

MEMORANDA:

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

AMYLOID DISEASE OF CEREBRAL CORTEX.

THE accompanying drawing shows a rare condition in a patient who died of general paralysis. For comparison cortical vessels from an ordinary general paralytic are shown.

The usual thickening of the vessels and proliferation of the nuclei are present in both specimens, but the capillaries are very different. In Fig. 1 they are much swollen, but have an almost structureless appearance, with a few ill-defined nuclei scattered here and there. These swollen capillaries are seen terminating in, traversing, or passing close to the side of irregular, deeply stained, faintly granular masses. This condition was not uniformly distributed, but occurred in patches, most abundantly around the bottom of the sulci, and chiefly in the lower layers of the grey matter.

To the naked eye the cortex showed nothing to lead one to expect anything unusual under the microscope. Fresh sections, stained with blue-black or china blue, exhibited a very obvious mottled appearance of the grey matter when held up to the light. With iodine and iodine and sulphuric acid the grey matter gave no reaction, either when applied to the brain or to fresh sections. Methyl violet, however, gave a well-marked reaction, staining the vessels and masses drawn in Fig. 1 a distinct red.

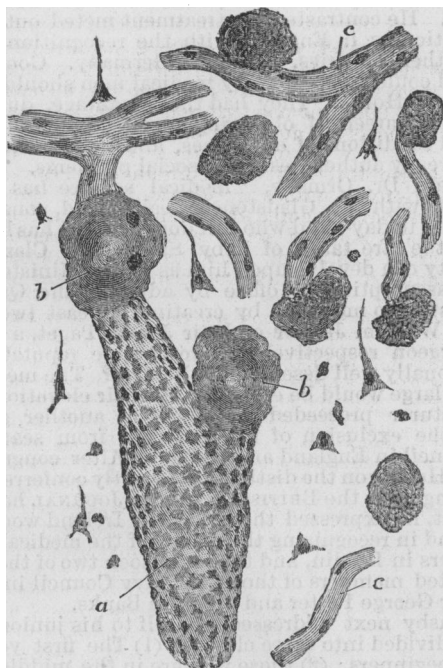


Fig. 1 shows amyloid disease of vessels in a fresh section from first frontal convolution. A few of the nerve cells have been indicated. Spider cells are absent in this part of section; elsewhere they were abundant. *a* = small artery; *b* = a mass of amyloid material; *c* = capillaries. Zeiss's D eyepiece, No. 4.

The condition of the other organs was briefly as follows:—The right lung contained a cavity the size of a hen's egg at the apex. The left lung contained a large thick-walled suppurating cavity, occupying nearly the whole of the upper lobe. Over the rest of both lungs there were scattered patches of tuberculo-pneumonic consolidation. The liver was fatty, and gave no amyloid reaction. The kidneys gave a slight but distinct amyloid reaction, and, microscopically, amyloid disease was found, but not advanced. The spleen gave no reaction. The intestines were, unfortunately not tested.

There was no evidence and no history of syphilis. Beyond the excavation of the lungs no other cause for the amyloid disease was found.

From these facts it would appear that the condition seen in

the cerebral cortex was an amyloid degeneration, the result of pulmonary tuberculosis.

Textbooks of pathology mention the skin, conjunctiva, and tongue as occasional seats of amyloid degeneration, but I have not found the brain mentioned. Unfortunately I am

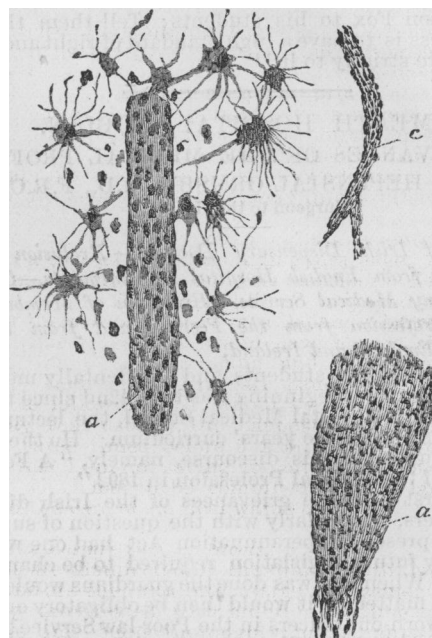


Fig. 2 shows the usual condition of corresponding vessels in general paralysis. Spider cells are conspicuous. *a* = small artery; *c* = capillaries. Zeiss's D eyepiece, No. 4.

unable to refer to the original papers on the subject, but so far as I have been able to look up the papers in *Virchow's Archiv* I have failed to find any record of the disease in the brain.

E. T. WYNNE, M.B.,
Pathologist to Lancaster County Asylum, Rainhill.

ACUTE INTESTINAL OBSTRUCTION: ABDOMINAL
TAXIS: RECOVERY.

Miss M., aged 18, well nourished, rather hysterical, was taken ill on June 23rd with pain referred to the umbilical region, and constipation. There was no history of error in diet. Obstinate vomiting ensued, and on the morning of June 27th this became stercoraceous. Dr. Fox saw her in consultation with Dr. Barber the same evening. On examination the abdomen was tense and tender, and a small area near the right iliac crest was poorly resonant, with much gurgling. The hernial rings were clear, the pulse was quick, the temperature varied between 99° F. and 99.6° F., the tongue was rather dry. The patient was nervous and fidgety, often vomiting foul fæcal-smelling liquid. The catamenia had commenced on the preceding day. The diagnosis of acute obstruction of the bowels, not improbably caused by volvulus, was made. It was decided to give time. A large poultice was applied—opium gr. ½ and tinct. belladonnæ ℥x were given every four hours, and enemata used; no food was allowed. The vomiting quite ceased and she became fairly easy, but nothing passed the rectum and the temperature gradually rose (100.4° F.)

On June 29th Dr. Barber administered chloroform, and a thorough examination was made by Dr. Fox. The abdomen was found to be soft all over, but full and rather tense. The rectum was quite empty, the finger could be hooked round a fold high up on the left side of the bowel, where it turned to the left. The patient was kept under the anæsthetic for about three-quarters of an hour, whilst abdominal taxis, after the method described in Hutchinson's *Archives* was applied. The hips were raised on three pillows so that the abdomen formed

a sharply-inclined plane, whilst from three to four quarts of warm water were slowly and easily injected by the rectum. Then the abdomen was gently but thoroughly kneaded with the hands. Following this she was shaken forcibly up and down and from side to side, first in the supine and then in the prone position, the hips being raised the while. Finally the abdomen was again kneaded. She vomited whilst recovering from the chloroform, and water continually drained from the rectum bringing one small faecal lump. The following morning the temperature had fallen to 99° F., and the patient felt greatly relieved, but no stool passed all day. On July 1st, at 7 A.M., 32 hours after the application of the taxis, a small but well-formed stool was brought away by a warm water enema. The next day the bowels acted freely, and in a few days she was quite well. The case shows the value of the taxis, especially when it is applied early in a class of cases, which are happily rare but of no little anxiety; the risks of an exploratory operation are not light.

R. HINGSTON FOX, M.D., M.R.C.P.

London.

H. VAUGHAN BARBER, M.A., L.R.C.P.

THE SPECIFIC GRAVITY OF THE URINE IN DIABETES MELLITUS.

SIR E. H. SIEVEKING's paper on the above subject bears out what I have recently observed in two cases of diabetes mellitus. One case, a youth, aged 17, passed 13 pints of urine *per diem*, which had specific gravity of 1010. Fehling's test gave abundant evidence of sugar. The other case was a woman, aged 57, who never passed more than 3 pints of urine, generally about 2 pints. The specific gravity was 1017, and sugar was present.

The latter case is remarkably interesting from the two facts: first, the small amount of urine passed; and, secondly, the low specific gravity when sugar was present.

Harrogate.

ARTHUR ROBERTS, M.D.

REPORTS

ON

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

PAISLEY INFIRMARY.

FRACTURE OF THE PATELLA: SUBCUTANEOUS PERMANENT SUTURE (BARKER'S METHOD).

(By WILLIAM F. GIBB, M.D., C.M., Surgeon to the Infirmary.) E. R., aged 68, a hawker, was admitted on March 26th, 1892. On the previous day she fell while walking, and fractured the left patella, at the same time bruising the thigh and leg somewhat severely. About seven years ago she sustained an injury to the same limb, probably fracture of the neck of the femur, and since then had walked lame with the limb everted and much shortened. She stated that prior to the fracture of the patella the knee was stiff, and could not be bent to a right angle.

I saw her first on March 28th, and found the knee considerably distended, but not very tender. The patella was fractured obliquely, half an inch above the attachment of patellar ligament, the fragments being about an inch and a-half apart.

On March 29th, under chloroform, after careful antiseptic precautions, the patella was sutured as directed by Mr. Barker.¹ Through the incision some six to eight ounces of blood were expressed, when it was found that the two portions of the fractured bone could be brought into close contact. Strong silk cord, previously boiled for half an hour, then immersed in 1 in 2,000 perchloride of mercury solution, was the suture adopted. The temperature remained normal.

On April 19th the wound was healed. The patient strongly objected to passive motion of the knee. The fragments were closely apposed.

On April 28th the splint was removed and the patient allowed to move the limb in bed.

¹ BRITISH MEDICAL JOURNAL, February 27th, 1892, p. 425.

On May 27th she could walk with the help of a crutch, and was able to bend the knee slightly; the joint was devoid of tenderness, and the patella freely movable. The union between the fragments remained close and firm, and the line of union was discoverable only in part of its extent. The suture could not be discovered.

REMARKS.—In view of the wide separation of the fragments and the large effusion into the joint, the case was one eminently suitable for treatment by evacuation and suture. The patient's opposition to early passive motion, and the comparatively useless state of the limb from old injury, prevented an ideal result from being obtained. Stout silk seems to answer as well as wire, and is probably preferable as being less likely to cause future discomfort. From the ease and safety with which it can be done—every care being taken—Mr. Barker's operation presents advantages over more troublesome and risky methods. But whether it be desirable or not that all recent transverse fractures of the knee-cap, even in the absence of separation of fragments—and such cases do occur—should be subjected to a routine treatment by suture, as I understand Mr. Barker to suggest, is perhaps a question still to be decided.

REVIEWS.

QUAIN'S ELEMENTS OF ANATOMY. Edited by E. A. SCHÄFER and G. D. THANE. Tenth Edition, Vol. II, Part II, 1892. Pp. 593; Figs. 423. London: Longmans, Green, and Co.

THIS volume of the new edition of this standard work deals with arthrology, myology, angiology, and for each of these Professor Thane is responsible. Those who are familiar with the previous editions of *Quain's Anatomy* will find that the general plan which was adopted in them has been adhered to, but that each topic has been amplified and brought up to date. New and excellent figures have been added wherever their presence has been needed to illustrate the text. Indeed, these additions are so clear and good that they draw attention to the pooriness of many of those which have been retained from previous editions. This is very striking if Fig. 182 be contrasted with that on the opposite page—Fig. 183. A great deal of trouble, too, has been saved by the method which has been applied to the new figures. Instead of putting small and almost indistinguishable numbers upon the various structures to mark the printed reference, as is done in the old figures, the names have been printed in the margin in bold and clear type. This plan saves so much trouble that we wish it could have been carried out in every instance. However, this seems to be a defect which is inseparable from endeavours such as this. Sometimes, too, numbers have remained upon the figures, although the corresponding reference has been taken away. These are, however, mere trifles, and wherever we look we find that the distinguishing features of *Quain's Anatomy* have been retained, namely, clearness and correctness. This is very noticeable in the description of the knee-joint, especially where the very complicated mechanism of this most interesting joint is discussed. It is not unusual to find that problems such as these are not very fully dwelt upon in anatomical textbooks. As regards the mechanism of the pelvis, it seems hardly clear what position is adopted as to the wedge action of the sacrum. The late Dr. Matthews Duncan, in his *Researches in Obstetrics*, was most emphatic in his rejection of the "wedge theory" and most enthusiastic in his adoption of what we may call the "suspension theory." Nevertheless, the former may so plausibly be argued to hold good for certain positions that it deserves a better fate than to be dismissed in a single sentence.

The part of the volume which treats of myology has been brought well up to date, and the paragraphs in small print upon muscular anomalies have had additions made to them. These paragraphs are very useful, and give students an additional interest in the dissection of the muscles. For the same reasons, the discussion of the morphology of the muscles and of the vessels will be found very valuable.

We have nothing but praise for the very clear and correct account of the vascular system. The results of the latest and best investigations have been embodied, and a short but good account of the anomalies and morphology of the larger vessels

able by them." He adds further, "We never have any difficulty in obtaining those reports from medical men all over the country."

I have replied that I adhere to my position. I now wish to ascertain whether in your opinion, and in the opinion of your readers, I have acted rightly in the matter.

"* We are informed that it is the rule for the information as to the cause of death and other matters pertaining thereto to be furnished by the representatives of the deceased at their own cost. The policy is issued subject to these conditions, and, until they are fulfilled, the office will naturally decline to pay the amount due on it. It is manifestly the duty of the representatives of the deceased to furnish the particulars required by the assurance company, and they are the people who should pay for it. This is quite a different matter from the question of paying for the medical examination of a candidate for assurance. In this case the medical examiner acts on behalf of the company, and he is paid by it, whether the life is accepted or not.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF CAMBRIDGE.

NEW COURSE IN PHYSIOLOGY.—The Professor of Physiology (Dr. Michael Foster) gives notice that Dr. Shore, of St. John's College, Demonstrator of Physiology, will give an intermediate course of lectures, with demonstrations and practical work, on physiology, specially for medical students, on Wednesdays and Fridays at 10 during the Michaelmas and Lent terms, commencing October 14th. Practical work in the laboratory will be taken at 11 on Wednesdays and Fridays, and at other times by arrangement. A special feature of this new departure is that no student will be admitted to the lectures who has not completed the general elementary course. Students who have thus gained an acquaintance with the principles of the science will have an opportunity of learning in a practical manner its applications in pharmacology and medicine.

UNIVERSITY OF DURHAM.

At the Convocation held on Saturday, October 1st, the following gentlemen were recommended for the undermentioned Degrees:

Degree of Doctor in Medicine for Practitioners of Fifteen Years' Standing.—W. G. Creswell, L.R.C.S., L.R.C.P.Ed.; A. B. Vane, L.R.C.P., L.R.C.S.Ed., L.S.A.

Degree of M.D.—B. R. Adkins, M.B.Durh.; R. C. Benington, M.B., B.S.Durh.; S. Bodger, M.B., B.S.Durh.; G. W. Davis, M.B., B.S.Durh., M.R.C.S., L.R.C.P.; A. W. Dawson, M.B.Durh., M.R.C.S. Eng.; C. C. Eardley-Wilmot, M.B., B.S.Durh.; A. Hardwicke, M.B., B.S.Durh.; C. E. Jennings, M.B., B.S.Durh.; A. W. B. Warde, M.B., B.S.Durh., M.R.C.S., L.R.C.P.; T. Watts, M.B., B.S.Durh., M.R.C.S., L.R.C.P.; R. J. Williams, M.B.Durh., M.R.C.S., L.R.C.P.

Degree of Bachelor in Medicine (M.B.).—Second Class Honours: W. H. Maidlow, M.R.C.S., L.R.C.P., St. Bartholomew's Hospital; F. H. Marson, Queen's College, Birmingham; J. P. Willis, College of Medicine, Newcastle-upon-Tyne; B. B. T. Thorne, M.R.C.S., L.R.C.P., St. Bartholomew's Hospital. Pass List: A. Badock, London Hospital; W. H. Bishop, College of Medicine, Newcastle-upon-Tyne; E. C. Bridges, M.R.C.S., L.R.C.P., St. Bartholomew's Hospital; H. S. Burniston, St. Mary's Hospital; E. E. Cass, Yorkshire College, Leeds; F. W. Clark, M.R.C.S., L.R.C.P., D.P.H., Middlesex Hospital; R. A. D. Daniel, L.R.C.S., L.R.C.P.Ed., L.S.A., St. Mary's Hospital; H. K. Dawson, College of Medicine, Newcastle-upon-Tyne; G. Elam, M.R.C.S., L.R.C.P., Middlesex Hospital; R. Green, College of Medicine, Newcastle-upon-Tyne; J. S. Hall, College of Medicine, Newcastle-upon-Tyne; W. Oliver, College of Medicine, Newcastle-upon-Tyne; W. E. Peacock, College of Medicine, Newcastle-upon-Tyne; L. W. Rolleston, St. Bartholomew's Hospital; T. J. Selby, L.R.C.P., L.R.C.S.Ed., Edinburgh School of Medicine; H. Shore, Queen's College, Birmingham; H. S. Stockton, M.R.C.S., L.S.A., Charing Cross Hospital; W. J. N. Vincent, M.R.C.S., L.R.C.P., London Hospital; S. S. Whillis, College of Medicine, Newcastle-upon-Tyne; G. J. Williams, College of Medicine, Newcastle-upon-Tyne.

Degree of Bachelor in Surgery (B.S.).—A. Badock, London Hospital; W. H. Bishop, College of Medicine, Newcastle-upon-Tyne; E. C. Bridges, M.R.C.S., L.R.C.P., St. Bartholomew's Hospital; H. S. Burniston, St. Mary's Hospital; E. E. Cass, Yorkshire College, Leeds; H. K. Dawson, College of Medicine, Newcastle-upon-Tyne; G. Elam, M.R.C.S., L.R.C.P., Middlesex Hospital; R. Green, College of Medicine, Newcastle-upon-Tyne; W. H. Maidlow, M.R.C.S., L.R.C.P., St. Bartholomew's Hospital; F. H. Marson, Queen's College, Birmingham; W. Oliver, College of Medicine, Newcastle-upon-Tyne; W. E. Peacock, College of Medicine, Newcastle-upon-Tyne; L. W. Rolleston, St. Bartholomew's Hospital; H. Shore, Queen's College, Birmingham; H. S. Stockton, M.R.C.S., L.S.A., Charing Cross Hospital; B. B. T. Thorne, M.R.C.S., L.R.C.P., St. Bartholomew's Hospital; W. J. N. Vincent, M.R.C.S., L.R.C.P., London Hospital; S. S. Whillis, College of Medicine, Newcastle-upon-Tyne; J. P. Willis, College of Medicine, Newcastle-upon-Tyne; G. J. Williams, College of Medicine, Newcastle-upon-Tyne.

THE will of John Abercrombie, M.D., formerly of Cheltenham, and late of 33, Upper Wimpole Street, W., who died at Harrow on August 20th, has been proved to be of the personal value exceeding £63,000.

SUCCESSFUL VACCINATION.—Dr. J. Wigmore, public vaccinator for the Second Rural District of the Bath Union, has been awarded the grant for successful vaccination.

HOSPITAL AND DISPENSARY MANAGEMENT.

ROYAL HOSPITAL, BELFAST.

At the quarterly meeting, held August 22nd, Dr. Lindsay and Dr. Wheeler were re-elected staff-physician and staff-surgeon respectively. For the office of house-physician four candidates presented themselves, of whom Dr. Isaac Davison was elected by a large majority. The finances of the hospital were reported to be in a satisfactory condition, all debts being paid, and a balance of several hundred pounds remaining to the credit of the institution. The most notable point in the financial statement was the increase in the contributions of the working classes. Other subscriptions and church collections showed a slight decline.

REPORT OF THE BIRMINGHAM CITY ASYLUMS FOR 1891.

Winson Green Asylum.—On May 10th influenza broke out in the asylum, and continued with greater or less severity till August. During that period 120 patients and 40 officials were attacked. No fewer than 24 cases of pneumonia supervened, and with the exception of one male all were rapidly fatal. Coupled with this epidemic of influenza, diarrhoea, in some instances assuming a dysenteric form, was noticeable throughout the year, and there were in addition several cases of typhoid fever. This naturally excited suspicion as to the condition of the drainage. The Committee, with commendable promptitude, proceeded to deal with it, and in the words of Mr. Whitcombe, the medical superintendent, it has been interesting to observe improvement in the general health of the institution following the progress of the sanitary alterations and improvements. Out of 314 admissions, 80 had had previous attacks, and many were in a hopeless physical condition, 34 were general paralytics, 54 had heart disease, 33 were epileptics, and 6 were in an advanced stage of phthisis. No fewer than 95 had suicidal tendencies; yet with all this unfavourable record the recoveries, calculated upon the number admitted, reached the highly satisfactory standard of 54.7 per cent. The death-rate was naturally high, namely, 13.2 per cent., calculated upon the total number under treatment. In July the jubilee meeting of the Medico-Psychological Association was held at this asylum under Mr. Whitcombe's able presidency, a circumstance to which he alludes in his annual report with feelings of justifiable satisfaction.

Rubery Hill Asylum.—The average number of patients resident during the year was 597; only four cases are shown as admissions, and Dr. Saffern says he has no expectation that any of them will recover. The death-rate was only 4.52. It must be remembered, however, that the inmates are all chronic cases transferred from the Winson Green or other asylums. Many of them are epileptics, and many are in a helpless and hopeless condition, living on from year to year mere wrecks of humanity. This is emphasised by the fact that out of this large resident population only three cases were discharged during the year as recovered. The Commissioners in Lunacy at their inspection speak well of the management of the institution, and of the efforts made for the comfort and welfare of the patients.

THE death is reported, at the age of 37, of Dr. Haime, of Barnsley, from inflammation of the lungs, on September 20th. The deceased had been ill only a few days, having caught a chill whilst attending a call in the night.

PASTEURISM IN BRAZIL.—The total number of persons who applied for treatment at the Pasteur Institute of Rio de Janeiro from February 8th, 1888, to June 30th, 1892, is given in a report published in the *Gazeta Medica da Bahia* as 1,149. In 473 of these cases treatment was for various reasons not carried out. Of the remaining 676, 511 belonged to the male and 165 to the female sex; 105 were treated in 1888, 90 in 1889, 158 in 1890, 242 in 1891, and 81 in 1892. In 505 cases the bites were inflicted on uncovered parts of the body, in 171 the animal's teeth had penetrated the clothes. Cauterisation was performed effectually in 34, ineffectually in 392, cases: no cauterisation was done in 250 cases. Among the animals inflicting the bite there were 613 dogs, 52 cats, 2 mules, and 1 horse. In one case the treatment was applied on account of the contamination of an accidental wound by the saliva of a rabid calf, and in another on account of a similar mischance caused by a cow which had contracted the disease through a bite from the same calf. In six cases the treatment was applied in consequence of accidents (of what nature is not stated) which occurred in the Institute. In 6 cases the bite was inflicted on the head, in 236 on the hands, in 131 on the arms, in 201 on the legs, in 29 on the trunk. In 10 cases the patient had been bitten in several parts of the body. In 80 of the cases the nature of the disease was established by experiment, in 287 by the symptoms presented by the animal; in 300 the animal's symptoms were so suspicious as to make the diagnosis almost certain. With regard to the results (deducting 15 cases in which the treatment was discontinued because the animal turned out to be not rabid, or the patients died of fever during the treatment, or the bite having been inflicted on the head the incubation period was so short that the treatment could not overtake the disease), the mortality in the 661 cases in which the treatment was completed was 7, or 1.05 per cent.

MEDICAL NEWS.

MR. THOMAS GARNEYS, surgeon, of Bungay, died at his residence, Waveney House, on September 20th, from a paralytic seizure which occurred on the previous day.

THE next Congress of French Scientific Societies will take place in Paris. The first general meeting will be held in the Sorbonne on April 4th, 1893.

THE annual dinner of past and present students of Charing Cross Hospital will be held on Friday, October 21st, at the Holborn Restaurant, 6.30 P.M. for 7 P.M. Tickets, 5s. 6d. each, may be obtained from Mr. Robert D. Muir, house-surgeon, at the hospital.

M. PASTEUR will attain the age of 70 on December 27th. A subscription has been opened by a committee of the Society of Physical and Chemical Sciences at Copenhagen to offer him a medal on that occasion. The well-known Danish brewer, Mr. Jacobson, takes an active part in this movement, in recognition of the immense services rendered to the brewing industry by M. Pasteur's researches regarding fermentation.

CIGAR ENDS FOR SALE.—If it be true, as stated in evidence on behalf of the Commissioners of Inland Revenue, that a large illicit trade is being done in making up cigar ends into cigars, it is difficult to conceive a more filthy trade or one more dangerous to health. Of course, so far as such "illicit" cigars are burnt away they are "purified by fire," but the ends which are sucked can hardly fail to be often contaminated with germs of a variety of foul diseases. The traffic should be stopped by all means. Disused cigar ends should be "cremated."

MEDICAL VACANCIES.

The following vacancies are announced:

- BRIGHTON THROAT, AND EAR HOSPITAL**, 23, Queen's Road, Brighton. Non-resident House-Surgeon. Salary at the rate of £50 per annum. Applications to the Secretary by October 12th.
- CHARING CROSS MEDICAL SCHOOL**.—Lecturer on Organic Chemistry. Remuneration a guaranteed minimum of £100 per annum. Applications to Stanley Boyd, Dean, 62 to 65, Chandos Street, Strand, by October 18th.
- CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST**, Victoria Park, E.—Pathologist. Salary, 100 guineas per annum. Applications to the Secretary, 24, Finsbury Circus, E.C., by October 19th.
- COUNTY BOROUGH OF STOCKPORT**.—Medical Officer of Health for the District of the Borough, and to the Infectious Diseases Hospital, and Surgeon to the Police. Salary, £400 per annum. Applications endorsed "Application for Appointment of Medical Officer of Health," to Walter Hyde, Town Clerk, 2, Lord Street, Stockport, by October 15th.
- COVENTRY AND WARWICKSHIRE HOSPITAL**, 10, Hay Lane, Coventry. Assistant to the House-Surgeon. Appointment for six months. Honorarium, £15, with board, residence, washing, and attendance. Applications marked "Applications for Assistant House-Surgeon" to Arthur Seymour, Secretary, by October 11th.
- HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST**.—House-Physicians. Applications to the Secretary by October 13th.
- HUDDERSFIELD INFIRMARY**.—Honorary Physician. Applications to Mr. F. Eastwood, Honorary Secretary, by November 1st.
- INVERNESS DISTRICT ASYLUM**.—Medical Superintendent. Applications to Robert Davidson, Clerk to the Inverness Board of Lunacy, Queensgate Chambers, Inverness, by October 15th.
- KENT AND CANTERBURY HOSPITAL**.—Assistant House-Surgeon; unmarried. Salary, £50 per annum, with board and lodging. Applications to the Secretary by October 8th.
- KENT COUNTY LUNATIC ASYLUM**, Barming Heath, near Maidstone. Third Assistant Medical Officer; unmarried. Salary, £175 per annum, rising £5 yearly to £200, with furnished quarters, attendance, coal, gas, washing, garden produce, and milk. Applications to Francis R. Howlett, Clerk to the Visiting Committee, 9, King Street, Maidstone, by October 11th.
- KIMBERLEY HOSPITAL**, Kimberley, South Africa.—Senior House-Surgeon. Salary, £750, with quarters. Applications to H. A. de Beer, Secretary Kimberley Hospital Board, by October 10th.
- MANCHESTER CLINICAL HOSPITAL FOR WOMEN AND CHILDREN**, Park Place, Cheetham Hill Road, Manchester.—House-Surgeon. Salary, £80 per annum, with apartments and board. Applications to Mr. Hubert Teague, 38, Barton Arcade, Manchester, by October 29th.
- METROPOLITAN HOSPITAL**, Kingsland Road, N.E.—House-Physician. Appointment for six months. Salary at the rate of £80 per annum. Applications to C. H. Byers, Secretary, by October 10th.
- METROPOLITAN HOSPITAL**, Kingsland Road, N.E.—House-Surgeon. Appointment for six months. Salary at the rate of £80 per annum. Applications to C. H. Byers, Secretary, by October 10th.
- METROPOLITAN HOSPITAL**, Kingsland Road, N.E.—Assistant House-Surgeon. Appointment for six months. Applications to C. H. Byers, by October 10th.

READING AMALGAMATED FRIENDLY SOCIETIES' MEDICAL ASSOCIATION.—Assistant Medical Officer, age not to exceed 35. Terms, £70 per annum. Applications to the Resident Medical Officer, Dr. Stansfield, 80, Southampton Street, Reading, by October 8th.

ROYAL FREE HOSPITAL, Gray's Inn Road, W.C.—Junior Resident Medical Officer, doubly qualified. Board and residence provided. Applications to the Secretary, C. W. Thies, by October 24th.

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 October 20th.

ROYAL UNITED HOSPITAL, Bath.—House-Surgeon; must be M.R.C.S. Eng. Appointment for one year. Salary, £60 per annum, with board, lodging, and washing. Applications to Walter Stockwell, Secretary-Superintendent, by October 13th.

MEDICAL APPOINTMENTS.

- ARCHER**, E. J., M.B., C.M.Dub., appointed *pro tem*. Medical Officer for the Second Sanitary District of the Southampton Incorporation, *vice* E. J. Archer, M.B., M.Ch., deceased.
- BAILEY**, T. C., L.R.C.P., L.M. Edin., M.R.C.S., appointed Medical Officer for the Crewe Sanitary District of the Nantwich Union.
- CARLING**, W., M.B., B.C.Camb., appointed House-Surgeon to Guy's Hospital.
- CARNELLEY**, M., L.R.C.P.Lond., M.R.C.S., appointed Medical Officer for the Gotham Sanitary District of the Basford Union.
- CHAPLIN**, T. H., Arnold, M.B., M.R.C.P., appointed Assistant-Physician to the City of London Hospital for Diseases of the Chest, Victoria Park, *vice* Dr. H. J. Tylden, deceased.
- CLARKE**, Thomas F., M.R.C.S.Eng., L.S.A., appointed Medical Officer for the First District of the Dartford Union.
- COWAN**, Michael W. W., M.B., C.M. Edin., appointed Medical Officer of the Knightwick District of the Martley Union.
- DIGBY**, C. A., M.D., B.Ch.Irel., appointed Medical Officer for the Ticehurst Sanitary District of the Ticehurst Union.
- FRANCIS**, Ernest Edward, M.R.C.S., L.S.A., appointed Surgeon to the Assam Bengal Railway.
- FRASER**, Donald Alexander, M.D.Brux., M.R.C.S.Eng., L.S.A., reappointed Medical Officer of Health for Totnes Borough.
- FORRESTER**, R. A. P., M.B., C.M. Edin., appointed Health Officer of Wyche-proof, Victoria, South Australia.
- GODSON**, A. H., M.B., B.C.Camb., appointed House-Surgeon to Guy's Hospital.
- GRIGG**, William Hughes, M.R.C.S.Eng., L.S.A., reappointed Medical Officer for the Hockworthy District of the Tiverton Union.
- HAYDON**, William Rudall, M.D., M.B., C.M.Glasg., reappointed Medical Officer for the Washfield District of the Tiverton Union.
- HIRSCH**, Charles T. W., M.R.C.S.Eng., L.R.C.P.Lond., L.S.A., appointed Assistant Government Medical Officer at Fiji.
- HOOPER**, Marshall, L.R.C.P., L.E.C.S. Edin., reappointed Medical Officer for the Codner Park Sanitary District of the Basford Union.
- HOUSLEY**, J., M.D.St.And., M.R.C.S., reappointed Medical Officer of Health for the East Retford Sanitary District.
- JEWELL**, J. W. F., M.B.Lond., M.R.C.S., L.R.C.P., appointed House-Physician to Guy's Hospital.
- KEMPE**, C. M., M.R.C.S., reappointed Medical Officer of Health for the Port of Shoreham.
- KEMPSTER**, William Hy., M.D.St.And., L.R.C.P.Lond., M.R.C.S.Eng., appointed Medical Officer of Health for Battersea.
- LONDON**, E. E. B., M.R.C.S., L.R.C.P., appointed Assistant House-Physician to Guy's Hospital.
- LIESCHING**, Charles Edward, L.R.C.P.Lond., M.R.C.S.Eng., reappointed Medical Officer for the Sampford Peverell District of the Tiverton Union.
- LYLE**, Henry, M.R.C.S.Eng., appointed Honorary Assistant Surgeon to the Cancer and Skin Hospital, Liverpool.
- McKAY**, Joseph B., M.D., R.U.I., appointed Medical Officer for the Fifth District and the Schools of the Wycombe Union.
- MAY**, Frederick, L.A.H.Dub., reappointed Medical Officer for the South District of the Stratton Union.
- MULLALBY**, W. T., M.D., M.Ch., L.R.C.P.Irel., appointed Health Officer for the Shire of Ballarat, Victoria, Australia.
- ROBINSON**, Dr., appointed Medical Officer for the Fleetwood District of the Fylde Union, *vice* E. C. A. Ramsay, L.R.C.P.I., L.F.P.S.Glas.
- SHEEN**, A. W., M.B.Lond., L.R.C.P., M.R.C.S., appointed Assistant House-Surgeon to the Guy's Hospital.
- SICHEL**, G. T. S., M.R.C.S., L.R.C.P., appointed Assistant House-Surgeon to Guy's Hospital.
- THOMAS**, I. D., M.B., B.C.Camb., appointed Assistant House-Physician to Guy's Hospital.
- WARD**, Anthony Arthur, L.R.C.P.Lond., M.R.C.S.Eng., appointed Medical Officer for the Christchurch Sanitary District and the Branch Work-house of the Parish of St. Giles, Camberwell.
- WILLIAMS**, G. R., L.R.C.P., L.M., L.R.C.S.Irel., appointed Medical Officer for the Seventh Sanitary District of the Depwade Union.
- WILSON**, Arthur C. J., L.R.C.P., L.M. Edin., M.R.C.S.Eng., reappointed Medical Officer of Health to the Thurstone Local Board.
- YOUNG**, F. C., M.B., B.C.Camb., appointed House-Physician to Guy's Hospital.
- YOUNG**, Richard W., M.R.C.S., L.S.A., appointed Government Medical Officer and Vaccinator for the Lower Clarence River District, New South Wales.

DIARY FOR NEXT WEEK.

MONDAY.

LONDON POST GRADUATE COURSE, Royal London Ophthalmic Hospital, Moorfields, 1 P.M.—Mr. R. Marcus Gunn: External Examination of the Eye. Parkes Museum, 74A, Margaret Street, W., 4 P.M.—Dr. L. C. Parkes: Water Supply. 101, Great Russell Street, W.C., 8 P.M.—Dr. Galloway: Malignant Growths.

TUESDAY.

LONDON POST GRADUATE COURSE, Bethlem Royal Hospital, 2 P.M.—Dr. Percy Smith: Hysteria, Delirious Mania. Hospital for Diseases of the Skin, Blackfriars, 4 P.M.—Mr. Jonathan Hutchinson: Cancer of the Skin. 101, Great Russell Street, W.C., 8 P.M.—Dr. Potter: Albuminuria in Pregnancy.

WEDNESDAY.

LONDON POST GRADUATE COURSE, Hospital for Consumption, Brompton, 4 P.M.—Dr. Green: Cases in the Wards. Royal London Ophthalmic Hospital, Moorfields, 8 P.M.—Mr. A. Quarry Silcock: Choroidal Affections.

HUNTERIAN SOCIETY, 8.30 P.M.—Dr. Robert Barnes: Hunterian Society Lecture on some Observations on Absorption in relation to Physiology, Pathology, and Therapeutics.

THURSDAY.

LONDON POST GRADUATE COURSE, National Hospital for the Paralysed and Epileptic, Queen Square, 2 P.M.—Dr. Ormerod: Ataxy. Hospital for Sick Children, Great Ormond Street, 4 P.M.—Dr. Sturges: Heart Disease in Children. Central London Sick Asylum, Cleveland Street, W., 5.30 P.M.—Sir Alfred B. Garrod: Medical Cases in the Wards. London Throat Hospital, Great Portland Street, 8 P.M.—Mr. W. R. H. Stewart: Examination of Ear Cases.

BRITISH GYNÆCOLOGICAL SOCIETY, 20, Hanover Square, 8.30 P.M.—Dr. Fancourt Barnes: Specimens and Notes of a case of Vaginal Lithotomy. Mr. Bowreman Jessett: Specimens. Papillomatous Growth in the Bladder removed by the Suprapubic Operation.

FRIDAY.

LONDON POST GRADUATE COURSE, Bacteriological Laboratory, King's College, 11 A.M. to 1 P.M.—Professor Crookshank: Lecture—The Microscope. Practical Work—Types of Bacteria. Hospital for Consumption, Brompton, 4 P.M.—Dr. Green: Cases in the Wards.

CLINICAL SOCIETY OF LONDON, 8.30 P.M.—Mr. W. H. Brown: A Case of Intestinal Obstruction accompanied by Thrombus in the Abdominal Aorta extending down the Iliac Vessels. Mr. Arbuthnot Lane: A case of Extensive Nævus of the Peritoneum. Mr. Clutton: A case of Traumatic Aneurysm of the External Iliac Artery in a Boy 6 years of age. Mr. Frederic Eve: A case of Cicatricial Stricture of Oesophagus, (Oesophagotomy for Removal of Impacted Symonds's Tube; Complete Division of Stricture; no Recurrence Two Years after Operation.

SATURDAY.

LONDON POST GRADUATE COURSE, Bethlem Royal Hospital, 11 A.M.—Dr. Theo. Hyslop: Mania.

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 orders or stamps with the notice not later than Wednesday morning, in order to insure insertion in the current issue.

BIRTHS.

COMPTON.—On October 4th, at Litton, Longfleet, Poole, Mrs. Francis Charles Compton, of a daughter.

GURNEY.—October 2nd, at Stour House, Dovercourt, Essex, the wife of Harold Gurney, L.R.C.P.E., etc., of a daughter.

MACKINTOSH.—October 2nd, at Stirling, N.B., the wife of W. A. Mackintosh, M.B., C.M.Edin., of a daughter.

STRUGNELL.—On October 1st, at 114, Brixton Hill, the wife of Walter T. Strugnell, M.D.Lond., M.R.C.S., of a son.

MARRIAGES.

BOON—MATTHEWS.—On Wednesday, September 14th, at St. George's, Bloomsbury, by the Rev. H. R. Hawes, M.A., Incumbent of St. James's, Marylebone, Ernest Gerald Boon, L.R.C.P.Lond., M.R.C.S. Eng., youngest son of the late Joseph Henry Boon, M.D., of St. Kitts, West Indies, to Frances Amy, daughter of the late J. N. Matthews, of Buffalo, New York, United States.

TOYNE—BIRKETT.—On September 28th, at St. Lawrence Tinsley, by the Rev. J. F. Buckler, B.A., Walter Ernest Toyne, L.S.A., Wincobank, eldest son of W. C. Toyne, Sheffield, to Henrietta Cecilia (Ella), eldest daughter of Hector Birkett, Rotherham, and granddaughter of the late Isaac Dodds, C.E.

DEATHS.

LONGSTAFF.—On September 23rd, at his residence, Butterknowle, Wandsworth, George Dixon Longstaff, M.D., in his 94th year.

POPJOY.—On September 21st, at his residence, 19, Victoria Road, Tue Brook, Liverpool, in his 76th year, Joshua Joseph Bird Popjoy, L.R.C.P.Lond., M.R.C.S., and J.P., late of Accrington.

SMITH.—At the Schoolhouse, Lochgoilhead, on October 2nd, John Smith, M.A., M.B., C.M., late of Abergavenny, Monmouthshire. Friends please accept this intimation.

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.

DR. G. AINSLIE JOHNSTON (Gale House, Ambleside) writes: I should like to know of any hospital where a boy subject to epileptic fits, the son of poor parents, could be received for a small sum.

PORTABLE ANTISEPTIC MOUTH WASH.

A MEMBER would be obliged for suggestion as to a suitable mouth wash or gargle for use when in attendance on infectious cases. A cheap concentrated solution which could easily be carried in waistcoat pocket and used alone or in water at patient's house is what is specially desired. Now that influenza is likely to appear, suggestions on the subject would be most acceptable.

SALE OF POISONOUS PROPRIETARY PREPARATIONS.

M.D., C.M. ABERDEEN asks us whether it is illegal for grocers to sell chlorodyne, and, if so, whether a case can be quoted of successful prosecution for reference? He unfortunately has, he adds, a case of what may be termed chlorodyne drinking, and an apparently unlimited supply can be obtained from the grocers in his neighbourhood.

*It is undoubtedly illegal for any persons except registered chemists to sell articles that are included in Schedule A of the Pharmacy Act. Chlorodyne, being a preparation of morphine or a preparation of opium, and containing also chloroform, hydrocyanic acid, and probably other articles included in such schedule, its sale by grocers or other unregistered persons is certainly a breach of the law. In the *Pharmaceutical Journal* for April 29th, 1882, there is a report of a prosecution of a grocer for the sale of poison. There have been many similar prosecutions instituted quite recently for the sale of chlorodyne by grocers, since the communications of Mr. Ernest Hart to the Public Prosecutor and the Pharmaceutical Society have set the powers of the law—so long in abeyance—steadily and resolutely in motion, but we are informed that in every instance the persons proceeded against have paid into court the penalty incurred, and consequently there has not been an opportunity of reporting the cases. Anyone can institute a prosecution for the sale of poison unlabelled; and on due information of the fact that chlorodyne or any similar article containing poison—labelled or unlabelled—is being sold by a grocer or other person not legally qualified to sell poison, being supplied, the Council of the Pharmaceutical Society would not doubt institute a prosecution under the 15th Section of the Pharmacy Act, which the Council had for many years allowed to sleep, but which it is the special duty of the Council to enforce, and which they are enforcing, since the initiative taken to which we have above referred.

ANSWERS.

THE M.D. BRUX.

DR. MAJOR GREENWOOD, Secretary of the Brussels Medical Graduates' Association (243, Hackney Road, N.E.) writes: In answer to "L.R.C.P.E." I beg to forward the following information relative to the M.D. Brux.:

The examinations for this degree take place at Brussels on the first Tuesday in November, December, February, May, and June. They are all *à viva voce*, and candidates must present themselves at the University (secretary's office) at the latest before 2 P.M. on the day preceding the examination.

Candidates before admission to the examination will be required (a) to produce diplomas, showing that they are legally qualified in their