTER.** *Hours of Attendance.*—Medical and Surgical, daily, 1; Obstetric, Tu. F., 1; Eye, M. Th., 2.30; Ear, M., 9; Skin, W., 1; Dental, W. S., 9.15. *Operation Days.*—Tu. W., 2.

LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

COMMUNICATIONS FOR THE CURRENT WEEK'S JOURNAL SHOULD REACH THE OFFICE NOT LATER THAN MIDDAY POST ON WEDNESDAY. TELEGRAMS CAN BE RECEIVED ON THURSDAY MORNING.

COMMUNICATIONS respecting Editorial matters should be addressed to the Editor, 429, Strand, W.C., London; those concerning business matters, non-delivery of the JOURNAL, etc., should be addressed to the Manager, at the Office, 429, Strand, W.C., London.

In order to avoid delay, it is particularly requested that all letters on the editorial business of the JOURNAL be addressed to the Editor at the Office of the JOURNAL, and not to his private house.

AUTHORS desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL are requested to communicate beforehand with the Manager, 429, Strand, W.C.

CORRESPONDENTS who wish notice to be taken of their communications should authenticate them with their names—of course not necessarily for publication.

CORRESPONDENTS not answered are requested to look to the Notices to Correspondents of the following week.

MANUSCRIPTS FORWARDED TO THE OFFICE OF THIS JOURNAL CANNOT UNDER ANY CIRCUMSTANCES BE RETURNED.

PUBLIC HEALTH DEPARTMENT.—We shall be much obliged to Medical Officers of Health if they will, on forwarding their Annual and other Reports, favour us with duplicate copies.

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

QUERIES.

M.B. would be pleased to hear of any institution or home for a hysterical girl where treatment and board could be both obtained for about £2 a week. He is desirous of avoiding asylums for the insane.

E. W. writes: A laminaria tent, size of No. 4 catheter, readily enters the cervix uteri a distance of 2½ inches and no more. Is it likely that a three months' pregnancy would exist?

*** Under the circumstances stated it cannot be considered likely.

TACTUS writes: Will you state the name of the author of the *Code of Medical Ethics* (often quoted in the BRITISH MEDICAL JOURNAL), also the publisher of the book and its price?

*** Dr. Styrap; H. K. Lewis; 3s. net.

A. H. F. writes: There is an article by J. B. Smith on The Straight Splint in Elbow-joint Injuries, in the *New York Medical Journal*, 1874, vol. xx, p. 44-47. I have been quite unable to get this copy of the journal, and I write to ask if by any means I could get it copied from the British Medical Association library. Failing this would any of your readers be able to lend me the copy of the journal in question?

*** The *New York Medical Journal* of the date named is not in the library of the British Medical Association.

VACCINATION AND SCARLET FEVER.

M.R.C.S.E., L.R.C.P. Ed. asks: What effect has vaccination on the course of scarlatina? Does it delay the appearance of the sore throat and rash? A boy buys an old suit of clothes from a pawnshop on October 23rd and wears them. Being (apparently) in perfect health he is re-vaccinated on November 4th, and on November 11th is found to be in initial stage of scarlatina, rash just appearing (not vaccine roseola). Buist found by experiment that "yeast inoculation modified the virulences and vaccine poisons" (see page 122, *Vaccine and Variola*). Is it probable vaccination in this case prolonged the incubation stage, the presumed exposure being on October 23rd? The vaccine lymph could not be blamed, and there was no means by which the infection was likely to arise, except the old suit of clothes, so far as could be ascertained.

LIENTERIC DIARRHOEA IN THE ADULT.

NEMO asks for suggestions in the treatment of the following case, diagnosed as chronic gastro-enteric catarrh:—The patient, after a stay at a seaside resort, where the water was hard, returned home to an extremely soft water. Pain immediately after eating followed by diarrhoea almost at once has persisted for two years. Arsenic, bismuth, etc., were entirely useless. Peppine given before meals has proved very satisfactory, but its benefit is not permanent. Sometimes no diarrhoea for a fortnight, and then a violent attack, perhaps lasting a day, follows. The lungs are sound. The evening temperature is normal, he sleeps well, eats well, and is in good spirits. There is considerable nervous disturbance and neuralgia in the face. Urine specific gravity 1010. The diarrhoea is sometimes caused by nervous excitement and sometimes by an error in diet.

ANSWERS.

W. E. St. L. F.—The matter appears to be a private one, and to have no public interest.

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