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## MEMORANDA: MEDICAL, SURGICAL, OBSTETRICAL, THERA- PEUTICAL, PATHOLOGICAL, Etc.

### OXY-CHLOROFORMIC ANÆSTHESIA.

ACTING upon the assumption that the pronouncement of the Hyderabad Chloroform Commission, relative to the cause of deaths from chloroform, is correct (for it has not been disproved), the thought has occurred to me, that if it is as they say, "invariably" due to an "overdose" and "asphyxia," there must surely be a remedy, and two or three ugly "accidents," fortunately without a fatal termination in either case, have stimulated me to seek one. This, I believe, we have in oxygen. We are told that ordinary chloroform inhalation is always accompanied by a fall of the blood pressure, or slowing of the circulation, which, however, is not dangerous "if" not excessive; we are also told to avoid any kind of interference with the respiration, to watch it carefully, and, should it fail, to have recourse immediately to artificial respiration, so that, practically, we are watching the respiration merely to see it stop, and are then by no means certain that we can resuscitate our patient. Now, to slow the circulation is to at once interfere with the aerating process, and though the system up to a certain point would seem to tolerate it, yet when the limit of stagnation, or tolerance of excess of carbonic acid, is reached, the vagus is paralysed, and we have asphyxia, as much probably from this source as from the chloroform. Be this as it may, a judicious combination of oxygen and chloroform keeps up the blood pressure, maintains regularity of the respiration, and ensures perfect aëration throughout the period of administration; it limits the action of the chloroform to the suspension of consciousness, does away with much of the post-anæsthesial depression, brings about a much more rapid recovery from the anæsthetic, and induces a feeling of confidence unknown under the old system, because, by it the "accidental" element in this connection is eliminated. The combination alluded to is effected by what I may best express as an "oxy-chloroform inhaler," so constructed as to bring the two agents under the perfect control of the manipulator.

Liverpool.

THEO. G. H. NICHOLSON.

### CASE OF RECRUDESCENCE IN SCARLET FEVER.<sup>1</sup>

The following case occurred during an outbreak of scarlet fever in this district:—On October 16th, J. K., a girl, aged 8, took ill, complaining chiefly of sore throat. The following day, when I saw her, in addition to an inflamed state of both tonsils and of the soft palate, I found, covering the whole of her chest, a distinctly scarlatinial rash, which extended to her sides, back, and limbs.

Communication with an infected house was proved. Desquamation began on the eighth day, and the case, which, though of a mild character, was undoubtedly one of scarlet fever, ran an ordinary and uncomplicated course. On November 24th—almost six weeks from the onset of the illness—the girl had been allowed into the garden when the weather was damp, with a sudden fall of temperature. The same night sore throat was again complained of, with sickness. The temperature was 100°. Next day I found her very unwell, the temperature 103°, the tongue coated with a white fur, the throat, palate, and naso-pharynx acutely inflamed, swollen submaxillary gland and a very abundant reappearance of the rash over the neck and chest, from which to the remainder of the body, arms, and limbs there was a speedy extension. On the following day (November 26th) the temperature was 104°, the tongue was becoming very red and glazed, with large papillæ, and pain was complained of in the right knee-joint.

On November 27th the morning temperature was 105.2°, the patient restless and ill, but there was no disturbance of cerebral functions. Antipyretics were frequently administered, and the evening record showed a temperature of 102.4°. Next morning the temperature was 101° and the rash fading. From

<sup>1</sup> Notes of two somewhat similar cases, together with a very able and exhaustive reference to the literature of the subject by Dr. G. P. Boddie, will be found in vol. x. of the *Transactions of the Medico-Chirurgical Society, Edinburgh*.

this point there was a gradual and steady improvement, the temperature reaching normal on December 1st. Desquamation began on the sixth day, and was on this occasion much more extensive. There has, thus far, been no albumen in the urine, and no evidence of endocardial change.

Complications of various kinds, even the incidence of a purpuric rash over the extensor surfaces of joints, one has met with during the course of scarlet fever, but I have never before seen a case of complete recrudescence. Where, as in the present instance, a fresh infection was not likely, the probable explanation of such a relapse would seem to be that of Henoch—namely, that the virus had not been completely eliminated by the first attack.

Lindlithgow.

JAMES HUNTER, M.D.

### COPIOUS WARM ENEMATA AFTER SEVERE HÆMORRHAGE.

I WAS called lately to a man, aged about 30, with hæmatemesis probably from ulcer, which continued severely for six days and was eventually controlled by hazeline internally, and ice-bladders to the epigastrium. Two days thereafter, the bowels not having been moved for more than a week, I ordered a warm water enema. About a quart was injected, but to my surprise none of it returned. The patient meanwhile expressed himself as feeling stronger after the injection.

I do not know whether copious rectal injections have been used as a means of restoring the circulation after hæmorrhage; but it would seem natural to suppose that in the depleted state of the tissues, the intestinal capillaries, like a dry sponge, might absorb rapidly and effectually, as indeed they appeared to do in the above instance. The description by Dr. E. J. Cave in the *BRITISH MEDICAL JOURNAL* of December 3rd, of a case of hæmorrhage successfully treated by direct intravenous injection has led me to suggest an indirect and simple method.

Strathpeffer Spa.

FORTESCUE FOX, M.D. Lond.

### OPERATIONS ON OLD PEOPLE.

THE following case is, I think, worth reporting:—

Miss H., aged 87, was the subject of a sprouting epitheliomatous growth on the left cheek, which, as its rate of growth was increasing, I removed by knife and cautery on June 22nd. The wound healed very quickly and there has been up to date (December 12th) no recurrence nor trouble of any kind.

Mrs. B., whose arm I amputated in 1889 (case reported in *BRITISH MEDICAL JOURNAL*, January 25th, 1890), was alive and well this summer, and should be celebrating her 84th birthday in a very short time.

Coventry.

F. FAULDER WHITE, F.R.C.S.

### THREE INFECTIVE DISEASES INCUBATIVE AT THE SAME TIME.

I HAVE recently had under my care a child, aged 3½ years, in whom was developed within a week the following infectious diseases in the order named; namely, whooping-cough, chicken-pox, measles. The incubative period of pertussis is stated to be a few days, that of chicken-pox to be variable, and that of measles from seven to ten days, and the point of interest is that three distinct poisons (microbic?) should flourish in one *corpus vile*, and come to full maturity at one and the same time.

Beckenham.

J. T. C. NASH, M.B., C.M. Edin.

### THE INCUBATION PERIOD OF CHICKEN-POX.

ON November 18th Mrs. M., residing at Hampstead, accompanied by her little boy, visited a married sister at Streatham. They stayed at Mrs. O.'s house about three hours. Soon after they left Mrs. O. found that one of her children had red pimples on the body. The doctor who saw the child next day discovered that she was suffering from chicken-pox. Mrs. M.'s child was taken ill with the disease on December 2nd, and the rash appeared on December 3rd.

Although this is only a single case, I think it is worth recording for two reasons: first, it enables us to definitely declare the period of incubation to be fourteen days; and secondly, it proves that chicken-pox is infectious directly the rash appears.



It is only by recording like conditions of infection that we can accurately state the period of incubation of infectious diseases. I would, therefore, suggest that all medical men, under whose notice similar circumstances occur, should send brief particulars of them to the medical journals.

Beckenham. JOHN J. EYRE, M.R.C.P.I., D.P.H.Cantab.

#### FOREIGN BODY IN THE LUNG.

IN the BRITISH MEDICAL JOURNAL of November 26th, I have been much interested in perusing two cases of foreign body in lung.

*A Case.*—My son, then about 17 years of age, being on board-ship, put a piece of teak into his mouth, when it suddenly slipped through the rima glottidis into the right lung, giving rise at the time to much coughing. Afterwards nothing more was thought of the occurrence until he returned to England, when it was diagnosed "abscess pressing upon the right bronchus." No hint was ever given that any foreign body had been swallowed. The case was regarded as the sequel of fever, contracted at Bombay. After occasional attacks of vomiting and coughing, the abscess gave way, and in the fetid pus was discovered the piece of teak. Upon drawing his attention to it, he then remembered swallowing it when off the Cape of Good Hope, the exact date being fifteen months from the day of entrance to the exit. He now enjoys good health, but, upon catching cold, is apt to manifest signs of bronchial asthma. At the present time he is in command of an ocean steamer, and passes most of his time in a hot climate. In his case nothing but supporting, soothing treatment was resorted to.

Southampton.

SPENCER T. SMYTH, M.D., F.R.C.S.

#### DISLOCATION OF LOWER JAW IN CHILDREN.

I THINK these dislocations must be far more common than statistics show. Personally, I have seen and reduced two cases, both in girls, aged respectively 16 and 13 years, and both caused by yawning. Perhaps the dislocation in children is very easily produced and reduced naturally, and therefore rarely seen in hospitals, or brought under the notice of men who compile statistics. It is common to see a mother support the lower jaw of a yawning infant; but, whether she does so by reason of tradition, observation, or instinct, I do not know, but perhaps the fact itself is worthy of note.

Both the cases referred to occurred during the last six months; and I remember that it was not an uncommon experience ten years ago to find, both in adults and children, that the lower jaw became "set" (that is, dislocated), during the extraction of lower teeth, if the jaw was not efficiently supported.

Lorrimore Square. R. WATSON COUNCELL, M.R.C.S., L.S.A.

## REPORTS

ON

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

#### SIR JAMSETJEE JEJEEBHAY HOSPITAL, BOMBAY.<sup>1</sup>

HYDATIDS OF THE SPLEEN: LARDACEOUS LIVER.

(By Surgeon-Captain F. L. CHILDE, Second Physician to the Hospital.)

R. N., a woman, aged 38, was admitted on May 2nd for pain in the region of the liver. She was a Goanese by extraction, but born and resident in Bombay. She was married and had one son. She said she had suffered from rheumatism for one year, that she had been troubled with diarrhoea for two months, and that the abdominal pain had lasted four months. She had been in the habit of drinking and smoking much. She was much emaciated; there were a number of small, hard rheumatic osteophytes on the spine and around the glenoid cavity of each scapula; the left coracoid process was large and rough, and the movements of the left shoulder-joint impaired. There were no evidences of syphilis. The tongue

was flabby and furred, appetite bad, the motions were diarrhoeic, and passed four times a day. The liver was enlarged, its upper level was at the fifth right intercostal space, below it extended to one inch below the last rib, thence across the abdomen to the umbilicus, and then curved gradually upwards towards the left till it came into contact with the spleen. The hepatic notch was easily felt, the surface of the liver was quite smooth and uniform, and its edge distinct; it was only slightly tender on pressure. There was no jaundice.

The spleen was also enlarged, its lower margin reached to two inches below the last rib, upwards splenic dulness extended to the seventh rib; there was no ascites. The respiratory and circulatory systems were normal, but the heart sounds were feeble; the urine was normal. The patient grew weaker daily, the diarrhoea and abdominal pains persisted, and she became very drowsy, with a subnormal temperature. The liver became more tender to pressure, and the patient rapidly sank and died on May 8th.

*Post-mortem examination* 20 hours after death. Rigor mortis present, but passing off; body emaciated; there were a number of small osteophytes on the spines of the scapulae and on the edges of the glenoid cavities, and the left coracoid process was large, thick, and irregular. The liver weighed 2,170 grammes, it was large, solid, smooth on the surface, and heavy; its edge sharp, its surface glistening, and light-red in colour. It cut with a clean smooth section; it was dry, containing but little blood and bile, and it was not easily lacerable; the cut surface looked like pale-red wax. On the cut surface the separate lobules could not be made out; there was a little watery bile in the gall bladder. The liver gave the lardaceous reactions readily, particularly well with iodine and iodine green. There was a small part of the edge near the gall bladder which was darker and softer, and looked rather less diseased; otherwise the whole organ was as described above. There were rather firm adhesions of the liver to the spleen and diaphragm. The spleen weighed 1,350 grammes; it was large and bound by old adhesions to the liver and diaphragm. On opening it 20 ounces of hydatid cysts were removed, of various sizes, from a small marble to a large hen's egg; the capsules of the cysts were soft and gelatinous. Their contents resembled semi-fluid jelly, but while some of the cysts were quite clear others had partly caseous partly gelatinous walls and contents. All these cysts were contained in one large mother-cyst, and within the latter there was also a considerable quantity of yellowish-white curdy matter, looking like putty, and having no smell. The spleen was a mere sac; its outer surface and lower margin were one-third of an inch thick and looked like normal spleen; its inner surface was one-eighth inch in thickness, composed of firm fibrous tissue, with small islets of thin splenic tissue scattered through it here and there. The spleen did not give the lardaceous reactions. The intestines were pale, their walls thin, and there was but little blood in their vessels; otherwise they were normal. They did not give the lardaceous reactions. All the other organs were examined. They were all anæmic, otherwise there was nothing specially abnormal about them; in none of them was any lardaceous material discovered.

*REMARKS.*—Hydatid disease is rare in India; indeed, this is the only case which has occurred in the *post-mortem* room of this hospital during the past four years. In *Diseases of India*, by Dr. Norman Chevers, p. 29, it is stated: "The only case with which I am acquainted in which it appears to be shown that hydatid disease originated in the human subject in India is that of a low-caste woman of Bhopal, in whose spleen hydatids were found." The patient whose case is described above stated that she had never been out of the city of Bombay.

#### A CASE OF LAMINECTOMY.

(By Surgeon-Major W. K. HATCH, M.B., F.R.C.S. Eng.,  
Acting Senior Surgeon.)

THE patient, a young man, a Sudee, aged about 25 years, was first admitted into the medical wards under Surgeon-Captain Childe, complaining of inability to stand and constipation on July 17th, 1891. A month before admission, while at work on board a ship of which he was fireman, he was struck by the

<sup>1</sup> Read at a meeting of the Bombay Branch of the British Medical Association.

Surgeon-Captain R. HOLYOAKE, serving on the Bombay Establishment, has leave of absence to remain in England from November 26th to May 25th, on medical certificate, in extension.

The death is announced of Inspector-General JOHN ROBERT TAYLOR, C.B., at Cheltenham, on December 23rd, at the age of 82. He was appointed Assistant-Surgeon May 31st, 1833; Surgeon June 14th, 1842; Surgeon-Major March 3rd, 1854; Deputy Inspector-General February 1st, 1855; and Inspector-General December 31st, 1858. He retired on half pay August 11th, 1863. *Hart's Army List* informs us that he served with the 29th Regiment in the Sutlej campaign of 1845-46, including the battles of Ferozeshah and Sobraon (medal and clasp); and with the 80th Regiment in the Burmese war of 1852-53, including the capture of Martaban, the operations before Rangoon on April 12th, 13th, and 14th, and capture of the Great Dagon Pagoda; also at the capture of Promé (medal, with clasp for Pegu). Was in medical charge of the 3rd Division before Sebastopol from March 20th, 1855, to the end of the war, including the assaults of June 18th and September 8th (C.B., medal with clasp, and Turkish medal). He was appointed Honorary Surgeon to the Queen, August 16th, 1859. He was in receipt of a reward for distinguished service.

#### INDIAN MEDICAL SERVICE.

SURGEON-CAPTAIN J. CHATVOT WHITE, M.B., Bengal Establishment, is appointed to officiate in medical charge of the Meywar Bheel Corps.

Surgeon-Lieutenant C. G. ROBSON SCOTT and H. M. EARLE, appointed to the Bengal Establishment, reported their arrival at Bombay, the former on November 1st, the latter on October 31st.

Surgeon-Lieutenant-Colonel C. CAMERON, Bengal Establishment, is permitted to retire from the service from September 21st. He was appointed Assistant-Surgeon July 27th, 1859, and became Surgeon-Lieutenant-Colonel July 27th, 1879. He served with the Bhootan expedition in 1865 (medal).

Surgeon-Captain A. E. GRANT, M.B., Madras Establishment, is confirmed in the appointment of Professor of Hygiene, Madras Medical College, and Assistant Physician at the General Hospital from October 8th.

Brigade-Surgeon-Lieutenant-Colonel F. H. BLENKINSOP, Madras Establishment, is appointed Municipal Councillor for the municipality of Trichinopoly.

Surgeon-Major A. J. STURMER, Madras Establishment, is permitted to return to duty.

Surgeon-Captains G. C. HALL and P. C. H. STRICKLAND, Madras Establishment, have returned to duty from furlough out of India from November 21st, and are directed to do duty in the Madras District.

Surgeon-Major J. LEWIS, M.D., Bengal Establishment, joint Civil Surgeon of Simla, is appointed to the medical charge of the Army Headquarters and establishments remaining at Simla during the winter from November 9th.

Surgeon-Captain D. G. MARSHALL, Bengal Establishment, is posted to the civil medical charge of Roorkee, in addition to his military duties, from the date of taking charge from Surgeon-Lieutenant-Colonel T. O'Reilly.

The services of Surgeon-Lieutenant-Colonel S. L. DOBIE, Madras Establishment, are placed at the disposal of the Military Department, and he is appointed to act as Principal Medical Storekeeper, Madras.

Surgeon-Captain H. M. MORRIS, Bengal Establishment, has been granted leave for four months on medical certificate, and extraordinary leave for two months on medical certificate, without pay, in extension of leave.

The services of Surgeon-Major A. F. FERGUSON, M.B., Bombay Establishment, are placed at the disposal of Government for employment in the Civil Department.

Surgeon-Captain J. B. SMITH, Bombay Establishment, is appointed to officiate in medical charge of the 2nd Bombay Infantry (Grenadiers), *vice* Surgeon-Captain A. Milne, transferred temporarily to the Civil Department.

#### ARMY MEDICAL RESERVE.

SURGEON-CAPTAIN GEORGE R. T. PHILLIPS is promoted to be Surgeon-Major, December 28th.

#### THE VOLUNTEERS.

SURGEON-LIEUTENANT W. T. GRANT, 1st Forfarshire Light Horse, has resigned his commission, which was dated August 7th, 1878.

Mr. WILLIAM JOSEPH MURPHY BARRY is appointed Surgeon-Lieutenant to the 3rd Volunteer Battalion King's Liverpool Regiment (late the 13th Lancashire), December 24th.

Mr. ALEXANDER JAMES BOYD, M.D., is appointed Surgeon-Lieutenant to the 1st Volunteer Battalion Bedfordshire Regiment (late the 1st Hertfordshire).

Acting-Surgeon T. HOLMES, 1st Cadet Battalion Queen's Royal West Surrey Regiment, has resigned his commission, which was dated December 20th, 1890, and Mr. JAMES HERON, M.D., is appointed Acting-Surgeon to the same battalion, December 24th.

## UNIVERSITIES AND COLLEGES.

#### UNIVERSITY OF CAMBRIDGE.

THIRD M.B. EXAMINATION. PART II. *Medicine*.—Addison, B.A., Cai.; Barnes, B.A., Pemb.; Beggs, B.A., Sid.; Bird, B.A., Emm.; Bower, B.A., Trin.; Carr, B.A., Trin.; Crofton-Atkins, B.A., Cla.; Doman, B.A., Cal.; G. M. Edwards, B.A., Emm.; Frith, B.A., Trin.; Goldsmith, B.A., Cal.; Grove, B.A., Sid.; Harvey, B.A., Joh.; Hollis, B.A., Sid.; P. Horton-Smith, B.A., Joh.; W. F. Lloyd, B.A., Cla.; Master, B.A., Cal.; H. T. Maw, M.A., Chr.; Monroe, B.A., Cal.; Ord, B.A., Cal.; Paterson, B.A., Trin.; Phillips, B.A., Down; Ransome, B.A., Cla.; Sevestre, B.A., Trin.; A. A. Shillitoe, B.A., Trin. H.; Shuter, B.A., Down; T. R. H. Smith, B.A., Trin.; W. M. Smith, B.A., Cal.; Stephens, B.A., Cal.; G. W. Thompson, B.A., Chr.

DEGREE.—At the Congregation on December 15th, the following candidate was admitted to the degrees of M.B. and B.C.:  
A. E. Carruthers, M.A., of Christ's College.

#### UNIVERSITY OF DUBLIN.

At the Comitia Hiemalia (winter commencements) held in Michaelmas term, on Thursday, December 15th, 1892, in the theatre of Trinity College, the following Degrees in Medicine, Surgery, and Midwifery, were conferred by the University Caput, in the presence of the Senate.

*Baccalaurei in Medicina, in Chirurgia, et in Arte Obstetricia*.—A. J. Abbott, V. L. Ardagh, F. J. Barter, G. Beare, H. M. Eustace, T. Gibbons, R. W. W. Henry, J. Halahan, G. B. Jones, F. Kiddle, A. Moore, H. B. Moorhead, A. A. Mussen, J. S. Owens, C. H. Saunders, C. B. Scott, E. W. Wade.  
*Doctores in Medicina*.—A. J. Abbott, L. Cole-Baker, H. Fayle, F. J. Green, V. L. Jones, W. F. McCarthy, J. A. McCullagh (*slip cond.*), H. B. Moorhead, N. A. Reid, H. F. N. Scott, A. Silcock, F. S. Swiney, S. C. Westwood.  
*Baccalaureus in Medicina*.—H. L. Ferguson.  
*Doctores in Medicina*.—J. W. Eakin, H. L. Ferguson, L. T. Young (*slip cond.*).

#### SCOTTISH UNIVERSITIES COMMISSION.

FURTHER UNIVERSITY ORDINANCES.—Eleven new ordinances were issued by the Scottish Universities Commissioners on December 19th and 20th. Six of these are of medical importance.

*Composition of the Faculties and Institution of Faculties of Science (General, No. 11)*.—In the University of Edinburgh, the Faculty of Medicine will be constituted of the Professors of Botany, Physiology, Medicine, Anatomy, Chemistry, Midwifery, Natural History, Materia Medica, Clinical Surgery, Medical Jurisprudence, Surgery, and Pathology. The designations of the present Professorships of Institutes of Medicine, Practice of Physic, Midwifery and Diseases of Women and Children, and General Pathology will be altered, and hereafter shall be designated as the Professorships of Physiology, Medicine, Midwifery, and Pathology respectively. The Faculty of Science (now instituted) will consist of the Professors of Mathematics, Natural Philosophy, Botany, Physiology, Anatomy, Chemistry, Natural History, Astronomy, Agriculture and Rural Economy, Pathology, Engineering, and Geology.

*Pensions to Principals and Professors (General, No. 12)*.—Any principal or professor who has completed his 65th year, or having completed his 60th year, has served for thirty years or upwards, or by reason of infirmity has become permanently unable for the duties of his office, shall be entitled to retire and to receive a pension. For ten years' service, twenty-sixtieths of the annual salary, calculating that salary on the average of the five years preceding retirement, the maximum salary being taken at £300, an addition of one-sixtieth for each additional year of service, and no addition in respect of any service beyond thirty years.

*Regulations as to Application of Parliamentary Grants as to Salaries, and for the Institution of a Fee Fund, and for other Purposes (Glasgow, Aberdeen, and Edinburgh, No. 1)*.—By this ordinance the annual Parliamentary grant of £242,000, divided among the universities under the Universities (Scotland) Act, 1889, is shared thus by the following Colleges: Glasgow, £12,150; Aberdeen, £3,400; Edinburgh, £15,120. Further, the annual sum of £30,000 under the Education and Local Taxation Account (Scotland) Act, 1892, is appointed as respective shares to Glasgow, £3,700; Aberdeen, £8,000; Edinburgh, £10,800.

The whole fees payable to the professors are now to be drawn by the University Court, collected as the Court may appoint, and constitute the fee fund. The professors are to receive from this fee fund such sums as shall bring their salaries up to the amount hereinafter fixed as the "normal salary," but, in the event of a deficiency in this fund, the normal salary is to be proportionately diminished. In no case, however, is the salary to be allowed to fall below fixed minimum salary, the deficiency to be supplied out of the other University funds.

The present professors are to receive from the fee fund the full amount of fees drawn from their classes, with just and equitable deductions, not exceeding the average of the sums paid by the professor in each class for the salaries of assistants and class expenses. In the event of the salary of Professor T. Annandale (clinical surgery) falling below £380 in any one year, he may make over his emoluments for that year to the Court, and receive in lieu thereof such a sum as shall bear the same proportion to the total number of students of medicine matriculated in the University in that year as the sum of £380 bears to the average number of such students matriculated in the five years preceding the passing of this ordinance.

Each University is to set aside each year out of its share of the Parliamentary grants or out of its general revenues a sum not less than the following for the payment of pensions, such sum to be termed the "minimum provision for pensions": Glasgow, £4,000; Aberdeen, £1,500; Edinburgh, £5,000. The salaries of principals shall be as follows: Glasgow, £1,100; Aberdeen, £300; Edinburgh, £1,100. In each case an official residence is to be provided in addition.

In the Faculty of Medicine in the University of Edinburgh the following sums are to be "normal salary" and "minimum salary" respectively:

	Normal.	Minimum.
Professor of Physiology ... ..	£1,400*	£300
" " Anatomy ... ..	£1,400*	£300
" " Chemistry ... ..	£1,400*	£300
" " Pathology ... ..	£1,400*	£300
" " Botany ... ..	£1,000*	£300
" " Natural History ... ..	£1,000*	£300
" " Medicine ... ..	£300	£500
" " Midwifery ... ..	£300	£500
" " Materia Medica ... ..	£300	£500
" " Clinical Surgery ... ..	£300	£500
" " Medical Jurisprudence ... ..	£300	£500
" " Surgery ... ..	£300	£500

These salaries marked \* are fixed on the understanding that the professors do not engage in private practice.

<sup>1</sup> *In Absentia*.

*Fourth, entitled "St. Andrews, No 4, Regulations for Degrees in Medicine."*—This is essentially the same as Ordinance No. 16, Edinburgh No. 1, which has already been published in the BRITISH MEDICAL JOURNAL. The only difference is in Section xxvi, and relates to the degree of M.D. It is ordained that "in each of the three years next after the date when this ordinance shall come into operation, but no longer, it shall be lawful for the University of St. Andrews to confer the degree of doctor of medicine on not exceeding ten registered medical practitioners above the age of 40 years, whose professional position and experience are such as in the estimation of the University to entitle them to that degree, and who shall on examination satisfy the medical examiners of the sufficiency of their professional knowledge. No person shall be entitled to receive the degree of M.D. under the provisions of this section unless he shall have intimated his candidature for the said degree to the secretary of the University on or before November 7th, 1892. Except under these provisions the degree of M.D. shall only be conferred on those who have already obtained the degrees of M.B. and C.M.

The fifth new ordinance relates to the application of Parliamentary grants as to salaries, and for the institution of a fee fund and other purposes in the University of St. Andrews.

The sixth makes regulations for professorships in the United College of St. Salvator and St. Leonard, St. Andrews, and in the University College, Dundee.

## PUBLIC HEALTH AND POOR-LAW MEDICAL SERVICES.

### OFFENSIVE SEWERS.

W. W. S. writes: In Uxbridge Road, immediately north of Hyde Park, I have for many years often noticed in the roadway the stench referred to, and would accordingly confirm your correspondent "W." This occurs in repulsive contrast with the refreshing atmosphere belonging to the adjacent interior of the park.

### NOTIFICATION OF PUERPERAL PERITONITIS.

M.O.H.—Puerperal peritonitis ought to be notified if the 1889 Act has been adopted in the district.

### MEDICAL OFFICERS OF HEALTH AND THE DIAGNOSIS OF INFECTIOUS DISEASES.

J. J. G.—(1.) Save under very exceptional circumstances, it is no part of the duty of the M.O.H. to examine notified cases with a view to verifying the diagnosis; nor is it desirable that he should do so, except of course at the request or with the consent of the medical attendant. He has no legal right to insist upon entry for such a purpose. (2 and 3.) The medical attendant should be communicated with before such a step is taken. (4.) It is quite optional. There might be difficulty in agreeing as to the terms of reference or the exact facts. If not, reference to some impartial authority is the usual and proper course.

### THE SMALL-POX EPIDEMIC AT WARRINGTON: EFFECTS OF REVACCINATION.

THE total admissions to the hospital number 400, and altogether there have been 38 deaths from the disease. The medical officer of health has issued a further poster in which he says: One quarter of the population is now safe from the small-pox; a large proportion remains in great and serious danger. Not a single person revaccinated in time has taken the disease. Not one death has occurred in a well-vaccinated person, while it is a matter of experience that the unvaccinated and insufficiently vaccinated have had severer forms of small-pox, have been longer recovering, and had more disfigurement, and other serious after-effects. Of the children that died, ten have been unvaccinated.

### MERSEY PORT SANITARY ADMINISTRATION.

PENDING an official inquiry by the Local Government Board into the question of port sanitary administration in the Mersey, delegates from the various local authorities interested in the matter met at Liverpool on December 21st, when a resolution was unanimously adopted to the effect that the present port sanitary arrangements are satisfactory, and that it is not desirable to make any change. But we hope this will in no wise set aside the inquiry already promised from headquarters, since the Mersey is a river fraught with great danger to England in the event of inefficient administration in times of cholera owing to divided responsibility in matters of port sanitation.

## OBITUARY.

WALTER HAYLE WALSH, LL.D., M.D., F.R.C.P.,  
Emeritus Professor of Medicine and Clinical Medicine University  
College, London.

ON December 14th, in the 81st year of his age, another patriarch in our profession passed away. Dr. Walter Hayle Walshe was for twenty-one years professor in University College, London, and he was one of the brightest medical ornaments of the Victorian era. We say this without the slightest fear of contradiction, for, although thirty years have elapsed since Dr. Walshe resigned his chair at University College, and consequently an entire generation of medical

men has been born, educated, and passed into practice since then, not only the multitude of students who enjoyed the advantages of his teaching, but all those who had the privilege of being his colleagues will readily testify to his having been a man of altogether exceptional ability as a lecturer and a diagnostician. He combined in a very rare degree quickness of perception, soundness of judgment, and lucidity of exposition. These gifts of mind, coupled as they were with an engaging appearance and courteous manners, proved so attractive to all brought into contact with him that it is next to impossible that his personality can ever fade from their memory. Consequently, while a brief sketch of his career will give pleasure to all who knew him in the flesh, it cannot possibly fail to be edifying to the much more numerous class whose only acquaintance with him was through his writings. To the writer, who was for many years his colleague, its portrayal is a labour of love.

Dr. Walshe was born in Dublin on March 19th, 1812, and entered as a student at Trinity College in 1827, where he displayed such remarkable linguistic talent that he was advised to take up philology as a profession, and with this object he beook himself to Paris in 1830. While there, however, through his coming into intimate contact with several of his former fellow students at Trinity College who were pursuing medical studies, he was led to abandon his philological idea and take up the study of medicine. This he accordingly did, and soon afterwards made the acquaintance of Oliver Wendell Holmes, who was also a medical student in Paris at the time. To him, half a century later, he dedicated one of his books.

While studying medicine in Paris, Walshe had the good fortune to follow the course of auscultation given by the renowned Louis at La Pitié, and there laid the foundation of his ultimate success with the stethoscope and pleximeter. Not being satisfied, however, with the system of clinical teaching then followed in the Parisian hospitals, Walshe migrated to Edinburgh, which at that time bore the palm as a clinical school, owing to the mode of teaching adopted and the ability of its professors—more particularly of Allison, Christison, and Syme.

Till the time he graduated at Edinburgh in 1836, Walshe gave special attention to the aural diagnosis of pulmonary and cardiac diseases by percussion and auscultation, and became so remarkably skilful in their diagnosis that we never met a single individual who had seen him, either in the public ward of the hospital or the private sick room, who failed to be struck with the amazing rapidity, as well as with the accuracy with which he detected the physical signs of both cardiac and pulmonary diseases. His spurs were, however, won in the field of pathology, by his articles in the *Cyclopædia of Surgery*. These were so highly thought of that in 1841 he was made Professor of Pathology in University College, London. In 1842 he published a work on *Diseases of the Lungs*, and in 1846 another on *Cancer*, both of which were thought so admirable that when Dr. Williams resigned the Chair of Medicine at University College, Walshe was chosen to succeed him.

Almost simultaneously he was appointed physician to the Brompton Hospital for Diseases of the Chest. We may next refer to the introductory lecture he delivered at University College at the opening of the winter session in 1860. A more impressive lecture was probably never delivered. Walshe took for his text the positive philosophy of Auguste Comte, and expounded it with such energy and eloquence that it was published verbatim in a medical journal under the heading of "An Oration," and an oration most truly it was, alike in language, style, and substance. So successful was Walshe in practice, that at the early age of 50 he was able to withdraw entirely from teaching. That happened in 1862, the year in which his classic work on *Diseases of the Heart and Great Vessels*, passed into its third edition.

Besides his linguistic and other accomplishments, mention must be made of Walshe's musical proclivities. So ardent an admirer was he of classical music that he was not only a frequent visitor at the Italian opera during the season, but he published a work entitled *Dramatic Singing Physiologically Estimated*.

It has often been said that there never was a great man who had not at least one hobby, and most assuredly Walshe



was no exception to the rule. His mind was as versatile in its conception as it was deep in its reasoning. His little book on the *Colloquial Faculty for Languages and the Nature of Genius* indicates this.

Dr. Walshe married late in life, and has left a widow and a son to mourn his loss.

SAMUEL DUKINFELD DARBISHIRE, M.A.,  
M.D. OXFORD.

By the death of Dr. S. D. Darbishire the profession has lost one of its most earnest members, and a figure well known in University and rowing circles has disappeared.

Dr. Darbishire was born in 1846 at No. 1, Spring Gardens, Trafalgar Square, where his father, who was solicitor to the Lancashire and Yorkshire Railway, had taken up his temporary residence. He was descended, both on his father's and mother's side, from old Lancashire Nonconformist families, and his early life was spent partly in Manchester and partly in his father's country house near Conway. He was educated for some time privately, and later at University College School. He entered at Balliol College, Oxford, in 1864, and soon made his reputation as an oarsman of unusual power, first in his College boat and later by rowing stroke in the Inter-University races of 1868, 1869, and 1870. In 1869 he stroked the Oxford boat to victory in the race against Harvard University.

Dr. Darbishire took mathematics for his schools, obtaining a third class in Moderations and a third class in Mathematical Greats. During his residence in college he was well known for his kindly, upright, and cheerful disposition, and particularly for a simplicity of character, which made him many devoted friends. An old story is related of him that, having omitted to send any essay to his tutor (the late Professor Smith) for a fortnight, he was summoned to his tutor and explanation demanded. In reply, Dr. Darbishire said: "When I last brought you an essay you told me if I couldn't do any better I need not write any more—and I had done my best." His modesty is well illustrated by the fact that, although he was one of the best—if not the best—strokers that Oxford has ever produced, he left the management of his College boat to others, and though he was devoted to the interests of his College he was content to remain a simple member of the boat.

After taking his degree, Dr. Darbishire entered at St. Bartholomew's Hospital, and there served the offices of House-Physician and House-Surgeon. He then went abroad, and studied medicine at the Continental schools, and later returned to England, and settled in private practice at Kensington. After remaining here a short time, at the invitation of several influential residents, he came back to Oxford and was elected Physician to the Radcliffe Infirmary. Here he finally settled in practice, and during his residence in Oxford he filled many university offices, amongst them being the Lichfield Lectureship in Medicine, the University Coronership, and an Examinership in Medicine. On the constitution of a Medical Faculty in the University he was elected one of its first members. Besides taking interest in University matters, he was for a time a member of the Local Board for the city.

For some years, until in fact his health began to fail, he threw himself into his professional work with great vigour. On obtaining the post of Physician to the Radcliffe Infirmary he took under his charge the whole of the out-patient department and devoted a large part of his time to this. In hospital work he was most patient and kind to the poor, giving his energy without scruple to his cases. In private practice he was greatly respected and beloved, and he gave his services to many who had seen better days without thought of fee or reward.

In the winter of 1888 his health began to show signs of breaking down, and he travelled abroad for some months without benefit. On returning to England he settled at Penmaenmaur, where he died after a long illness. Those who were privileged to know him will remember him as a hospitable and kindly friend, an enthusiast in all matters likely to benefit his profession, and at the same time as a modest and unassuming English gentleman.

Dr. Darbishire married the daughter of Mr. W. Eckersley, of Manchester, by whom he leaves one son and two daughters.

## MEDICAL NEWS.

THERE are said to be no fewer than 2,000 female practitioners of medicine in the United States.

A second edition of the Hungarian *Pharmacopœia* will shortly be published.

THE Austrian Government has appointed a female practitioner, Dr. Bohnslava Keck, to act provisionally as public medical officer in Bosnia.

M. PASTEUR has received from Queen Emma, for his birthday present, the Grand Cordon of the Lion of the Netherlands, and on Wednesday, December 21st, he was elected an honorary member of the Berlin Medical Society.

A CHEMIST HEAVILY FINED.—Mr. F. Thompson, homœopathic chemist, of Glasgow, was last week fined £70 for selling patent medicines without having them stamped, as required by the Inland Revenue.

DR. A. REEVES JACKSON, Professor of Gynæcology in the College of Physicians and Surgeons of Chicago, who died recently of cerebral hæmorrhage, is believed to have been the original of "my friend the doctor" in Mark Twain's *Innocents Abroad*. Professor Reeves Jackson was also well known in medical literature by his writings on gynæcological subjects.

EDINBURGH UNIVERSITY CHEMICAL SOCIETY.—The following office-bearers have been elected for the ensuing session:—President: Professor Crum Brown; Vice-Presidents: Dr. Dobbin and Dr. Marshall; Librarian: Mr. Th. Rettie; Secretary: Mr. A. F. Watson; Treasurer: Mr. J. W. Tullo; Members of Committee: Messrs. Bolan, Campbell Dykes, Fairbairn, Lee, and Nisbet; Mr. Tullo was appointed Representative to the Students' Council.

WE regret to learn that Mr. Walter A. Price, aged 24, a fourth year's student of the Bristol Royal Infirmary, was taken ill while on duty as dresser for the week on December 8th with lymphangitis of the arm, and, after a few days, developed cellulitis and died on the morning of December 15th. A memorial service was held in the infirmary chapel on December 17th, which was attended by the members of the honorary staff, the resident medical officers, and a large number of nurses, students, and patients.

ROYAL PHYSICAL SOCIETY, EDINBURGH.—Professor H. A. Nicolson presided at a meeting of this Society last week, at which it was reported that the Society consisted of 225 ordinary members, 16 extraordinary, and 19 corresponding members. A communication was read on the glacial fauna of a district of the County of Banff. Mr. J. E. Goodchild stated the results of further observations on the lungs of birds, supplementary to those given previously. He exhibited a series of wings prepared at Sir William Flowers's request for the South Kensington Index Museum, to illustrate the variations of covert feathers on the fore limb.

ULSTER HOSPITAL FOR WOMEN AND CHILDREN.—A bazaar in aid of this institution was held recently during three days in the Ulster Hall, Belfast. On the first day the inauguration ceremony was performed by the Duchess of Abercorn, and the Duke of Abercorn delivered a speech, commending the objects of the bazaar. On the second day the bazaar was opened by the Lady Mayoress of Belfast, Mrs. Dixon, and on the closing day by Mrs. Hamilton, wife of the President of the Queen's College. The stalls were arranged as vessels, supposed to form part of a fleet for Polar exploration. The bazaar was largely attended, and it is expected that about £1,000 will be realised.

AN ABORTIVE CONGRESS.—The Hispano-American Congress, which was to have been held in Madrid on the occasion of the celebration of the quatercentenary of the discovery of America by Columbus, fell through, it appears, owing to what may be called a "conspiracy of indifference" on the part of the Government and the medical profession. Senor Canovas was applied to on the subject three times, but vouchsafed no reply. Of 1,000 invitations sent out to members of the medical profession, only 2 bore fruit in the shape of adhesions. The *coup de grâce* was finally given by the authorities declining to carry out their promise of pecuniary support on the ground of the depleted state of the exchequer.

**NURSES FOR THE MOLOKAI LEPERS.**—It may be remembered that shortly after the death of Father Damien, Sister Rose Gertrude started for Molokai amidst a flourish of journalistic trumpets to nurse the poor outcasts who inhabit that island of disease and death. Instead of martyrdom, however, she found marriage—perhaps a happier if not so glorious a vocation. Undeterred by her fate, a party of young American ladies are now, as we learn from the *Boston Medical and Surgical Journal*, on their way to Molokai to take her place among the lepers.

**INEBRIATE WOMEN.**—A law has recently been passed by the Legislature of the State of New York, establishing in New York City an institution for female inebriates. The law permits of the admission to St. Saviour's Sanatorium of women addicted to the inordinate use of alcohol, opium, morphine, or any other intoxicant, by voluntary commitment for three months. But they may be committed for a year by a judge of a court of record upon the sworn certificates of two physicians, with the privilege of a renewal of the term of commitment for another year, if deemed necessary for a completion of the cure. There is a staff of physicians in attendance. This marks a great advance in the United States, for hitherto there has been no means of placing patients beyond the reach of temptation, except by committing them to asylums for the insane. It is expected that this step will be followed by the inauguration of other similar establishments in the various States.

**EXPLOSION OF ETHER.**—A serious explosion occurred in the surgery of Dr. Alfred Averill, in Longton, Staffordshire, on the evening of December 19th. Dr. Averill, while pouring sulphuric ether into a phial from a five-pint bottle upset the liquid near the fireplace. The ether became ignited and a loud explosion followed. The house was shaken and the bottles in the surgery shattered, the windows also were broken and the room was totally wrecked. Dr. Averill was found with his clothes in flames rolling about on the floor. His eldest son rushed into the room and with great presence of mind ripped the clothes off his father's body and saved him from being burnt to death. Dr. Averill, who was very badly injured about the head, face, and other parts of the body, is, we are glad to learn, progressing favourably though still confined to bed. His son was burned about the hand.

**DEATHS IN THE PROFESSION ABROAD.**—Among the members of the medical profession who have recently died in foreign countries are: Dr. Johann Georg Joessel, Professor of Anatomy in the University of Strassburg, aged 54; Dr. Enoch Fithian, of Greenwich, New Jersey, U.S.A., who took his degree in the University of Pennsylvania in 1816, aged 101; Dr. Walter Carpenter, formerly Professor of Materia Medica in the Medical Department of the University of Vermont, aged 84; Dr. Franklin H. Hooper, a distinguished laryngologist and physiologist of Boston, of cancer of the tongue, aged 42; Dr. Giovanni Bonalumi, Surgeon-Colonel in the Italian Army, Professor of Military Medical Jurisprudence, and author of a valuable treatise on that subject; S. J. N. Aichhorn, M.D., Emeritus Professor of Mineralogy and Geognosy in the University of Prague, aged 79; Dr. Luigi Amabile, some time Professor of Pathological Anatomy in the University of Naples, author of papers on Movable Bodies in Joints, Vesico-vaginal Fistulæ, etc., and of works on philosophy and general literature (*Tommasso Campanella, The Inquisition in Naples*, etc.) and a Senator of the Kingdom of Italy, aged 64; Professor Armando Melegari, Physician to the Public Hospital at Brescia, aged 42; Dr. Eulogio Zomeno Martinez, of Cuenca, Physician to the Real Hospital de Santiago in that city, and a practitioner of considerable repute in Spain, aged 77; Dr. Bonnet, of Jujurieux, formerly a member of the French Senate; Dr. Charazac, of Toulouse, a laryngologist of considerable distinction, aged 34; Dr. Tracon, Chief Assistant in the Obstetrical Clinic of the Medical Faculty of Lille; Dr. J. Roseburgh Leaming, a well-known physician of New York, aged 72; Dr. Brixhe, one of the leading practitioners of Liège, aged 65; and Dr. Caspar Theod. Kraus, formerly Medical Councillor, that is, Chief of the Official Sanitary Staff, of Hamburg, aged 66. Dr. Kraus resigned this post soon after the outbreak of the recent epidemic; he had long been in bad health, and his death is said to have been due to cancer of the lung.

**THE LATE DR. AVELING.**—A correspondent writes: The late Dr. Aveling took an active part in promoting the education of midwives. In the autumn of 1870 the Obstetrical Society (of which he was an original Fellow) adopted the recommendation of their Council that an examining board for midwives be formed. A year later the Board was organised, and the first members were Dr. Hall Davis (Chairman), Drs. Aveling, Meadows, and Sedgwick, and the Honorary Secretaries, Drs. Playfair and J. Jones Phillips (*ex officio*). The first examination was held in April, 1872. Only four candidates were examined, all satisfying the Board. At the October examination, 1891, 64 were examined, 46 passing. From 1875 to 1883 Dr. Aveling remained on the Board, holding the office of Chairman from 1878 until 1883. He also held the appointments of Honorary Secretary and Honorary Librarian to the Obstetrical Society, and was Vice-President in 1877-8. He served on its Council as early as 1865, and as late as 1884, when re-elected as an ordinary member. At the annual meeting of the Obstetrical Society in February, 1891, he moved a resolution, which was adopted, approving "the policy pursued by the Society for the last twenty years relating to midwives." Dr. Tilt, in his annual address, delivered in 1874 at the Obstetrical Society, when he was President, referred to the foundation of the *Obstetrical Journal* in 1873. "It was," he observed, "an excellent idea of Dr. Aveling to attempt to concentrate in a monthly number what was best out of the obstetrical literature of our own and other countries, and the well carrying out this idea would greatly aid the advance of obstetrical science." These remarks were true, and it is, in some respects, to be regretted that the venture did not meet with the success which it deserved. Our readers will remember that Dr. Aveling wrote a letter on his favourite subject, "Registration of Midwives," which appeared in the *BRITISH MEDICAL JOURNAL* on November 19th, and was dated "Nov. 14th," so that it was written but four weeks before his death.

#### MEDICAL VACANCIES.

The following vacancies are announced:

- ALNWICK INFIRMARY.**—House-Surgeon; unmarried. Salary, £120 per annum, with furnished apartments, attendance, coals, and gas. Applications to William T. Hindmarsh, 26, Bondgate Without, Alnwick by January 14th, 1893.
- ANCOATS HOSPITAL, Manchester.**—Resident Junior House-Surgeon. Salary, £50 per annum, with board and washing. Applications to Alexander Forrest, Honorary Secretary.
- BIRMINGHAM AND MIDLAND EYE HOSPITAL.**—Assistant House Surgeon. Salary, £50 per annum, with apartments and board. Applications to the Chairman of the Medical Board by January 2nd, 1893.
- BRIDGWATER INFIRMARY.**—House-Surgeon. Salary, £80 per annum, with board and residence. Applications to Mr. John Coombs, Honorary Secretary, by January 1st, 1893.
- CENTRAL LONDON OPHTHALMIC HOSPITAL, Gray's Inn Road, W.C.**—House-Surgeon. Rooms, coal, and light provided. Applications to the Secretary by January 10th, 1893.
- CHICHESTER INFIRMARY, Chichester.**—House-Surgeon. Salary, £80 per annum, with board, lodging, and washing. Applications to E. E. Street, Secretary, by March 1st, 1893.
- COUNTY OF CHESTER.**—Medical Officer of Health; doubly qualified. Salary, £100 per annum, and out-of-pocket travelling expenses. Applications to Reginald Potts, Clerk to the Cheshire County Council, Chester, by December 31st.
- GENERAL HOSPITAL, Birmingham.**—Assistant House-Surgeon. Board, residence, and washing provided. Applications to the House-Governor by December 31st.
- HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton.**—House-Physicians. Applications to the Secretary by January 12th, 1893.
- HOSTEL OF ST. LUKE, Devonshire Street, W.**—Honorary Visiting Medical Officer. Applications to the Secretary, Hostel of St. Luke, Church House, Westminster, by January 7th, 1893.
- KENSINGTON DISPENSARY.**—Honorary Medical Officer. Applications to Mr. Fred. Leach, 7, Stanford Road, Kensington Square, W., by January 3rd, 1893.
- KILLARNEY DISTRICT LUNATIC ASYLUM.**—Assistant Medical Officer. Salary, £100 per annum, with allowances valued at £100 yearly. Candidates must be unmarried, and not over 30. Applications to Dr. L. T. Griffin, Resident Medical Superintendent. Election on January 19th, 1893.
- KING'S COLLEGE, London.**—Assistant Physician for Diseases of the Throat at King's College Hospital. Applications to J. W. Cunningham, Secretary.
- MANCHESTER ROYAL INFIRMARY.**—Resident Medical Officer for the Fever Hospital at Monsall; not less than 25 years of age, doubly qualified. Salary, £250 per annum, with board and residence. Applications to the Chairman of the Board by January 7th, 1893.

**NATIONAL HOSPITAL FOR THE PARALYSED AND EPILEPTIC** (Albert Memorial), Queen Square, Bloomsbury, W.C.—House-Physician, double qualified. Salary, £100 per annum, with board and apartments. Applications to S. Burford Rawlings, Secretary and General Director, by January 5th, 1893.

**NORTH STAFFORDSHIRE INFIRMARY AND EYE HOSPITAL**, Harts-hill, Stoke-on-Trent.—House-Surgeon; doubly qualified. Salary, £120 per annum, increasing £10 yearly, with furnished apartments, board, and washing. Applications to the Secretary by January 21st, 1893.

**PARISH OF APPECROSS**, Ross-shire.—Medical Officer for a Division. Emoluments from public sources, £105 per annum, with house and garden free. Applications to Mr. D. Bain, Applecross, by January 7th, 1893.

**ROYAL WESTMINSTER OPHTHALMIC HOSPITAL**, King William Street, West Strand. Clinical Assistants. Applications to the Secretary, by December 31st.

**SHEFFIELD PUBLIC HOSPITAL AND DISPENSARY**.—Senior Assistant House-Surgeon. Salary, £72 per annum, with board, lodging, and washing. Applications to Dr. Crochley Clapham, Honorary Secretary Medical Staff, The Grange, near Rotherham, by January 2nd, 1893.

**SOUTHPORT INFIRMARY**.—House-Surgeon, doubly qualified. Salary, £100 per annum, with board, furnished rooms, and attendance. Applications to Joseph Worral, Infirmary, Southport, by January 4th, 1893.

**STRATFORD-ON-AVON RURAL SANITARY AUTHORITY**.—Medical Officer of Health. Salary, £110 per annum. Applications to John Charles Warden, 9, Guild Street, Stratford-on-Avon, by January 21st, 1893.

**STRATFORD-ON-AVON URBAN SANITARY AUTHORITY**.—Medical Officer of Health. Salary, £40 per annum. Applications to Thomas Hunt, Town Clerk, Municipal Office, Stratford-on-Avon, by January 2nd, 1893.

**UNIVERSITY COLLEGE OF SOUTH WALES AND MONMOUTHSHIRE**, Cardiff.—A Professor of Anatomy, and a Professor of Physiology. Stipend in each case, £350 per annum. Applications to Ivor James, Registrar, by February 10th, 1893.

**UNIVERSITY OF EDINBURGH**.—Examiner in each of the following subjects: (1) Anatomy, (2) Chemistry and Laboratory Work for the First B.Sc. Examination in Public Health, (3) Midwifery, (4) Practice of Physic, and (5) Botany. The salary in each of the departments Nos. 1, 3, 4, and 5 is £75 a year, and in No. 2 £90 a year, with an allowance of £10 per annum for travelling and other expenses in the case of Examiners not resident in Edinburgh or the immediate neighbourhood. Applications to M. C. Taylor, Secretary, by January 9th, 1893.

**UNIVERSITY OF GLASGOW**.—Assistant Examiner in Zoology. Salary, £30 per annum. Applications to the Secretary of the Court, Mr. Alan E. Clapperton, West Regent Street, Glasgow, by January 10th, 1893.

**VICTORIA HOSPITAL FOR SICK CHILDREN**, Queen's Road, Chelsea, S.W.—House-Physician to the In-patients; doubly qualified. Honorarium, £30 per annum, with board and lodging. Applications to the Secretary by January 14th, 1893.

**VICTORIA HOSPITAL FOR SICK CHILDREN**, Queen's Road, Chelsea, S.W.—House-Surgeon to the In-patients; doubly qualified. Honorarium, £50 per annum, with board and lodging. Applications to the Secretary by January 14th, 1893.

**WEST HERTS INFIRMARY**, Hemel Hempstead.—House-Surgeon and Dispenser; doubly qualified, unmarried. Salary, £100 per annum, with board, furnished rooms, light, fire, attendance, and washing. Applications to the Secretary by January 31st, 1893.

### MEDICAL APPOINTMENTS.

**BARRON**, Barclay Josiah, M.B., C.M. Edin., appointed Physician to the Nose and Throat Department of the Bristol General Hospital.

**BIERNACKI**, John, M.B., C.M. Glas., appointed Medical Officer at the Bootle Borough Hospital.

**BONAR**, Thomas Mitchell, M.B., C.M. Glas., appointed Medical Officer of Health for the Western District of the Truro Rural Sanitary Authority, vice F. G. H. Whitley, resigned.

**BOYD**, John St. Clair, M.B., M.Ch., R.U.I., appointed Surgeon to the Samaritan Hospital for Women, Belfast.

**BROWN**, John, M.D. Vict., M.B., Ch.B., reappointed Medical Officer of Health for Bacup.

**BURY**, R. F., appointed House-Surgeon to St. George's Hospital.

**CLARKE**, J. Michell, B.A. Camb., M.D., M.R.C.S., appointed Physician to the Bristol General Hospital.

**CROSSE**, Herbert William, M.B., C.M. Edin., appointed temporary Medical Officer of Health for Norwich, vice T. W. Crosse, M.R.C.S. Eng., deceased.

**ELLIOTT**, C. N., M.B., C.M. Dub., appointed Medical Officer of Health for the Rural Sanitary District of the Oundle Union, vice G. W. B. Calcott, M.R.C.S. Eng., resigned.

**ELLIS**, W. C., L.R.C.P., L.R.C.S. Edin., L.F.P.S. Glas., appointed Medical Officer for the Tollerton Sanitary District of the Great Ouseburn Union.

**FULLARTON**, Robert, M.D., appointed Lecturer on Diseases of the Throat and Nose at St. Mungo's College, Glasgow, vice David Newman, M.D., resigned.

**GOODWIN**, Edward Knot, M.R.C.S., L.R.C.P. Lond., appointed Assistant House-Surgeon to the Royal Albert Hospital and Eye Infirmary, Devonport, vice Dr. McKinnon, resigned.

**HARRISON**, Reginald, F.R.C.S., appointed House-Surgeon to the Kingston Provident Dispensary.

**HEAVEN**, John C., L.R.C.P., M.R.C.S., L.S.A., D.P.H., reappointed Medical Officer of Health to the Keynsham Rural Sanitary District.

**KENT**, Robert Thomas, M.A., F.R.C.S., appointed Professor of Anatomy at St. Mungo's College, Glasgow, vice Henry E. Clark, M.R.C.S., appointed Professor of Surgery.

**LANCASTER**, Ernest Le Cronier, B.A. Oxon., M.B., B.Ch., appointed Medical Officer to the Out-door Patients at the Swansea Hospital, vice Jabez Thomas, F.R.C.S. Eng., L.R.C.P. Edin., resigned.

**LITTLE**, Andrew, M.B., C.M. Aberd., appointed Ophthalmic and Aural Surgeon to the Victoria Hospital, Burnley.

**LUSH**, Percy J. F., M.A., M.B., B.Ch. Oxon., M.R.C.S., appointed Medical Officer of Friedenheim, Upper Avenue Road, Swiss Cottage, N.W.

**MACLURE**, Herbert William, B.A. Camb., M.B., B.C., appointed Medical Officer for the South District of the Paddington Union.

**MARRIOTT**, Osburne Delano, M.D. Glas., reappointed Medical Officer for Seventh District of the Sevenoaks Union.

**OVEREND**, Mr. W., appointed Junior Assistant Medical Officer to the Infirmary of the Fulham Union, vice — Smith.

**PARKER**, George, M.A., M.D. Cantab., M.R.C.S. Eng., appointed Assistant Physician to the Bristol General Hospital.

**ROBERTSON**, George M., M.B., C.M. Edin., appointed Medical Superintendent of the Perth District Asylum at Murthly, vice C. MacIver Campbell, M.A., M.D. Aberd., resigned.

**ROMER**, R. Leslie, appointed Honorary Physician to St. George's Hospital.

**SIBLEY**, W. Knowsley, M.A., M.D., B.C., M.R.C.P., appointed Clinical Assistant to the Skin Department of the Middlesex Hospital.

**SNEIL**, Mr. E. H., appointed Assistant Medical Officer at the Workhouse and Infirmary of the Parish of Paddington.

**WALKER**, Benjamin, M.D. Durh., M.R.C.S. Eng., reappointed Medical Officer for the Ravenstonedale District of the East Ward Union.

**WILLIAMS**, W. M.A., M.B., B.S., D.P.H. Oxon., M.R.C.S. Eng., F.C.S. Lond., appointed Medical Officer of Health to the Glamorganshire County Council.

**WILSON**, John, L.R.C.P., L.R.C.S. Edin., reappointed Medical Officer of Health for Pudsey.

**WINSTANLEY**, R. W., L.R.C.P., L.M. Edin., M.R.C.S., appointed Medical Officer for the Shotter Mill Sanitary District of the Farnham Union, vice Henry Whiting, M.R.C.S. Eng.

### DIARY FOR NEXT WEEK.

#### WEDNESDAY.

**OBSTETRICAL SOCIETY OF LONDON**, 8 P.M.—Specimens will be shown by Dr. Handfield-Jones, Dr. Napier, Dr. W. S. A. Griffith, Dr. Playfair, and others. Dr. Herman: On the Frequency of Local Symptoms Associated with Backward Displacements of the Uterus. Dr. Cullingworth: Note Supplementary to a Paper on Vaginal Hysterectomy, giving the Subsequent History of the Cases.

#### THURSDAY.

**HARVEIAN SOCIETY OF LONDON**, 8.30 P.M.—Discussion on Obstruction of the Large Intestine. To be opened by Mr. Harrison crimps.

### BIRTHS, MARRIAGES, AND DEATHS.

*The charge for inserting announcements of Births, Marriages, and Deaths is 2s. 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.

**GREENER**—December 16th, at 1, Clare Street, Riverside, Cardiff, the wife of M. H. Greener, M.B., of a son.

**SPENCER**—On December 26th, at 35, Brook Street, Grosvenor Square, the wife of Walter G. Spencer, F.R.C.S., of a son.

**STOCKER**—On December 25th, at Floore, Weedon, the wife of E. G. Stocker, M.R.C.S., L.R.C.P., of a daughter, stillborn.

#### MARRIAGES.

**CLARKE—HARRISON**.—On December 20th, at St. Paul's Church, Clifton, by the Rev. J. Michell Clarke, rector of Fenny Drayton (uncle of the bridegroom), assisted by the Rev. Canon Mather, the vicar, and the Rev. W. Gordon (cousin of the bride), J. Michell Clarke, M.A., M.D. Cantab., M.R.C.P., eldest son of the late Wm. Mitchell Clarke, surgeon, Clifton, to Amy, eldest daughter of Dr. Alf. J. Harrison, of Failand Lodge, Clifton.

**ENTHOVEN—RUDALL**.—On October 12th, at St. Paul's Cathedral, Melbourne, Australia, by the Rev. Canon Handfield, assisted by the Rev. J. G. Swan, Elias James, third son of John Enthoven, of Harrow-on-the-Hill, England, to Anna Georgiana, only surviving daughter of James T. Rudall, F.R.C.S., of Spring Street, Melbourne.

**OWEN—O'NEILL**.—On November 26th, 1892, at St. Michael's Church, Colombo, Ceylon, by Rev. J. C. Ford, M.A., Arthur Deaker Owen, M.R.C.S., of the Perak Government Service, Straits Settlements, to Katharine, eldest daughter of Major Edward O'Neill, Teignmouth, South Devon.

#### DEATHS.

**BARSTOW**.—At 8, Hoxton Street, Gillington, Bradford, on December 20th, Arthur Henry Barstow, L.R.C.P.S. Edin., L.F.P.S. Glas., aged 29.

**BOOTH**.—At 231, Union Street, Aberdeen, on the 17th December, in the 55th year of her age, Mary Craig Mackenzie, wife of James Booth, M.D., M.R.C.S.

**GODWIN**.—At Rawal Pindi, India, on December 23rd, Surgeon-Colonel C. H. Y. Godwin, Principal Medical Officer Rawal Pindi Division, late Professor of Military Surgery Army Medical School, Netley, aged 54.