

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF LONDON.

INTERMEDIATE EXAMINATION IN MEDICINE, Pass List.—*Entire Examination.*—First Division: A. R. J. Douglas, St. Bartholomew's Hospital; Mary Buchan Donie, London School of Medicine and Pharmaceutical Society; A. E. Evans, Westminster Hospital; E. J. Fox, Owens College; G. F. S. Genge, Westminster Hospital; F. C. B. Gittings, Middlesex Hospital; F. W. Goldie, Guy's Hospital; Urania Latham, London School of Medicine for Women; F. B. Thornton, St. Thomas's Hospital; W. B. L. Trotter, University College; W. C. Wood, St. Mary's Hospital. Second Division: Louisa Garrett Anderson, London School of Medicine for Women; W. B. Anderton, Owens College; S. H. Berry, Charing Cross Hospital; W. P. V. Bonney, Middlesex Hospital; A. Burn, St. Mary's Hospital and Birkbeck Institute; M. Cameron, London Hospital; J. H. Churchill, St. Bartholomew's Hospital; C. C. Clarkson, University College; H. M. Cooper, St. George's Hospital; A. W. Dickson, St. Bartholomew's Hospital; J. A. Dredge, St. Bartholomew's Hospital; A. Earnshaw, Guy's Hospital; G. R. Elwin, St. Mary's Hospital; F. A. Field, St. Bartholomew's Hospital; E. Fisk, Guy's Hospital; A. B. Fry, London Hospital; L. Gilbert, St. Thomas's Hospital; C. F. Gordon, St. Bartholomew's Hospital; W. J. Harding, St. Bartholomew's Hospital; S. Hunt, St. Bartholomew's Hospital; G. Hutcheson, London Hospital; H. W. Jackson, University College; A. E. Jerman, Westminster Hospital; R. Kay, Guy's Hospital; Sarah Kaye, London School of Medicine for Women; H. Leader, Guy's Hospital; W. Liversidge, University College; A. A. Montague, St. Thomas's Hospital; J. T. Roberts, Guy's Hospital; T. O. Roe, University College; E. L. M. Rusby, King's College; J. M. Schaub, King's College; J. Shardlow, University College; E. I. Spriggs, Guy's Hospital; G. H. Warren, London Hospital; H. Weeks, St. Bartholomew's Hospital; S. Whicher, Guy's Hospital.

Excluding Physiology.—First Division: H. Mundy, St. Bartholomew's Hospital; C. Kundle, St. Mary's Hospital; J. P. Scatchard, St. Thomas's Hospital. Second Division: J. A. P. Barnes, St. Bartholomew's Hospital; H. N. Goode, St. Thomas's Hospital; F. R. Greenwood, Mason College; H. F. Mantell, St. Mary's Hospital; C. S. Read, University College; C. Riviere, St. Bartholomew's Hospital; S. F. Smith, St. Bartholomew's Hospital; H. Sugden, St. Mary's Hospital; L. K. Thomas, Queen's and Mason Colleges, Birmingham; W. Wrangham, St. Bartholomew's Hospital.

Physiology Only.—First Division: J. F. Bill, St. Bartholomew's Hospital; J. H. Murray, University College. Second Division: R. H. Ashwin, Guy's Hospital; J. N. Bahadurji, University College; F. W. Binckes, St. Thomas's Hospital; S. L. Box, St. Bartholomew's Hospital; P. W. Brigstocke, St. Bartholomew's Hospital; D. H. F. Cowin, St. Bartholomew's Hospital; Frances Ede, London School of Medicine for Women; E. G. L. Goffe, University College; J. T. Leon, B.Sc., St. Mary's Hospital; L. F. Marks, St. Bartholomew's Hospital; E. Pratt, St. Bartholomew's Hospital; J. W. F. Rait, University College; A. H. Spicer, Guy's Hospital; A. B. Tucker, St. Bartholomew's Hospital.

EXAMINATION FOR HONOURS.

Anatomy.—First Class: *C. Bolton, University College; J. J. Beatty, Trinity College, Dublin; and J. C. Roberts, Middlesex Hospital. Second Class: F. Riley, Westminster Hospital; and J. S. Ross, Owens College (equal); and G. K. Levick, Guy's Hospital. Third Class: J. G. Emanuel, B.Sc., Mason College; J. V. Hartley, Yorkshire College; and A. W. Sikes, B.Sc., St. Thomas's Hospital.

Physiology and Histology.—First Class: *V. C. Collins, Guy's Hospital; and R. P. Williams, King's College (equal). Second Class: F. Riley, Westminster Hospital; and A. W. Sikes, St. Thomas's Hospital. Third Class: C. Bolton, University College.

Organic Chemistry.—First Class: *A. W. Sikes, St. Thomas's Hospital; and H. E. Wise, Middlesex Hospital. Third Class: T. J. Horder, B.Sc., St. Bartholomew's Hospital; and J. G. Emanuel, Mason College.

Materia Medica and Pharmaceutical Chemistry.—First Class: *R. P. Williams, King's College. Second Class: J. Howell, Guy's Hospital; E. M. Aubin, Middlesex Hospital; and C. Roberts, Middlesex Hospital. Third Class: A. Howell, St. Mary's Hospital and Birkbeck Institute; G. K. Levick, Guy's Hospital; and A. W. Sikes, St. Thomas's Hospital.

*Exhibition and Gold Medal.

† Gold Medal.

‡ Obtained the number of marks qualifying for a Gold Medal.

EXAMINING BOARD IN ENGLAND BY THE ROYAL COLLEGES OF PHYSICIANS AND SURGEONS.

The following gentlemen passed the First Examination of the Board at the quarterly meeting of the Examiners in the subjects indicated under the Four Years Regulations:

Part I. Chemistry and Chemical Physics.—F. Adams, St. Thomas's Hospital; H. A. Ahrens, King's College, London; U. M. Asplen, Cambridge University and King's College, London; J. K. Bell, University College, Liverpool; J. Bennett, Owens College, Manchester; J. Birch, Owens College, Manchester; T. N. Blomfield, private study; A. E. Caddy, King's College, London; W. W. Claridge, Middlesex Hospital; P. D. Cogswell, St. Mary's Hospital; W. H. Davis, University College, London; F. C. Dudley, Westminster Hospital; O. R. Ennion, St. Mary's Hospital; A. Farrington, Cambridge University and St. Bartholomew's Hospital; W. H. Goodchild, St. Bartholomew's Hospital; R. W. Hill, Owens College, Manchester; W. H. Howard, Owens College, Manchester; A. H. Hughes, Clifton Laboratory, Bristol; O. S. Kellett, Cambridge University; G. H. Lucas, Middlesex Hospital; G. L. Meredith, London Hospital; A. F. Mortimer, St. Thomas's Hospital; E.

A. Onyon, private study; J. L. Payne, Guy's Hospital; R. C. Smith, University College, Liverpool; P. B. Spurgin, St. Mary's Hospital; T. W. H. Stephens, University College, London; R. S. Thorpe, Owens College, Manchester and Guy's Hospital; A. H. Whittingham, Cambridge University and St. Mary's Hospital; P. G. Williams, St. Thomas's Hospital.

Part II. Materia Medica and Pharmacy.—G. H. Alcock, St. Thomas's Hospital; H. Allen, St. Bartholomew's Hospital; W. R. Battye, University College, Bristol; T. D. Bell, University College, London; A. P. Birch, Middlesex Hospital; J. Birch, Owens College, Manchester; J. J. Blagdon, St. Bartholomew's Hospital; T. N. Blomfield, Private Study; C. Bramwell, King's College, London; F. Brickwell, St. Bartholomew's Hospital; E. F. Burton, Queen's College, Birmingham; F. A. H. Clarke, St. Bartholomew's Hospital; W. H. Clough, Yorkshire College, Leeds; H. A. Colwell, St. Bartholomew's Hospital; E. R. M. C. Cousins, University College, London; T. W. Croft, Westminster Hospital; D. E. Curme, Cambridge University and King's College, London; E. C. Davies, Guy's Hospital; H. Davis, St. Bartholomew's Hospital; W. H. Davis, University College, London; J. L. F. De Gannes, University College, London; W. S. Dibbs, Yorkshire College, Leeds; G. Downes, Carmichael College, Dublin; C. Dykes, University College, London; O. R. Ennion, St. Mary's Hospital; H. J. Farnt, Sarian Protestant College, Beyrout; D. Fogarty, Carmichael College, Dublin; G. E. Gardiner, St. Bartholomew's Hospital; T. H. Gardner, King's College, London; C. B. Garman, London Hospital; E. K. Grazebrook, King's College, London; W. Green, Charing Cross Hospital; L. E. C. Handson, Guy's Hospital; H. E. Hewitt, St. Thomas's Hospital; J. J. Ireland, University College, Liverpool; E. S. Jones, St. Bartholomew's Hospital; H. L. Lambert, St. Bartholomew's Hospital; N. Lavers, Guy's Hospital; F. H. Lawson, Middlesex Hospital; W. H. Lee, Firth College, Sheffield; G. W. Lewis, University College, London; E. Lloyd, St. Bartholomew's Hospital; G. H. Lucas, Middlesex Hospital; J. M. A. Manning, St. George's Hospital; A. R. Mansell, St. Bartholomew's Hospital; S. R. R. Matthews, St. Mary's Hospital; E. H. Milsom, St. Mary's Hospital; E. C. Morland, St. Bartholomew's Hospital; W. E. Morgan, Charing Cross Hospital; E. A. Onyon, private study; W. H. Pearse, Middlesex Hospital; W. H. Peile, University College, London; E. C. Plummer, King's College, London; R. S. Ransome, St. Thomas's Hospital; G. Renshaw, Owens College, Manchester; J. W. Rollings, University College, London; R. P. Rowland, Guy's Hospital; A. L. Rozelaar, Charing Cross Hospital; E. S. Shave, Middlesex Hospital; A. W. S. Sheldon, St. Bartholomew's Hospital; S. S. Simmons, University College, London; F. H. Sturdee, St. Thomas's Hospital; E. H. Sweet, St. Mary's Hospital; W. V. P. Teague, London Hospital; G. B. Thwaites, St. Thomas's Hospital; S. V. H. Underhill, St. George's Hospital; H. J. Viney, Middlesex Hospital; S. E. Walker, Westminster Hospital; H. G. S. Webb, St. Mary's Hospital; L. T. Wells, St. Mary's Hospital; P. S. White, Queen's College, Birmingham; L. Whitfield, Queen's College, Birmingham; W. W. Williams, University College, London; J. Winder, St. Mary's Hospital; W. E. A. Worley, St. Bartholomew's Hospital; J. C. Young, Queen's College, Birmingham.

Part III. Elementary Anatomy and Physiology.—E. G. Battiscombe, London Hospital; J. K. Belt, University College, Liverpool; S. C. S. Broughton, Queen's College, Birmingham; E. G. Bunbury, Cambridge University and University College, Bristol; J. Butterworth, Owens College, Manchester; B. F. Carlyle, St. Bartholomew's Hospital; A. M. Crosfield, University College, Liverpool; C. Dykes, University College, London; R. S. Elvins, Queen's College, Birmingham; H. W. Freer, Queen's College, Birmingham; A. Holden, Owens College, Manchester; E. McKay, Middlesex Hospital; A. W. Naughtin, King's College, London; F. J. Nicholls, Cambridge University and Guy's Hospital; S. D. Oldham, Owens College, Manchester; S. B. Reid, Cambridge University; F. J. Russell, London Hospital; R. Sykes, Yorkshire College, Leeds; I. Taylor, Yorkshire College, Leeds; A. P. Watkins, University College, London; W. I. Weldon, St. George's Hospital; and J. A. Wolverson, Queen's College, Birmingham.

Passed in Elementary Physiology only: A. E. Gladstone, Cambridge University and St. Thomas's Hospital.

Passed in Elementary Anatomy only: E. A. Charlesworth, Middlesex Hospital; W. Marsden, Yorkshire College, Leeds; A. Price, University College, Liverpool; E. S. Shave, Middlesex Hospital; and W. N. Spencer, University College, Bristol.

SOCIETY OF APOTHECARIES OF LONDON.

Pass List, August, 1894. The following candidates passed in

Surgery.—G. Alcock, St. Thomas's Hospital; W. E. Bremner, King's College; P. M. Smith, St. Mary's Hospital; F. A. Storr, Leeds; A. H. Trevor, Guy's Hospital; S. S. Wallace, Guy's Hospital.

Medicine, Forensic Medicine, and Midwifery.—R. W. S. Christmas, Charing Cross Hospital; J. W. A. Cooper, King's College; J. Mace, Leeds; W. Manbergh, Manchester; R. Marshall, Manchester; T. E. Rice, King's College; P. M. Smith, St. Mary's Hospital; H. L. Thurnell, St. Thomas's Hospital.

Medicine and Forensic Medicine.—A. M. Thornett, Royal Free Hospital.

Medicine and Midwifery.—E. D. Macnamara, Westminster Hospital.

Forensic Medicine and Midwifery.—W. S. Routledge, University College.

Forensic Medicine.—F. E. A. Webb, St. Bartholomew's Hospital.

Midwifery.—R. G. Jones, London Hospital; R. Keatinge, London Hospital; G. Lowsley, St. Bartholomew's Hospital; F. C. Sutherland, St. Bartholomew's Hospital.

To Messrs. Alcock, Cooper, Mansergh, Marshall, Rice, Smith, Storr, Sutherland, Thurnell, and Webb, were granted the diploma of the Society.

A: the recent examination for the prizes in Materia Medica and Phar-

maceutical Chemistry, the successful candidates were: H. J. Compton, Owens College, Manchester, gold medal; R. P. Williams, King's College, London, silver medal and book.

MEDICO-PARLIAMENTARY.

HOUSE OF COMMONS.

Mr. Hopwood and Vaccination.—MR. HOPWOOD asked the Parliamentary Secretary to the Local Government Board whether he was aware that William Windridge, who died of small-pox in the City Hospital, Coventry, on June 22nd last, and was certified by the medical officer, Dr. Henton, to have died unvaccinated, was described by the doctor to be an antivaccinationist, who refused the protection afforded by vaccination, and died a martyr to his prejudices; whether the Department had since received a statement signed by the mother, widow, and brother of the deceased, that he had been vaccinated and was an advocate of vaccination; and whether the Department would inquire into the matter with a view of preventing the above from appearing in the Registrar-General's statistics as an unvaccinated case.—SIR W. FOSTER replied that the statements in the first two paragraphs were substantially accurate. Inquiry had been made of Dr. Henton, and he stated that Windridge on more than one occasion stated to him that he did not think he had been vaccinated. He stated further, that he failed to discover the slightest mark or cicatrix or other evidence left by the operation. Windridge had not only refused to be vaccinated, but made statements to Dr. Henton with regard to vaccination, which satisfied him that he was opposed to it. Dr. Henton subsequently made inquiry, and could not obtain any satisfactory information as to his having been vaccinated. In face of these contradictory statements he could not say that; if his hon. friend would obtain information for him as to the date and place of the vaccination, he would make further inquiry.

Medical Examination of Military Candidates.—MR. BARTLEY asked the Secretary of State for War whether he would arrange that candidates for commissions in the Army might, if they wished, by paying a special fee to cover the cost, be officially examined as to their fitness before undergoing the competition. Mr. Woodall, in reply, said that a very full statement of the physical conditions required of candidates for the Army had been prepared, and might be obtained by candidates on application to the War Office. With that statement before him, any qualified surgeon would be able to inform candidates whether they were likely to pass the medical examination. It was therefore unnecessary, even if it were practicable, to authorise any official medical examination of candidates before the examination which followed successful competitions for commissions.

Chelsea Hospital for Women.—MR. STUART asked the Secretary of State for the Home Department whether his attention had been called to recent allegations respecting the conduct of the medical staff of the Chelsea Hospital for Women; whether it was the case that the whole staff resigned; whether, notwithstanding the report of a committee presided over by Lord Cadogan, all except two of the staff had been re-elected; and whether he had any power to order an inquiry into the whole proceedings; and, if so, whether he would order such an inquiry. —MR. G. RUSSELL said: The Secretary of State has seen the allegations to which my hon. friend refers, and is fully alive to the gravity of them. I am bound, however, to tell my hon. friend that the Home Office have some private reason for believing that the allegations made in the newspapers are not correct. If my hon. friend will communicate with me privately, I will tell him what I know of the matter. In the meantime I have to announce that the Secretary of State has no power to order an inquiry, as suggested in the question.

PUBLIC HEALTH AND POOR-LAW MEDICAL SERVICES.

FACTS ABOUT VACCINATION.

WE have had brought to our notice a correspondence which has passed recently in the columns of the *Bradford Observer* between Dr. R. G. Alexander and Mr. J. Walshaw for and against vaccination respectively. Dr. Alexander is anxious that the residents in Bradford should profit by the recent epidemic of small-pox there, and seek, so far as they still need it, the protection of primary vaccination or revaccination. Many points of interest have arisen, in the correspondence in which A. Appleton has also joined. The Town Council have not long since tried to secure the better carrying out of the law of vaccination in the borough, and, indeed, took the law into their own hands in the last prevalence of small-pox. We would like to point out to those antivaccinators in Bradford who side with Mr. Walshaw's views that in the epidemic of 1893, the rate of mortality in the unvaccinated was more than five times that of the vaccinated, and that in the first fifteen years of life the latter class suffered no fatality, whilst over 27 per cent. of the unprotected sufferers died from small-pox; in other words, vaccination saved 14 children among vaccinated patients from death by a horrible disease, whilst its non-use led to the sacrifice of 35 infants and young people. Small-pox in relation to sanitation is once again brought forward; may we, therefore, draw attention to the latest instance of a large town invaded by small-pox for which data are available? Dr. Barry's data showed that in Sheffield small-pox had risen in its death-rate among people over childhood, the remarkable fall in its all-age mortality having been entirely due to an enormous decline in its mortality in children. This fall on the period 0-10 years is shown by no other disease in Sheffield.

So much for the theory of sanitation in relation to decline of small-pox. Or, if we like to look at the matter in a wider sense, we find the Registrar-General in his report for 1880 showing a fall in the small-pox

mortality of 80 per cent. in children under 5 years of age, and only 6 per cent. as regards other diseases, the respective rates in persons aged 45 years and upwards being actually a rise of 161 in the case of small-pox, and a fall of 3 in other diseases. As showing the readiness of the antivaccinator to catch at straws, we find Dr. Alexander saying that he had failed to find record in his experience of the death of a person within fifteen years after primary vaccination efficiently performed. Mr. Walshaw is content to read the assertion as having reference to primary vaccination of whatever sort. But, unfortunately, there is vaccination and vaccination, and it is the sixpenny doctor with his one mark of poor quality and his sometime fraudulent obedience to the letter of the law that brings discredit on vaccination. We would it were possible with due regard to the dictates of humanity to place in a small-pox hospital in actual occupation three sets of, say, 100 men each—namely, the efficiently vaccinated and revaccinated, the typical one-mark class, and the totally unvaccinated. The experiment would, we do not doubt, settle the vaccination question much more quickly and forcibly than any amount of statistical matter or any number of Royal Commissions.

We venture to assert that it is not the antivaccinationist who is putting the law at defiance by the exposition of his views so much as the ease with which only too many ignorant people can be brought to listen to any story which will save them the trouble of compliance with the law, even though it cost them nothing to obey. The pity is that disobedience costs them nothing, or next door to it, either. The need for the enforcement of the law is not so much the measure of the resistance manifested towards it as the natural apathy of the classes which has to be overcome when any little trouble is entailed, such as having to nurse a baby with a sore arm. England suffers too much from unenforced laws, of which that relating to vaccination is a specimen. The law enacts so and so, but the people seem to break it with impunity in too many places. Our excellent system seems to be in danger of a complete breakdown while the Royal Commission are considering their report now so long overdue. What we want is a strict carrying out of the law in all parts of the kingdom, with penal clauses such as will demand compliance. If the State will not do this, well let us strike the law of compulsion off our Statute book. Small-pox is doubtless the best enforcer of the law. There is no such thing as an antivaccinationist when this disease is next door. Antivaccinationism cannot stand the strain of danger from that malady. When vaccination becomes a matter for the State appointed servant, and revaccination is also rendered compulsory, we shall see less of these unseemly rushes to the public vaccination station of antivaccinators and imperfectly protected so-called "vaccinated" persons in a time of small-pox prevalence. The recent epidemic in St. John's Wood has witnessed the vaccination or revaccination of over 1,500 persons. Will it for one moment be held that none of those people were antivaccinators? No, antivaccination is tenable only in the absence of small-pox. Meanwhile the cry of the believer in vaccination (desirous of seeing his fellows secure the protection which he has himself obtained) goes up. How long, how long? Is England, so far the leader in matters sanitary, to be allowed to remain behind in a subject so vitally important as the stamping out of small-pox? Sanitary progress has failed to stamp out the malady; vaccination and revaccination are known to protect from death when performed in the best fashion. Why not go on with these prophylactics in the way best adapted to do the needed good? The medical profession, trusted with the cure of a thousand and one diseases, are not trusted, as regards small-pox, by a certain portion of the community when they would rather prevent than cure it. Why? Ah, there is the rub. Even when it does not pay, antivaccinationism is for the moment an easy method of leaving undone the paramount duty of every parent to protect his child from disease. The antivaccinator will tell the apathetic parent that he does so in refusing to have his child vaccinated. But false statements do not alter the unalterable.

VACCINATION BY A NURSE.

THE Irish Local Government Board have just given their decision as a result of an inquiry held by their inspector in Derry Union. It appeared that a district nurse had been in the habit of vaccinating children, with the sanction of the medical officer, Dr. Morrison, who returned the cases as done by himself. The results were not all satisfactory, and, the matter having been reported, an inquiry was ordered. Dr. Morrison meanwhile resigned, stating at the same time that he had only continued a usage which he found in existence at the time of his appointment. The Board state their strong disapproval of the practice, and intimate that Dr. Morrison has properly resigned his position. The board of guardians and the committee have declared that the feeling of the people is that Dr. Morrison should be re-elected as he is very popular, but it is not known whether the Local Government Board will sanction this course.

ZYMOTIC MORTALITY IN LONDON.

THE accompanying diagram shows the prevalence of the principal zymotic diseases in London during each week of the second quarter of the current year. The fluctuations of each disease during the period under review, and its fatal prevalence as compared with that recorded in the corresponding weeks of recent years, can thus be readily seen.

Small-Pox.—The deaths referred to small-pox, which had declined from 100 to 11 in the preceding four quarters, rose again to 37 during the three months under notice, the average number in the corresponding periods of the preceding ten years, 1884-93, being 90. Of these 37 deaths, 8 belonged to Poplar, 4 to St. Pancras, 3 to Bethnal Green, 3 to Mile End Old Town, and 2 each to Islington, Newington, and Camberwell sanitary areas. The number of small-pox patients under treatment in the Metropolitan Asylums Hospitals, which had been 71, 82, and 56 at the end of the preceding three quarters, had risen again to 123 at the end of June last; 559 new cases were admitted during last quarter, against 377, 289, and 169 in the preceding three quarters.

Measles.—The fatal cases of measles, which had been 459, 446, and 788 in the preceding three quarters, further increased to 1,745 during the three months ending June last, and were almost double the corrected average number. Among the various sanitary areas of the metropolis

career than is usually the lot of the medical practitioner. He was born at Barnstaple in 1814, being the younger son of an old Devonshire family. He studied medicine at University College, London, where he was contemporary with Viner Ellis—the author of the *Guide* so familiar to generations of dissectors—Erichsen, Morton, and others, who subsequently rose to fame. Afterwards he studied in Paris. In 1836 he passed the “College and Hall,” and having a taste for travel he obtained an appointment as colonial surgeon to the New Zealand Company. After two years’ residence at Taranaki, Mr. Weekes resigned his appointment, returned to England, and married. Being convinced, however, that New Zealand had a great future before it, he again emigrated and bought property near Auckland, including an island in the Manallan, which is still known as Weekes’s Island. In 1848, on the announcement that gold had been found in California, Mr. Weekes betook himself thither. He settled at Los Angeles, where he soon had an extensive surgical practice. A large part of his work consisted in the treatment of arrow wounds inflicted on miners by hostile Indians. Mr. Weekes often had to make long journeys to patients, carrying a loaded revolver at full cock in his hand. After spending some five years in California, Mr. Weekes returned to New Zealand, where he practised his profession for ten years. During that time he held the appointment of senior surgeon to the Auckland militia, in which capacity he saw active service during the Maori war of 1863-65. He was also made a Justice of the Peace, and was an energetic member of the local bench during the remainder of his stay in New Zealand. In 1868 gold was found abundantly at Thames River, New Zealand, and a rush at once took place to that locality. Mr. Weekes followed the crowd, and was at once appointed Senior Surgeon to the Thames Hospital. In 1871 he returned to England, became a Fellow of the College of Surgeons, and settled in practice at Southampton. After a few years, for reasons of health, he removed to Melksham in Wiltshire, where he held the appointment of medical officer of health. The English winter was, however, too much for him, and two years later he settled at Barcelona in Spain, where he practised among the English colony. In 1889 he retired from professional work, and came back to his native place, Barnstaple, where he died, after a lingering illness, on July 20th, aged 79. Mr. Weekes was not only a skilful surgeon, but an accomplished musician and an excellent draughtsman. He was the author of *Sanitary Reports, New Zealand*, and of *A Catechism of Health*. He also contributed several articles to the medical journals, chiefly on subjects connected with climatology.

DR. HERBERT GOUDE, Resident Surgeon, Small-Pox Hospital, Highgate, who was recently found dead in his bed, was born in 1846, being the eldest son of Mr. J. F. Goude, a member of the medical profession. He was educated at the City of London School, and apprenticed to his father. He passed the Arts Examination, Society of Apothecaries, in 1865, and joined the Medical School of St. Bartholomew’s Hospital; he became M.R.C.S. in 1870. He held the office of house-surgeon under Mr. Paget, then that of resident midwifery assistant; afterwards he became house-surgeon of the St. Mark’s Hospital, City Road, and the Lock Hospital, Dean Street, Soho. He then travelled for five years and a-half over Europe, and on his return was appointed registrar of the Orthopædic Hospital, Oxford, and was appointed resident surgeon of the Small-Pox Hospital, Highgate, in 1880. Dr. Goude was a frequent contributor to our columns, and for a time a member of our editorial staff.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently passed away are Dr. Juan Maria Rodriguez, Professor of Midwifery in the University of Mexico; Dr. O. Th. Sandahl, Professor of Pharmacology in the University of Stockholm; and Dr. Mazard, some time Professor of Clinical Medicine in the Medical School of Limoges.

It is announced that a laboratory for the manufacture of tuberculin, mallein, anthrax, vaccine, etc., will shortly be established in Rome in connection with the laboratories of Hygiene of the Ministry of the Interior.

MEDICAL NEWS.

FRENCHWOMEN AND THE MEDICAL PROFESSION.—According to the *Progrès Médical*, the medical profession does not seem to have much attraction for Frenchwomen. Of 165 female students registered in the Paris Medical Faculty at the beginning of the present academic year, only 16 were French. On the other hand, of a total of 164 female students in the Faculty of Letters, 141 were French. There were 7 French female students in the Faculty of Science, and 3 in that of Law.

THE NEXT INTERNATIONAL MEDICAL CONGRESS.—Dr. Idelson has suggested to the Committee charged with the arrangements for the next International Medical Congress, which is to be held at Moscow in 1896, the advisability of organising a group of “volunteer guides,” consisting of young medical practitioners and students having a good knowledge of foreign languages, whose duty it should be to interpret for the foreign members, and generally look after the comfort of visitors.

AMERICAN JOTTINGS.—The Legislature of Louisiana has amended the Charter of all Colleges of Medicine and Pharmacy so as to permit them to admit women to degrees. Of the 18,910 students of medicine in the United States, 16,759 attend regular medical colleges, 1,410 homœopathic, and 741 “eclectic” and other aberrant schools of medicine. —The Memphis Board of Health has sent a communication to the Tennessee State Board of Health, calling for such action as will lead to legislation prohibiting the insurance of the lives of infants and children within the State, on the ground that the practice leads to criminal negligence of children, and is to that extent prejudicial to public health.

INTERNATIONAL CONGRESS OF APPLIED CHEMISTRY.—The International Congress of Applied Chemistry took place at Brussels and Antwerp from August 4th to the 11th. More than 400 chemists, representing all civilised Governments and a large number of scientific societies throughout the world, took part in the proceedings. Important resolutions were passed as to the unification of methods of analysis and the prevention of adulteration of food. The Congress also adopted the French litre in preference to the German (Mohr’s litre) as the standard for gauging purposes and for the graduation of chemical instruments. The Centigrade thermometer was adopted to the exclusion of those of Reaumur and Fahrenheit. It was decided that the next meeting of the Congress should be held in Paris in 1896.

THE SANITARY INSTITUTE.—The arrangements have now been perfected for the 14th Congress and Exhibition of the Sanitary Institute, to be held in Liverpool near the end of next month. On Monday, September 24th, the Lord Mayor of Liverpool will receive members at the Town Hall. Afterwards there will be a public luncheon at the Adelphi Hotel, and at 3 P.M. the President (Sir F. S. Powell, M.P.) will deliver the inaugural address in the large theatre of University College; while in the evening the Lord Mayor will formally open the exhibition in the Volunteer Drill Hall, Upper Warwick Street. Next day there will be conferences in University College on a variety of subjects. In the conference on “Domestic Hygiene” the Lady Mayoress will preside, and the ladies will afterwards hold a reception. At night Dr. George Blundell Longstaff, of the London County Council, lectures at University College. On Wednesday, Section 1, “Sanitary Science and Preventive Medicine” meet under the presidency of Dr. Klein, in the College, and the discussion will be continued next day. The Lord Mayor gives a reception in the Walker Art Gallery on Wednesday evening, Section 2, “Engineering and Architecture,” meets on Thursday, and the discussions will be continued on the following day; when also Section 3, “Chemistry, Meteorology, and Geology” meet under the presidency of Dr. T. Stevenson, scientific analyst to the Home Office. The closing general meeting of the Congress takes place in the College on Friday evening, and later Sir James Crichton Browne, M.D., will address the working classes in the Picton Lecture Hall. The exhibition will remain open three weeks.

ULSTER MEDICAL SOCIETY: ANNUAL MEETING.—The annual meeting of the Ulster Medical Society was held on July 20th. The report of the council showed that the operations of the society had been well maintained throughout the year. Twenty new members had joined the society. New rooms (situated in a central part of the city) sufficiently large to accommodate the society, both for meetings and for reading rooms and library, have been secured and handsomely fitted up. The following gentlemen were elected office bearers for the ensuing year:—*President*: Brigade-Surgeon F. E. McFarland, A.M.D. *Vice-Presidents*: Dr. O'Malley and Professor Symington. *Council*: Dr. Lindsay, Dr. Calwell, Dr. McDonnell, Dr. Bingham, Dr. Dempsey, Dr. Ferguson. *Treasurer*: Dr. Kevin. *Pathological Secretaries*: Dr. Campbell and Dr. McQuitty. *Librarian*: Dr. Shaw. *Secretary*: Dr. McKisach.

MEDICAL VACANCIES.

The following vacancies are announced:

ABERDEEN CITY HOSPITAL.—Resident Physician at the City (Infectious Diseases) Hospital. Salary, £50 per annum, with board and lodgings at the Hospital. Applications to W. Gordon, Town Clerk, Town House, Aberdeen, by August 27th.

ABERDEEN ROYAL INFIRMARY.—Ophthalmic Surgeon. Applications by August 31st.

BRISTOL HOSPITAL FOR SICK CHILDREN AND WOMEN.—House-Surgeon. Salary, £100 per annum, with rooms and attendance. Applications and testimonials, endorsed "House-Surgeon," to H. Lawford Jones, Secretary, before August 31st.

BURGH OF LEITH.—Medical Officer of Health. Salary to commence at £350. Applications and testimonials to T. B. Laing, Town Clerk's Office, Leith, by September 1st.

CAMBRIDGE UNIVERSITY.—John Lucas Walker Studentship. Applications to Professor Roy, New Museums, Cambridge, by September 30th.

COUNTY ASYLUM, Prestwich, Manchester.—Pathologist. Salary, £200 per annum, with board, residence, and washing. Applications and testimonials to the Superintendent.

CUMBERLAND INFIRMARY, Carlisle.—House-Surgeon. Salary, £70 per annum, with board, lodging, and washing. Applications and testimonials to the Secretary before August 29th.

DERBY BOROUGH ASYLUM.—Assistant Medical Officer. Salary, £100. Applications to Dr. Macphail, Rowditch, Derby.

DUNDALK UNION, Dromiskin Dispensary.—Medical Officer. Salary, £75 per annum, with £10 yearly as Medical Officer of Health, together with registration and vaccination fees. Applications accompanied by diplomas and copies of testimonials to Mr. P. Byrne, Honorary Secretary, Milltown Castle. Election on September 1st.

GENERAL HOSPITAL, Birmingham.—Assistant-Surgeon. Appointment for three years, with eligibility for re-election. Honorarium, £100 per annum. Applications to Howard J. Collins, House-Governor, by September 1st.

GENERAL HOSPITAL, Nottingham.—Senior Resident Medical Officer doubly qualified. Salary, £120 for the first year, with an addition of £10 a year up to £150, with board, residence, and washing. Applications to the Secretary by September 1st.

GRAVESEND HOSPITAL.—House-Surgeon. Doubly qualified and registered. Salary £80 per annum, with board and residence. Applications and testimonials to Frederick Mitchell, Honorary Secretary, by September 1st.

LAMBETH WORKHOUSE.—Assistant Medical Officer and Dispenser. Salary, £100 per annum, with board, apartments, and washing. Applications and testimonials to W. B. Wilmot, Clerk, Guardians' Board Room and Offices, Brook Street, Kennington Road, S.E., by August 28th.

MEMORIAL HOSPITAL, Jarrow-on-Tyne.—House-Surgeon, age not under 25, and to reside and board free in the hospital. To come under a three years' engagement at a progressive salary of £130, £150, and £170 respectively. Applications and testimonials to J. Campbell, Secretary, by September 4th.

METROPOLITAN HOSPITAL, Kingsland Road, N.E.—Assistant Physician. Must be Fellows or Members of the R.C.P.Lond., and graduates in medicine of a University recognised by the General Medical Council. Applications and testimonials to Charles H. Byers, Secretary, by September 3rd.

MILLER HOSPITAL AND ROYAL KENT DISPENSARY, Greenwich Road, S.E.—Junior Resident Medical Officer, qualified. Salary, £30 per annum, with board, attendance, and washing; tenable for six months, with prospect of re-election as Senior. Salary, £80 per annum. Applications and testimonials to Major-General G. R. Roberts, Honorary Secretary, by August 31st.

NORTH WALES ASYLUM, Denbigh.—Second Assistant Medical Officer. Salary £100 per annum, with board, washing, and apartments. Applications to W. Bark, Clerk to the Visitors, by September 12th.

NORTH DISPENSARY, Liverpool.—Head Surgeon. Salary, £200 per annum, with apartments, board, and attendance. Applications and testimonials to R. R. Greene, Secretary, Leith Offices, Moorfields, Liverpool, by August 27th.

PARISH OF LOCHGOILHEAD AND KELMORLCH.—Medical Officer to attend the poor of the parish. Salary, £80 per annum; in addition, £40 per annum (exclusive of practice) will be guaranteed by the residents. Applications to the Chairman of Parochial Board, Inverary, Douglas Pier, Lochgoil, by August 24th.

ROYAL SURREY COUNTY HOSPITAL, Guildford.—Assistant House-Surgeon. No salary, but board, residence and laundry found. Applications and testimonials to the Honorary Secretary, by September 17th.

ROYAL ORTHOPÆDIC HOSPITAL, 297, Oxford Street.—Resident House-Surgeon. Candidates must be M.R.C.S.Eng. and L.R.C.P., unmarried. Salary, £100 per annum, with residence and partial board. Applications and testimonials to the Secretary by August 28th.

RUBERY HILL ASYLUM, Bromsgrove, Worcestershire.—Clinical Assistant. Applications to the Medical Superintendent.

SHEFFIELD UNION.—Resident Assistant Medical Officer for the Workhouse at Fir Vale, Pitsmoor. Salary, £100 per annum, with apartments, rations, etc. Applications and testimonials before September 5th, to J. Spencer, Clerk to the Guardians.

ST. BARTHOLOMEW'S HOSPITAL.—Ophthalmic Surgeon, must be F.R.C.S.Eng. Applications and testimonials to W. Cross, Clerk, by September 10th.

ST. LUKE'S HOSPITAL, E.C.—Clinical Assistant, must be qualified. Appointment for six months, with board and residence. Applications to Percy De Bathe, M.A., Secretary.

ST. PETER'S HOSPITAL, Henrietta Street, Covent Garden, W.C.—House-Surgeon for six months. Salary at the rate of 50 guineas a year, with board, lodging, and washing, and an allowance for wine, etc. Applications and testimonials to Irwin H. Beattie, Secretary, before September 1st.

STOCKPORT UNION.—District Medical Officer and Public Vaccinator for the Cheadle (No. 3) District. Must be fully qualified in Medicine and Surgery. Salary, £40 per annum, with usual fees. Applications and testimonials endorsed "Medical Officer, etc., Cheadle District," before August 27th.

SOUTH DISPENSARY, Liverpool.—Head Surgeon. Salary, £200 per annum, with apartments, board, and attendance. Applications and testimonials to R. K. Greene, Secretary, Leith Offices, Moorfields, Liverpool, by August 27th.

SOUTH DISPENSARY, Liverpool.—Assistant Surgeon. Salary, £80 the first year, and £90 per annum afterwards, with apartments, board, and attendance. Applications and testimonials to R. K. Greene, Secretary, Leith Offices, Moorfields, Liverpool, by August 27th.

STAFFORDSHIRE COUNTY ASYLUM, Stafford.—Medical Officer to act as *Locum Tenens* for two or three months. Salary, 2 guineas per week, with board, etc. Applications to the Medical Superintendent.

MEDICAL APPOINTMENTS.

EARDLEY-WILMOT, C. M.D., appointed Senior Assistant Medical Officer to the Middlesex County Asylum, Tooting, *vice* F. H. Ward, resigned.

GRENFELL, H. O., M.R.C.S.E., L.R.C.P.L., appointed Admiralty Surgeon and Agent to Mothecombe, Kingston, and Challaboro; also Certifying Factory Surgeon for Modbury District.

LEWIS, C. E. M., M.B., C.B.Cantab., appointed House-Surgeon to the West Norfolk and Lynn Hospital, King's Lynn.

LESLIE, Richard W., M.D. M.Ch.R.U.I., appointed Medical Officer to the Campbell College, Belfast.

MAYNARD, John S., M.B., C.M.Édin., appointed House-Surgeon to the Brighton, Hove, and Preston College Hospital and Dispensary.

MOLYNEUX, J. P., M.R.C.S.Eng., L.R.C.P.Lond., appointed Police Surgeon for the Haydock, Golborne, and Ashton-in-Makerfield District.

PHILLIPS, Percy C., M.R.C.S., L.R.C.P., appointed Resident Medical Officer to the East London Hospital for Children, Shadwell, *vice* E. E. Ware, M.D., resigned.

ROLLESTON, L. W., M.B., appointed Junior Assistant Medical Officer to the Middlesex County Asylum, Tooting, *vice* C. Eardley-Wilmot, promoted.

SHEPPARD, A. M., M.B., Ch.M.Syd., appointed House-Surgeon to the Central London Ophthalmic Hospital, Gray's Inn Road.

TIMS, H. W. Marett, M.B., M.Ch.Édin., appointed Demonstrator of Anatomy at the Westminster Hospital Medical School, *vice* P. de Santi, F.R.C.S.Eng., resigned.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 3s. 6d., which sum should be forwarded in post-office order or stamps with the notice not later than Wednesday morning, in order to insure insertion in the current issue.

BIRTHS.

NEALE.—On August 15th, at 24, Hamilton Terrace, Milford Haven, the wife of Albert E. Neale, M.B., B.S., of a son.

MACLEOD.—On August 20th, at Tower Place, Shrewsbury, the wife of Harold H. B. MacLeod, M.R.C.S., of a son.

MARRIAGES.

ALLDEN-COX.—At Holy Trinity Church, Wimbledon, on the 22nd inst., by the Rev. C. P. Clarke, vicar, Sidney J. Alden, M.D., of Bridport, to Annie, eldest daughter of John Cox, Esq., of Wimbledon, formerly of Luccombe, Dorset.

HIGHET-HINSHELWOOD.—At East Grey Friars Church, Stirling, on the 16th inst., by the Rev. James P. Lang, assisted by the Rev. J. T. Graham, Robert Campbell Highet, M.B., C.M., second son of the late Campbell Highet, Ayr, to Jessie (Jetta), youngest daughter of the late John Hinshelwood, of Ibrox, Govan. At home, 16, Abercromby Place, Stirling, September 12th and 14th.