

malarial disease, on the withdrawal of the blood from the blood vessels develop into flagellated bodies are to be regarded as analogous to the crescentic bodies, and on the same grounds as bodies destined for the continuation of the species outside the human body. The flagellated organisms which proceed from them have, therefore, a similar destiny to those which proceed from the crescentic bodies.

As the malaria organism has not been found in the physiological or in pathological discharges or excretions from the human body, and as hæmorrhage is a very rare occurrence in malarial infection, it may be concluded that those forms of the parasite which have been shown to be destined for the continuation of the species outside the human body do not leave the human body in any of these ways or in such media. The crescentic body, and the analogous intracorporeal flagellated-organism-producing form, so long as they remain in the blood vessels are perfectly passive, enclosed in blood corpuscles, and manifestly incapable of spontaneously bringing about or actively conducing to their own escape from the body.

Therefore, seeing that neither the physiological arrangements of the human body, nor pathological processes, nor the inherent powers and organisation of the parasite itself provide for its escape from the human body, and seeing that such escape is necessary, some extraneous agency, such as is likely to be frequently, if not constantly, supplied in natural conditions, must come to the assistance of the parasite. What is this extraneous agent which assists the malaria organism to escape from the human body?

A similar problem presented itself to the writer many years ago in connection with the filaria of the blood—*filaria nocturna*. Like the malaria organism, the filaria is at one time of its existence parasitic and circulating in the blood. Like the malaria organism, the filaria, in order to complete its life-cycle and preserve the species, has to pass from one human being to another, and, in order to do this, has to leave the blood vessels. Like the malaria organism, the filaria is not extruded in the secretions, and pathological discharges containing it are not a normal or usual accompaniment of the parasitism. Like the malaria organism the filaria is incapable of quitting the vessels by its own efforts. As the malaria organism is enclosed in a blood corpuscle so the filaria is enclosed in a sheath—the former to escape the phagocytes, the latter to prevent its leaving the blood vessels. As the malaria organism on being removed artificially from the blood vessels commences, under certain conditions, to enter on its evolutionary cycle by first escaping from the enclosing blood corpuscle, so the filaria, under certain conditions, commences to enter on its cycle of development when it is removed artificially from the blood vessels by first escaping from its sheath.¹ In both parasites this first step in development can be brought about experimentally on the microscope slide, and in both parasites a lowering of temperature favours or is associated with the conditions which eventuate in successful experiment.

The parallel is very complete; the conditions, the requirements, and the problem to be solved are apparently identical for both parasites. As the problem and conditions are the same for both organisms, the solution of the problem may also be the same for both. If this be the case, the mosquito having been shown to be the agent by which the filaria is removed from the human blood vessels, this, or a similar suctorial insect must be the agent which removes from the human blood vessels those forms of the malaria organism which are destined to continue the existence of this organism outside the body. It must, therefore, be in this or in a similar suctorial insect or insects that the first stages of the extracorporeal life of the malaria organism are passed.

The two classes of movement indulged in by the flagella—the undulating and the vibrating—suggest that these bodies, on breaking away from the residual body or pigment-containing sphere, move in virtue of the locomotive faculty for some distance—say, traverse the blood contained in the insect's stomach—and then in virtue of the vibratory movement penetrate the cells of some organ of the insect. The malaria organism in the human body is an intracellular parasite like a gregarine or a coccidium, and it is probable

that outside the human body it retains this habit. It would be idle to attempt to follow the parasite further without the assistance of direct observations; so many possibilities are open to it once clear of the human body. It may, for all we know, comport itself like the pebrine corpuscle and continue in endless succession parasitic in the tissues and ova of the insect, then in the larva, and so again in the mature insect. This it is impossible to say. But the hypothesis I have ventured to formulate seems so well grounded that I for one, did circumstances permit, would approach its experimental demonstration with confidence. The necessary experiments cannot for obvious reasons be carried out in England, but I would commend my hypothesis to the attention of medical men in India and elsewhere, where malarial patients and suctorial insects abound.

MEMORANDA:

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

CASE OF CHLOROSIS TREATED BY RED MARROW TABLOIDS.

THE success in a case of progressive pernicious anæmia treated by Dr. Fraser¹ with red bone marrow (raw) encouraged me to employ the same substance in the shape of tabloids in allied disorders. I quote a case which will illustrate the results I have gained.

B. H., a young lady, aged 18 years, first came under treatment on July 10th, 1894, complaining of amenorrhœa, dyspnœa, palpitation, constipation, œdema of ankles and loss of flesh. I ordered her ℞ liq. ferri ℥x, liq. arsenicalis ℥ij, aq. ad ʒj, t. d. s., and an aloin compound tabloid every other morning.

By August 2nd, 1894, the above treatment had caused but little improvement. She was still suffering from severe cephalalgia, nausea, and faintness on rising in the morning; weakness, anorexia; pallor of face and lips was marked. She was still habitually constipated, highly nervous, and the menses never more than a "show." The pulse was small, quick and sometimes irregular. There was a venous hum over the great veins and a systolic bruit at base. The red cells numbered 2,800,000 per c.cm. The hæmoglobin was 40 per cent., many of the corpuscles were irregular in shape, not many blood plaques were seen. On August 30th, 1894, after taking four red marrow "tabloids" a day the subjective symptoms and abnormal cardiac bruit had almost disappeared, she looked brighter, appetite was fair, there was no œdema of ankles, the bowels were regular, the menses almost normal. The red corpuscles numbered 3,200,000 per c.cm., very few irregularly shaped hæmocytes were seen. The hæmoglobin was 70 per cent, and the blood plaques more numerous.

The above case justifies me in recommending these agents (tabloids) in the following conditions: anæmia; oligæmia from loss of blood (wounds, hæmorrhoids, hæmoptysis, hæmatemesis, etc.); anæmia following acute diseases (typhoid, etc.); tropical anæmia (parasitic or malarial); anæmia of toxic origin; leukæmia or lieno-leukæmia (acute or chronic); and progressive pernicious anæmia.

CHARLES FORBES, M.D., etc.,

London. late Surgeon, Wassa Gold Mines, West Africa, etc.

¹ BRITISH MEDICAL JOURNAL, June 2nd, 1894, p. 1172.

A MEETING of the South Western division of the Medico-Psychological Association will be held at Bailbrook House-Bath, on Thursday next, at 3 P.M. Papers will be read by Drs. Goodall and Bristowe, and Dr. Maury Deas will open a discussion on the Uses and Limitations of Mechanical Restraint as a means of Treatment.

THE MEDICAL FACULTY OF BORDEAUX.—The Medical Faculty of Bordeaux has received from the son of a former practitioner of the town, who had exercised his profession there for more than fifty years, a donation of 100,000 francs (£4,000) towards the establishment of a Chair of Gynæcology.

¹ BRITISH MEDICAL JOURNAL, April 15th, 1893.

of prescriptive and ordinary custom. The unethical position of the consultant referred to is accentuated by the avowal that on the third interview he recommended the patient on an inadmissible pretext to reconsult his old medical adviser.

PUBLIC HEALTH AND POOR-LAW MEDICAL SERVICES.

THE LOCAL GOVERNMENT BOARD AND THE EARLY DIAGNOSIS OF DIPHTHERIA.

We are informed by the Medical Officer that arrangements have been made in the Medical Department of the Local Government Board, which have for their object to assist medical officers of health in forming a correct diagnosis as to the character of certain forms of "sore throat," which are often associated with the beginnings of diphtheria prevalences. The plan to be adopted is practically that which was followed during the past two autumns with reference to the differentiation of cholera and diarrhoea.

As was the case in regard of cholera so it is understood that in the case of diphtheria the bacteriological investigations which will be made for the Local Government Board by Dr. Klein, F.R.S., are intended to secure the adoption, at an early date as practicable, of the necessary measures of prevention, and hence when once it has been ascertained that the disease in question is diphtheria no further material from other cases forming part of the same prevalence will be submitted to examination. The following are the conditions under which the material in question is to be transmitted:—

"The material to be transmitted is to be taken by scraping with a clean instrument from the surface of the tonsils or other suspicious-looking surface of the fauces. If membrane be present a small portion of it should also be included.

"The material should be at once placed in a small glass-stoppered bottle, previously washed out with clean water. No spirit or other fluid should be added. The bottle, which should then be properly secured and so packed, in cotton wool or otherwise, as to travel with safety by post, should be posted without delay to the Medical Officer of the Local Government Board, Whitehall, London, S.W.; and it should be accompanied by a history of the case, or of the outbreak of which its forms a part, signed by the medical officer of health for the district concerned."

HEALTH OF ENGLISH TOWNS.

In thirty-three of the largest English towns, including London, 6,357 births and 3,570 deaths were registered during the week ending Saturday, December 1st. The annual rate of mortality in these towns, which had increased from 16.9 to 17.3 per 1,000 in the preceding three weeks, further rose to 17.8 last week. The rates in the several towns ranged from 13.8 in Huddersfield 14.4 in Croydon, and 15.2 in Bristol to 23.5 in Gateshead, 23.7 in Oldham, and 25.1 in Swansea. In the thirty-two provincial towns the mean death-rate was 19.0 per 1,000, and exceeded by 2.9 the rate recorded in London, which was only 16.1 per 1,000. The zymotic death-rate in the thirty-three towns averaged 2.1 per 1,000; in London the rate was equal to 2.0, while it averaged 2.2 per 1,000 in the thirty-two provincial towns, and was highest in Burnley, Blackburn, and Gateshead. Measles caused a death-rate of 3.0 in Leeds, 3.2 in Burnley, and 5.6 in Gateshead; whooping-cough of 1.1 in Halifax and 2.2 in Swansea; and "fever" of 1.2 in Wolverhampton. The mortality from scarlet fever showed no marked excess in any of the large towns. The 19 deaths from diphtheria in the thirty-three towns included 54 in London, 12 in West Ham, 4 in Birmingham, 3 in Liverpool, and 3 in Blackburn. Three fatal cases of small-pox were registered in Birmingham, but not one in London or in any other of the thirty-three large towns. There were 31 small-pox patients under treatment in the Metropolitan Asylums Hospitals but not one in the Highgate Small-pox Hospital on Saturday last, December 1st, against 51, 42, and 33 at the end of the preceding three weeks; 6 new cases were admitted during the week, against 3 and 2 in the preceding two weeks. The number of scarlet fever patients in the Metropolitan Asylums Hospitals and in the London Fever Hospital, which had been 2,258, 2,254, and 2,198 at the end of the preceding three weeks, had further declined to 2,148 on Saturday last; 191 new cases were admitted during the week, against 215 and 223 in the preceding two weeks.

HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday last, December 1st, 915 births and 611 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had been 20.3 and 21.3 per 1,000 in the preceding two weeks, further rose to 21.4 last week, and was 3.5 per 1,000 above the mean rate during the same period in thirty-three of the largest English towns. Among these Scotch towns the death-rates ranged from 14.4 in Leith to 24.4 in Paisley. The zymotic death-rate in these towns averaged 3.2 per 1,000, the highest rates being recorded in Glasgow and Aberdeen. The 313 deaths registered in Glasgow included 17 from measles, 6 from diphtheria, 6 from scarlet fever, and 11 from whooping-cough. Eight fatal cases of small-pox and 4 of diphtheria were recorded in Edinburgh.

FEE FOR LUNACY CERTIFICATION ON MAGISTRATE'S ORDER.

G. C. writes to say that by order of a magistrate he, in conjunction with another medical man, visited a supposed lunatic with a view to certification for a lunatic asylum; that the patient was subsequently sent to a pauper asylum, and that when he charged the guardians £1 1s., they declined to pay the fee on the ground that it should be on the same scale as for a pauper lunatic, though the patient in question had an income of 11s. weekly in excess of the payment made by him for

maintenance in the asylum. G. C. asks for our opinion as to his claims.

. We are of opinion that "G. C." is fairly entitled to a fee of £1 1s. for his certificate in this case, and should advise him to apply to the magistrate who authorised him to examine the patient, to make an order for the guardians to pay it, which he (the magistrate) has full power to do under Clause 285, Sec. 1, of Lunacy Act, 1890. Should the magistrate refuse to make an order for payment, "G. C." can appeal to a Court of Quarter Sessions upon giving fourteen clear days' notice to the justice concerned under Clause 301, Sec. 1, of the same Act.

SCHOOL CERTIFICATES.

R. S. informs us that he has been in the habit of furnishing certificates of illness demanded by the School Board authorities, free of charge, when the parents were poor; but that, having seen the answer to "M.D." in the BRITISH MEDICAL JOURNAL of November 10th, page 1083, he told a recent applicant to ask the School Board officer if he would pay for the certificate. The mother was summoned and fined at Worship Street, the offence being, as "R. S." understands, the non-production of a medical certificate. He adds that the woman was told by the school officer that a certain local practitioner would give the certificate for threepence!

. The case, which does not by any means stand alone, is one of considerable hardship, but the remedy is not clear. It is at least doubtful whether the School Board have any power to pay for such certificates out of public funds, and, as false excuses are rife, the verbal assurance of the parents could scarcely be accepted as a sufficient proof of illness. On the other hand, the parents are often ill able to afford any fee for a medical certificate, and medical practitioners have already a sufficient load of compulsory charities without further additions being imposed upon them by public bodies. Nominally a medical certificate is not necessary, but nothing short of it is likely to be accepted as a defence when the parents are prosecuted or threatened with prosecution for not sending a sick child to school.

DISPENSARY AND PAROCHIAL MEDICAL ATTENDANCE.

J. N. d'E. writes: Ought a patient who is on a dispensary and being attended by her dispensary doctor at the same time as she is in the receipt of parish relief (10s. per week) be attended by the parish doctor or her dispensary doctor. If not by the parish doctor but by her dispensary doctor when and under what circumstances should she be attended by the former?

. It would appear as if the patient in question could claim the attendance of either the dispensary or parish doctor, and it would be best to let her decide which of the two she prefers. It would be unreasonable of her to expect the attendance of both.

VISITING M. O. TO INFECTIOUS DISEASE HOSPITALS.

J. G. asks upon what scale the remuneration of a visiting medical officer to an infectious disease hospital under a conjoint board should be arranged—whether so much a case or whether it should be in proportion to the length of time the patient remains in hospital?

. The financial arrangements vary greatly in different cases of the kind and it is difficult to suggest a basis without more knowledge of local conditions, such as the distance from home. Two guineas per patient or £100 a year as salary would perhaps be reasonable. A time tariff would not be advisable.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF CAMBRIDGE.

CLINICAL TEACHING.—The General Board of Studies recommend that the Vice-Chancellor be empowered to confer with the authorities of Addenbrooke's Hospital with a view to establishing closer relations between the hospital and the University teachers in the departments of Medicine, Surgery, and Therapeutics. The examples of Oxford, Dublin, Manchester, and the Scottish Universities are cited as precedents.

STATE MEDICINE.—The State Medicine Syndicate report that in April and October of the present year fifty-six candidates presented themselves for the examination in Sanitary Science. Of these thirty-two were successful, and received the diploma in Public Health. The number of candidates having somewhat decreased, it is possible that one examination in the year may be found in future to be sufficient.

APPOINTMENTS.—The following medical graduates have been appointed to hold University office from January 1st, 1895: Dr. A. Macalister, F.R.S., a member of the Fitzwilliam Museum Syndicate; Dr. A. Hill, Master of Downing, a member of the Lecture Rooms Syndicate; Dr. B. Annington and Dr. Joseph Griffiths, members of the State Medicine Syndicate; and Mr. G. E. Wherry, M.C., a member of the Special Board for Medicine.

SCOTTISH CONJOINT EXAMINATION IN PUBLIC HEALTH.

THE following candidate has been admitted by this Board a Diplomate in Public Health: R. Balfour Graham, F.R.C.S.Ed.

MEDICAL NEWS.

DR. RUSSELL REYNOLDS, Dr. Hermann Weber, Dr. Douglas Powell, and Dr. Cheadle, have been elected Consulting Physicians to the Royal National Hospital for Consumption, Ventnor.

THE annual dinner of the past and present students of Mason College, Queen's Faculty of Medicine, was held at the Grand Hotel, Birmingham, on November 29th, under the presidency of Mr. Gilbert Barling, professor of surgery.

THE members of the Oldham Medical Society recently presented Dr. Thomas Fawsitt with a piece of plate on the occasion of his recent marriage, as an evidence of the esteem in which he is held by his brother practitioners.

DONATIONS AND BEQUESTS.—The late Mrs. Mary Ann George, of Hove, Sussex, has, by her will, bequeathed £500 each to the Sussex County Hospital, and to the Brighton and Hove Dispensary.—A donation of £500 has been received from Mr. William Debenham, for the building fund of the Paddington Green Children's Hospital.

MR. LENNOX BROWNE commenced a course of four lectures on Diphtheria at the Central London Throat, Nose, and Ear Hospital on Tuesday, December 4th. Subsequent lectures will be given on December 18th, January 15th, and January 29th, at 4.30 P.M. Medical practitioners are invited to attend.

A LECTURE, one of the Richard Middlemore Post-Graduate Lectures, will be delivered at the Birmingham and Midland Counties Eye Hospital, on Thursday, December 13th, at 4.30 P.M., by Mr. Henry Eales, Surgeon to the hospital, On Ocular Affections Caused by Blows. Illustrative cases will be shown, and qualified members of the profession are invited to attend.

IDIOTCY AND EPILEPSY IN LIVONIA.—The newly founded Association for the care of Epileptics and Idiots in Livonia proposes soon to open asylums for the numerous idiots and epileptics in that province of the Russian Empire. The Baltic provinces have two such asylums, but Livonia, with more than 4,000 idiots and lunatics totally uncared for, has at present no institution in which they can be received.

A PASTEUR INSTITUTE AT ALGIERS.—Thanks to the energy of Dr. Trolard and to the liberality of the Governor-General of Algiers, an antirabic institute, which is to bear the name of M. Pasteur, was opened in Algiers on October 1st. On the very day of opening, a woman and a child who had been bitten by stray dogs were brought to the institute for treatment.

ANNUITANTS proverbially live long, but two instances which have recently occurred in Bristol are surely exceptional. In the one case legacies left to fifteen charities under the will of the late Mr. Ash, who died twenty-eight years ago, have only just fallen in. In the other two bequests of £600 each to the Bristol General Hospital and the Bristol Royal Infirmary by Mr. Thomas Davis, who died in 1854, have only become payable since the death of his wife last month.

THE annual dinner of the past and present students of the Dental Hospital of London, Leicester Square, was held on December 1st, under the chairmanship of Mr. S. J. Hutchinson, who, in proposing the toast of "The Past and Present Students," said that £14,000 out of the total sum of £40,000 required for the rebuilding of the hospital remained to be raised. He believed that the addition to the General Medical Council of a representative of the 1,400 qualified dentists in England would add to the usefulness of that body. The toast of "The Hospital and School" was proposed by Sir J. Crichton Browne, and that of "The Visitors" was acknowledged by Sir Dyce Duckworth.

THE Anglesey and Carnarvonshire Infirmary at Bangor was reopened on November 30th. The ceremony was performed by the wife of the Lord-Lieutenant of Anglesey, to whom a vote of thanks was proposed by Dr. Langford Jones, physician to the infirmary and Mayor of Bangor. The institution now has accommodation for twenty-eight patients, and has been reconstructed upon the most modern principles. The

expense of reconstruction has been defrayed out of a bequest received from Mrs. Symes. The total value of this bequest was over £11,000. It was announced that Miss Paynter, who had received her nursing training at the Liverpool Royal Infirmary, and who speaks the Welsh language, has been appointed lady superintendent.

QUININE AND COLONISATION.—The Conseil Général of Algiers has contributed £20 to the public subscription set on foot by M. Mézières, of the French Institute, for the erection of a statue of the late Dr. F. C. Maillot in the Market Place of Brie, his native town. Maillot did a memorable work by his advocacy of sulphate of quinine in large doses in malaria. Had it not been for him, it is believed that the paludal poison (which at Bône, for instance, used to cause a mortality of 1,100 in a strength of 5,500 men) would have driven the French out of Algeria. It is almost needless to add that Maillot's proposal was at first vehemently opposed, and his claim to recognition afterwards denied. For ten years (1840-50) he fought a bitter fight, but finally his persistency triumphed, and the sulphate of quinine came into general use. A suggestion has been made that the pension which was granted to Maillot, who was a military surgeon, should be continued to his widow.

CONSUMPTIVE HOMES FOR THE WEST OF SCOTLAND.—A sum of £13,265 has already been put into the hands of Mr. Quarrier, the founder of the Orphan Homes of Scotland, for the erection of homes for consumptives. The homes are at present in course of erection at Bridge of Weir, seventeen miles from Glasgow, in the immediate neighbourhood of the orphan homes. Mr. Quarrier's present expectation is to have accommodation in a series of houses for 200 consumptives, each occupying a separate room. At Bridge of Weir, where these houses are being built, there is already a small village in the form of the houses of the orphan homes, and a community of about 1,200, mainly children, belonging to it. In connection with the group of houses one is about to be built for the treatment of infectious diseases.

HARVEIAN SOCIETY OF LONDON.—The annual dinner of the Society took place at the Criterion Restaurant on November 22nd. The President, Mr. G. Eastes, was chairman, and was supported by Dr. F. W. Pavy, Mr. A. E. Durham, Mr. Jonathan Hutchinson, Dr. Ward Cousins, Mr. Charters Symonds, Mr. Francis Fowke, several past Presidents of the Society, and about seventy other members of the Society and their friends. During dinner the Royal Handbell Ringers, in Elizabethan costume, played a selection of music on their carillon of 131 bells. After dinner the toast of "The Queen" was proposed by the President. The toast of the evening, "Success to the Harveian Society," was proposed by Mr. A. E. Durham, who spoke of the venerable years to which the Society had now attained, the number of distinguished men who had filled its chief offices, and the excellent work it had done in the past and was still achieving. In his reply the President specially drew attention to the success of the Society amongst general practitioners in Paddington and Marylebone, and showed the great advantages its membership offered those gentlemen. Lastly he called upon the Treasurer (Mr. Cripps Lawrence) also to reply. Mr. Lawrence was able to announce, the first time for some years, that the Society was now free from debt and might shortly hope to add somewhat to its funded property. Mr. Howard Marsh proposed "The Sister Societies and the Guests," for which Dr. Pavy, President of the Pathological Society, and Dr. J. Ward Cousins, President of the Council of the British Medical Association, returned thanks. The next toast, "The President," was proposed by Dr. Stephen Mackenzie, and acknowledged by Mr. Eastes, who spoke of the excellent public spirit that animated the members of the profession and which assured the success of the Harveian and other medical societies. He ended by proposing "The Health of the Honorary Secretaries" (Dr. R. Boxall and Mr. Peyton Beale), who had greatly assisted him during his year of office, whilst to Dr. Boxall was largely due the success of the dinner. The honorary secretaries each acknowledged the toast. The pleasures of the evening were much enhanced by songs, excellently rendered by Messrs. J. Gawthrop and H. Pope, who were accompanied on the pianoforte by Mr. H. W. Richards.

MEDICAL VACANCIES.

The following vacancies are announced:

- 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 December 13th.
- BIRMINGHAM GENERAL DISPENSARY.**—Resident Surgeon. Salary, £150 per annum. Applications and testimonials to A. Forrest, Secretary, before December 12th.
- CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST,** Victoria Park, E.—House-Physician. Appointment for six months. Board, residence, and allowance for washing provided. Applications to the Secretary at the Office, 24, Finsbury Circus, E.C., by December 13th.
- GOVAN COMBINATION PAROCHIAL BOARD.**—Medical Officer for the Poorhouse, Hospital, and Asylum at Merryflatts, Govan. Salary, £300 per annum, with free house, coal, gas, and water. Applications marked "Medical Officer" to be addressed to the Chairman of House Committee, 7, Carlton Place, Glasgow, by December 14th.
- HOSPITAL FOR SICK CHILDREN,** Great Ormond Street, Bloomsbury.—House-Surgeon to Out-patients (non-resident). Appointment for six months, but holder will be eligible for a second term of office. Salary, 25 guineas. Applications to the Secretary, by December 11th.
- KENT AND CANTERBURY HOSPITAL.**—Assistant House-Surgeon; unmarried. Salary, £50 per annum, with board and lodging. Applications to the Secretary by December 29th.
- MANCHESTER ROYAL INFIRMARY.**—Resident Medical Officer for the Fever Hospital at Monsall; doubly qualified, not less than 25 years of age. Salary, £250 per annum, with board and residence. Applications to the Chairman of the Board by December 15th.
- NORTH-EASTERN HOSPITAL FOR CHILDREN,** Hackney Road, Shore-ditch, N.E.—House-Physician. Appointment for six months; at expiration of this term he will be required, if eligible, to serve as House-Surgeon for further period of six months. Salary as House-Physician at the rate of £60 per annum, and as House Surgeon at the rate of £80 per annum. Doubly qualified. Applications to the Secretary, at the City Offices, 27, Clement's Lane, Lombard Street, E.C., by December 18th.
- OWENS COLLEGE,** Manchester.—Junior Demonstrator in Anatomy. Annual stipend £100. Applications to the Registrar by December 10th.
- PADDINGTON 'GREEN CHILDREN'S HOSPITAL.**—Honorary Physician to Out-Patients. Applications to the Secretary by December 15th.
- ROYAL BERKS HOSPITAL,** Reading.—House-Physician, House-Surgeon, and Assistant Medical Officer. Salary, £80 per annum each for the first two appointments, with board and lodging. For the third appointment board and lodging will be provided, but no salary. Applications to the Secretary before December 11th.
- ROYAL EAR HOSPITAL,** Frith Street, Soho Square.—House-Surgeon (six months' appointment). Honorarium, 12 guineas. Applications to the Medical Board by December 15th.
- SALFORD UNION INFIRMARY,** Hope, near Eccles.—Assistant Medical Officer, doubly qualified. Salary, £130 per annum with furnished apartments in the Infirmary. Applications endorsed Assistant Medical Officer, to T. H. Bagshaw, Clerk to the Guardians, Union Offices, Eccles New Road, Salford, by December 11th.
- SHEFFIELD GENERAL INFIRMARY.**—Assistant House-Surgeon; doubly qualified. Salary, £80 per annum, with board, lodging, and washing. Appointment for three years. Applications to the Medical Staff of the Sheffield General Infirmary to the care of the Secretary by December 8th.
- SHEFFIELD UNION.**—Junior Assistant Resident Medical Officer to the Workhouse Infirmary, Fir Vale; doubly qualified. Appointment for six months. Salary at the rate of £25 per annum, with board, lodging, and washing. Applications to Joseph Spencer, Clerk to the Guardians, Union Offices, Sheffield, by December 11th.
- WEST LONDON HOSPITAL,** Hammersmith Road, W.—House-Physician and House-Surgeon; tenable for six months. board and lodging are provided. Applications and testimonials to R. J. Gilbert, Secretary Superintendent, before December 12th.
- WEST LONDON HOSPITAL,** Hammersmith Road, W.—Assistant Anaesthetist (Honorary and Non-Resident). Applications and testimonials to R. J. Gilbert, Secretary-Superintendent, before December 12th.
- WESTMINSTER GENERAL DISPENSARY,** 9, Gerrard Street, Soho, W.—Honorary Surgeon and Resident Medical Officer. Applications to the Secretary by December 20th, at 10 o'clock.
- WESTMINSTER HOSPITAL.**—Fourth Assistant Surgeon. Must be F.R.C.S. Eng. Candidates must transmit certificate of age, and attend the House Committee on January 1st.
- WOLVERHAMPTON EYE INFIRMARY.**—House-Surgeon. Salary, £80 per annum, with rooms, board, and washing. Applications to the Secretary by December 17th.

MEDICAL APPOINTMENTS.

- ADAMS,** Alfred, M.A., M.B., B.Ch.Oxon., M.R.C.S., L.R.C.P., appointed House-Physician to the Radcliffe Infirmary, Oxford.
- ARNOLD,** E. G. E., L.R.C.P., M.R.C.S., appointed Senior Obstetric House-Physician to St. Thomas's Hospital.
- BLACKER,** A. Barry, M.D., B.S.Durh., L.R.C.P., M.R.C.S., appointed Clinical Assistant in the Electrical Department at St. Thomas's Hospital.
- CUFF,** A. W., B.A., M.B., B.C.Cantab., L.R.C.P., M.R.C.S., appointed House-surgeon to St. Thomas's Hospital (extension).

- DICKSON,** H. A., L.R.C.P., M.R.C.S., appointed House-Surgeon to St. Thomas's Hospital (extension).
- DUDGEON,** Dr., appointed Medical Officer for the No. 8. (South Hackney) District of the Hackney Union, *vice* W. P. Bottomley, M.R.C.S.
- EDMUNDS,** Percy James, M.R.C.S., L.R.C.P., B.Sc.Lond., appointed District Medical Officer for St. James, and Public Vaccinator for St. James and St. Anne, under the Guardians of the Westminster Union, *vice* Corrie Jackson, F.R.C.S., L.R.C.P.Edin.
- FISHER,** J. H., M.B.Lond., F.R.C.S., appointed Senior Ophthalmic House-Surgeon to St. Thomas's Hospital.
- GENGÉ,** G. G., L.R.C.P., M.R.C.S., appointed Resident House-Physician to St. Thomas's Hospital.
- GRÜNBAUM,** A. S. F., M.A., M.B., B.C.Cantab., L.R.C.P., M.R.C.S., appointed Non-Resident House-Physician to St. Thomas's Hospital (extension).
- GRIFFITHS,** J., M.A.Camb., M.D.Edin., appointed Assistant Surgeon to the Addenbrooke's Hospital, Cambridge.
- HALLIWELL,** T. O., L.R.C.P., M.R.C.S., appointed Clinical Assistant to the Special Department for Diseases of the Throat at St. Thomas's Hospital.
- HARDING,** H. W., L.R.C.P., M.R.C.S., appointed Assistant House-Surgeon to St. Thomas's Hospital.
- HAWARD,** H. H., L.R.C.P., M.R.C.S., appointed Clinical Assistant to the Special Department for Diseases of the skin at St. Thomas's Hospital.
- HEAVEN,** J. C., L.R.C.P.Lond., M.R.C.S., reappointed Medical Officer of Health for the Keynsham Rural Sanitary District.
- JOYCE,** J. H., B.A., M.B., B.C., appointed House-Surgeon to the Kent and Canterbury Hospital, *vice* A. C. Elliman, M.R.C.S., etc., resigned.
- JOHNSON,** H. Oswin, M.R.C.S.Eng., L.R.C.P.Lond., appointed Medical Officer and Public Vaccinator to the Parkes District of New South Wales; also Surgeon to the Parkes District.
- KING,** A. F. W., L.R.C.P., M.R.C.S., appointed Clinical Assistant to the Special Department for Diseases of the Throat at St. Thomas's Hospital (extension).
- LAYER,** J. W., L.R.C.P., M.R.C.S., appointed Clinical Assistant in the Special Department for Diseases of the Skin at St. Thomas's Hospital (extension).
- LAYTON,** F. G., L.R.C.P., M.R.C.S., appointed Clinical Assistant in the Special Department for Diseases of the Ear at St. Thomas's Hospital.
- MERRY,** W. J. C., M.B., B.Ch.Oxon., appointed House-Surgeon to St. Thomas's Hospital (extension).
- MILES,** William Ernest, F.R.C.S.Eng., appointed House-Surgeon to the Radcliffe Infirmary, Oxford.
- MISKIN,** L. J., L.R.C.P., M.R.C.S., appointed House-Surgeon to St. Thomas's Hospital (extension).
- NICHOLSON,** T. G., B.Sc.Lond., L.R.C.P., M.R.C.S., appointed Non-Resident House-Physician to St. Thomas's Hospital (extension).
- PEGGE,** E. V., L.R.C.P.Lond., M.R.C.S., appointed Medical Officer for the Briton Ferry District of the Neath Union, *vice* Charles Pegge, M.R.C.S., resigned.
- PORTER,** W. E., M.D.Edin., D.P.H.Camb., appointed Public Vaccinator for the Wood Green District of the Edmonton Union.
- RUSSELL,** E. A., M.B.Lond., L.R.C.P., M.R.C.S., appointed Assistant House-Surgeon to St. Thomas's Hospital.
- SAUNDERS,** E. A., M.A., M.B., B.Ch.Oxon., L.R.C.P., M.R.C.S., appointed Resident House-Physician to St. Thomas's Hospital.
- STARK,** J. Nigel, M.B., F.F.P.S.G., appointed Assistant Obstetric Physician to the Glasgow Maternity Hospital.
- STEPHEN,** Cecil E., M.B., C.M.Edin., appointed Medical Officer of Health to the North Witchford Rural Sanitary District, *vice* E. B. Stephens, L.F.P.S.Glasg., resigned.
- TINLEY,** W. E. F., M.B., B.S.Durh., appointed Junior Obstetric House-Physician to St. Thomas's Hospital.
- TOOMBS,** G. H., L.R.C.P., M.R.C.S., appointed Junior Ophthalmic House-Surgeon to St. Thomas's Hospital.
- VINCENT,** H. B., M.R.C.S.Eng., appointed Medical Officer of Health to the Erpingham Rural Sanitary District, *vice* S. T. Taylor.
- WALLACE,** L. A. R., B.A., M.B.Oxon., L.R.C.P., M.R.C.S., appointed Clinical Assistant in the Special Department for Diseases of the Ear at St. Thomas's Hospital.
- WATTS,** Dr., appointed Medical Officer for the Ilchester District of the Yeovil Union, *vice* George Durrant, L.R.C.P., L.R.C.S.Edin.
- WEST,** Samuel, M.D., F.R.C.P.Edin., appointed Examiner in Medicine at the University of Oxford.
- WILSON,** John T., M.B., C.M.Aberd., appointed Medical Officer of Health to the Lanark County Council.

ERRATUM.—In announcing the appointment of Dr. W. A. Bond to the medical officership of St. Olave's District, Southwark, published last week, it was incorrectly stated that his predecessor, Dr. F. P. Wightwick, was deceased.

DIARY FOR NEXT WEEK.

MONDAY.

MEDICAL SOCIETY OF LONDON, 8.30 P.M.—Mr. Hurry Fenwick: On the Value of Exciting Cellulitis in certain Urinary Diseases. Mr. Spencer Watson: A case of Cystic Polypi of the Nose, with Specimens and Drawings.

TUESDAY.

THE CLINICAL MUSEUM, 211, Great Portland Street.—Open at 2, Lecture at 4.

ROYAL MEDICAL AND CHIRURGICAL SOCIETY, 8.30 P.M.—Dr. J. E. Squire: The Influence of Heredity in Phthisis.

WEDNESDAY.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, 5 P.M.—Mr. Oliver Pemberton, F.R.C.S.: The Bradshaw Lecture, On James Syme, Regius Professor of Surgery in the University of Edinburgh, 1833-1869, a Study of his Influence and Authority on the Art and Science of Surgery during that Period.

NATIONAL HOSPITAL FOR THE PARALYSED AND EPILEPTIC, Queen's Square, 3 P.M.—Lecture by Dr. Beevor.

HUNTERIAN SOCIETY, 8.30 P.M.—(Pathological Evening.) Dr. Arnold Chaplin: Thoracic Aneurysm. Mr. J. H. Targett: Primary Cancer of the Bladder. Mr. Tubby: Acute Arthritis in an Infant. Dr. Glover Lyon: Complete Fibrosis of Lung, with extensive Fibrosis in other organs. Dr. Hingston Fox: Cerebral Abscess. Dr. Fred J. Smith: Notes of a case of Typhoid Fever treated by the Continuum Bath.

LARYNGOLOGICAL SOCIETY OF LONDON, 20, Hanover Square, 5 P.M.—Cases, Specimens, etc., by Mr. A. A. Bowdler, Mr. H. T. Butlin, Mr. A. E. Durham, Mr. R. Lake, Dr. Felix Semon, Mr. Walter G. Spencer, Dr. Scanes Spicer, Mr. Charters J. Symonds, and Dr. W. McNeill Whistler.

POST-GRADUATE COURSE, WEST LONDON HOSPITAL, Hammersmith, W., 5 P.M.—Dr. Garrod: Chorea.

THURSDAY.

HARVEIAN SOCIETY OF LONDON, 8.30 P.M.—Mr. Herbert W. Page: Second Harveian Lecture on Some Disorders of Nervous Function due to Injury and Shock.

NORTH LONDON MEDICAL AND CHIRURGICAL SOCIETY, Great Northern Central Hospital, 9 P.M.—Dr. James Galloway: On the Bacteriological Diagnosis of Diphtheria; illustrated by Cultures and Lantern Slides.

SOUTH-WEST LONDON MEDICAL SOCIETY, Bolingbroke House, Wandsworth Common, 8.30 P.M.—The discussion on Mr. Dickinson's paper, Professional Remuneration, will be reopened by Mr. T. A. I. Howell.

BRITISH GYNÆCOLOGICAL SOCIETY, 8.30 P.M.—Specimens. Dr. Bantock: Hematosalpinx and Tubal Gestation contrasted.

OPHTHALMOLOGICAL SOCIETY OF THE UNITED KINGDOM, 8.30 P.M. Card Specimens at 8 P.M.—Mr. Lang: A case of Cataract with Crystals in the Lens, with Microscopical Specimens. Mr. H. Work Dodd: (1) A New Pince-nez; (2) a case of Congenital Perianopsia; (3) a case of Congenital Lens Opacity. Dr. Bronner: (1) Wire Eye Shield for use after Cataract Operations; (2) Banno's Writing Paper with Raised Lines for the use of the Blind. Mr. G. Lindsay Johnson: (1) Removal of Lenses in a case of Myopia; (2) Symmetrical Markings in a case of Lamellar Cataract. Papers: Mr. George Lawson: Plastic Cellulitis of the Orbit. Mr. J. B. Lawford: A case of Hydatid Cyst in the Orbit; Removal. Mr. G. Hartridge: Osteoma of the Conjunctiva. Mr. C. D. Marshall: Notes on Hardening of Eyes in Formal with Specimens and Microscopical Sections. Dr. Adolf Bronner: Notes on a case of Papillary Conjunctivitis due to Prolonged Internal Use of Arsenic.

FRIDAY.

CLINICAL SOCIETY OF LONDON, 8.30 P.M.—Mr. Washbourn, Dr. E. W. Goodall, and Mr. Card: A series of eighty cases treated with Diphtheria Antitoxin. Dr. Kesteven: Some cases of Rapid Cure of Diphtheria by means of Antitoxin. Dr. E. W. Goodall: An unusual case of Tracheal Diphtheria.

EPIDEMIOLOGICAL SOCIETY OF LONDON, 11, Chandos Street, Cavendish Square, 8 P.M.—Dr. Klein, F.R.S.: The Relation of Bacteria to their Toxins.

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

BIRTHS.

BROADHURST.—On November 4th, at Woodwal, St. John's Wood Road, Bournemouth, the wife of C. Henson Broadhurst, L.R.C.P., M.R.C.S., L.S.A., of a daughter.

CARTER.—On November 27th, at The Poplars, Rastrick, Yorks, the wife of Wm. R. Carter, M.B., C.M., of a daughter.

HOOLEY.—At Buxmore, Cobham, Surrey, on December 2nd, the wife of Arthur Hooley, M.R.C.S., L.R.C.P.E., of a son.

POTTER.—On Tuesday, November 27th, at Cullompton, the wife of John Hope Potter, of a son.

MARRIAGES.

MARSHALL—MACKIE.—At Hyndland Church, Kelvinside, Glasgow, on November 27th, by the Rev. Henry Gray Graham, Surgeon-Captain D. G. Marshall, 17th Bengal Cavalry, to Elizabeth only daughter of the late N. M. Mackie, of Edinburgh.

ROGERS-TILLSTONE—MCCALL.—On November 30th, at Kelvinside, by the Rev. J. Frazer Graham, John M. Rogers Tillstone, M.R.C.S., L.R.C.P.Lond., of Ditton, near Maidstone, to Rosie, youngest daughter of the late Captain Alex. McCall, Chief Constable of Glasgow.

HOURS OF ATTENDANCE AND OPERATION DAYS AT THE LONDON HOSPITALS.

CANCER, Brompton (Free). Hours of Attendance.—Daily, 2. Operation Days.—Tu. F. S., 2.

CENTRAL LONDON OPHTHALMIC. Operation Days.—Daily, 2.

CHARING CROSS. Hours of Attendance.—Medical and Surgical, daily, 1.30; Obstetric, Tu. F., 1.30; Skin, M., 1.30; Dental, M. W. F., 9; Throat and Ear, F., 9.30. Operation Days.—W. Th. F., 3.

CHELSEA HOSPITAL FOR WOMEN. Hours of Attendance.—Daily, 1.30. Operation Days.—M. F., 2.

EAST LONDON HOSPITAL FOR CHILDREN. Operation Day.—F., 2.

GREAT NORTHERN CENTRAL. Hours of Attendance.—Medical and Surgical, M. Tu. W. Th. F., 2.30; Obstetric, W., 2.30; Eye, M. Th., 2.30; Ear, Tu. F., 2.30; Diseases of the Skin, W., 2.30; Diseases of the Throat, Th., 2.30; Dental Cases, W., 2. Operation Day.—W., 2.

GUY'S. Hours of Attendance.—Medical and Surgical, daily, 1.30; Obstetric, M. Tu. F., 1.30; Eye, M. Tu. Th. F., 1.30; Ear, Tu., 1; Skin, Tu., 1; Dental, daily, 9; Throat, F., 1. Operation Days.—(Ophthalmic), M. Th., 1.30; Tu. F., 1.30.

HOSPITAL FOR WOMEN, Soho. Hours of Attendance.—Daily, 10. Operation Days.—M. Th., 2.

KING'S COLLEGE. Hours of Attendance.—Medical, daily, 2; Surgical, daily, 1.30; Obstetric, daily, 1.30; o.p., Tu. W. F. S., 1.30; Eye, M. Th., 1.30; Ophthalmic Department, W., 2; Ear, Th., 2; Skin, F., 1.30; Throat, F., 1.30; Dental, Tu. Th., 9.30. Operation Days.—M. F. S., 2.

LONDON. Hours of Attendance.—Medical, daily, exc. S., 2; Surgical, daily, 1.30 and 2; Obstetric, M. Th., 1.30; o.p., W. S., 1.30; Eye, Tu. S., 9; Ear, S., 9.30; Skin, Th., 9; Dental, Tu., 9. Operation Days.—M. Tu. W. Th. S., 2.

LONDON TEMPERANCE HOSPITAL. Hours of Attendance.—Medical, M. Tu. F., 2; Surgical, M. Th., 2. Operation Days.—M. Th., 4.30.

METROPOLITAN. Hours of Attendance.—Medical and Surgical, daily, 1; Obstetric, W., 2. Operation Day.—F., 9.

MIDDLESEX. Hours of Attendance.—Medical and Surgical, daily, 1.30; Obstetric, M. Th., 1.30; o.p., M. F., 9, W., 1.30; Eye, Tu. F., 9; Ear and Throat, Tu., 9; Skin, Tu., 4, Th., 9.30; Dental, M. W. F., 9.30. Operation Days.—W., 1.30, S., 2; (Obstetric), Th., 2.

NATIONAL ORTHOPÆDIC. Hours of Attendance.—M. Tu. Th. F., 2. Operation Day.—W., 10.

NORTH-WEST LONDON. Hours of Attendance.—Medical and Surgical, daily, 2; Obstetric, W., 2; Eye, W., 9; Skin, F., 2; Dental, F., 9. Operation Day.—Th., 2.30.

ROYAL EYE HOSPITAL, Southwark. Hours of Attendance.—Daily, 2. Operation Days.—Daily.

ROYAL FREE. Hours of Attendance.—Medical and Surgical, daily, 2; Diseases of Women, Tu. S., 9; Eye, M. F., 9; Dental, Th., 9. Operation Days.—W. S., 2; (Ophthalmic), M. F., 10.30; (Diseases of Women), S., 9.

ROYAL LONDON OPHTHALMIC. Hours of Attendance.—Daily, 9. Operation Days.—Daily, 10.

ROYAL ORTHOPÆDIC. Hours of Attendance.—Daily, 1. Operation Day.—M., 2.

ROYAL WESTMINSTER OPHTHALMIC. Hours of Attendance.—Daily, 1. Operation Days.—Daily.

ST. BARTHOLOMEW'S. Hours of Attendance.—Medical and Surgical, daily, 1.30; Obstetric, Tu. Th. S., 2; o.p., W. S., 9; Eye, W. Th. S., 2.30; Ear, Tu. F., 2; Skin, F., 1.30; Larynx, F., 2.30; Orthopædic, M., 2.30; Dental, Tu. F., 9. Operation Days.—M. Tu. W. S., 1.30; (Ophthalmic), Tu. Th., 2.

ST. GEORGE'S. Hours of Attendance.—Medical and Surgical, M. Tu. F. S., 12; Obstetric, Th., 2; o.p., Eye, W. S., 2; Ear, Tu., 2; Skin, W., 2; Throat, Th., 2; Orthopædic, W., 2; Dental, Tu. S., 9. Operation Days.—Th., 1; (Ophthalmic), F., 1.15.

ST. MARK'S. Hours of Attendance.—Fistula and Diseases of the Rectum, males, S., 3; females, W., 9.45. Operation Days.—M., 2, Tu. 2.30.

ST. MARY'S. Hours of Attendance.—Medical and Surgical, daily, 1.45; o.p., 1.30; Obstetric, Tu. F., 1.45; Eye, Tu. F. S., 9; Ear, M. Th., 3; Orthopædic, W., 10; Throat, Tu. F., 1.30; Skin, M. Th., 9.30; Electro-therapeutics, Tu. F., 2; Dental, W. S., 9.30; Consultations, M., 2.30. Operation Days.—Tu., 1.30; (Orthopædic), W., 11; (Ophthalmic), F., 9.

ST. PETER'S. Hours of Attendance.—M., 2 and 5, Tu., 2, W., 5, Th., 2, F. (Women and Children), 2, S., 4. Operation Days.—W. and F., 2.

ST. THOMAS'S. Hours of Attendance.—Medical and Surgical, daily, exc. W. and S., 2; Obstetric, Tu. F., 2; o.p., W. S., 1.30; Eye, Tu., 2; o.p., daily, exc. S., 1.30; Ear, M., 1.30; Skin, F., 1.30; Throat, Tu. F., 1.30; Children, S., 1.30; Dental, Tu. F., 10. Operation Days.—W. S., 1.30; (Ophthalmic), M., 2.30, F., 2; (Gynæcological), Th., 2.

SAMARITAN FREE FOR WOMEN AND CHILDREN. Hours of Attendance.—Daily, 1.30. Operation Day.—W., 2.30.

THROAT, Golden Square. Hours of Attendance.—Daily, 1.30; Tu. and F., 6.30; Operation Day.—Th., 2.

UNIVERSITY COLLEGE. Hours of Attendance.—Medical and Surgical, daily, 1.30; Obstetrics, M. W. F., 1.30; Eye, M. Th., 2; Ear, M. Th., 4; Skin, W., 1.45, S., 9.15; Throat, M. Th., 9; Dental, W., 9.30; Operation Days.—W. Th. 1.30; S., 2.

WEST LONDON. Hours of Attendance.—Medical and Surgical, daily, 2; Dental, Tu. F., 9.30; Eye, Tu. Th. S., 2; Ear, Tu., 10; Orthopædic, W., 2; Diseases of Women, W. S., 2; Electric, Tu., 10, F., 4; Skin, F., 2; Throat and Nose, S., 10. Operation Days.—Tu. F., 2.30.

WESTMINSTER. Hours of Attendance.—Medical and Surgical, daily, 1; Obstetric, Tu. F., 1; Eye, Tu. F., 9.30; Ear, M., 9; Skin, W., 1; Dental, W. S., 9.15. Operation Days.—Tu. W., 2.