

from the commencement of the work, and a numerous selection of their other more recent publications, amongst which were their *Improved Visiting List* for 1896, the distinctive features of which are that names require writing but once a month instead of weekly, and the small compass within which the whole is contained. For this, the third, edition several minor improvements have been added, suggested by extended experience, and its elegance of appearance is increased by gilding the edges. The same list is also issued by request for the first time in perpetual form for any who may prefer this style. Lists in this shape can be specially bound to any thickness desired. The various account books for medical practice made by the firm, including Jefferson's single book system, were also shown, together with an assortment of medical charts for the pocket or otherwise, and were all worth inspection. Amongst the books issued recently are Mr. Harry Fenwick's *Epitome of Modern Urinary Surgery*; Dr. Watson Williams's *Diseases of the Upper Respiratory Tract*, and a monograph on *Eyesight and School Life*, by Mr. Simeon Snell, all well illustrated, and a remarkable and somewhat eccentric pamphlet on *The Eye in Relation to Health*, by a Chicago physician, Dr. Chalmer Prentice. Especially interesting at the present moment, both in view of the late Indian Commission and the agitation in some other countries on the subject, and the authors' almost unique experience in dealing with the disease, is Drs. Hansen and Looft's *Leprosy*, just issued, with typical photographs and coloured plates.

WYLEYS, LIMITED (Coventry and Birmingham) exhibited their principal specialities in the form of Compressed Pellets, Hypodermic Pellets, Gelatine-coated Oval Pills, Flexible Gelatine Capsules (containing liquid and solid drugs), Nasal Bougies, Jelly of Cocaine and Thymol in flexible tubes, Malt Extract Combinations, Liquid Extracts, Non-alcoholic or Glycerine Tinctures, etc. Hæmatinic Ferruginous Pellets, a combination of reduced iron and chocolate, are intended as a palatable means of giving iron to children. A new form of Ointment Tube, described by the firm as for "ophthalmic use," consists of a flexible tube with a perforated wooden cap, blunted at its apex, and through which a minute amount of any special ointment can be forced out and directly applied to the eyelid. Codeia in pastille form consists of codeia jelly, made of such a consistence that it can be supplied in lozenge-shaped masses, each disc being of a definite weight and containing a definite amount of the alkaloid. Tropels, a new form of medicated lozenges, are made by pressure from the dried materials, the various drugs of the pharmacopoeia lozenges being thus massed together; the tablets thus formed are supplied without name, and it is claimed for them that they can be manufactured much more economically than lozenges made by the ordinary process. The firm also show their Cachets for the tasteless administration of powdered drugs, such cachets being tasteless and soluble and formed of rice flour and gum.

MESSRS. FASSETT AND JOHNSON wish us to state that the exhibit which they recently showed in the museum at the annual meeting of the British Medical Association was that of Messrs. Seabury and Johnson, of New York.

THE 22nd annual street collection in connection with the Hospital Saturday Fund Association, held on July 13th, has realised a sum of £2 965, being a decrease of £1,842 upon the collection of 1894. The falling off is attributed to the greatly increased number of street collections as compared with previous years. The workshop collection on Saturday, the 10th inst., amounted to £6,043.

THE TREATMENT OF INEBRIETY.—In the annual report of the Walnut Lodge Hospital for Inebriates (U.S.A.) Dr. T. D. Crothers gives a record of 66 patients who had been treated in the institution previous to 1885. Of this number 21 have died after relapse as the result of excesses; 16 are living—orderly temperate lives, and may be considered cured; 4 are insane, 10 are hopeless inebriates, and 15 are subject to occasional lapses from the path of temperance. Of 58 inebriate patients treated in 1894, no fewer than 43 had previously been in other similar institutions. The number of relapses after the "gold cure" is said to be increasing, and Dr. Crothers finds symptoms of acute insanity common in such persons.

## MEMORANDA: MEDICAL, SURGICAL, OBSTETRICAL, THERAPEUTICAL, PATHOLOGICAL, ETC.

### REMOVAL OF LAMINARIA TENTS.

I HAVE noticed on nearly all occasions when the subject of dilating the os uteri by laminaria tents is under discussion that someone complains of the great difficulty in removing the tents which have become swollen behind the tight os internum. I find a good method to avoid this is to enclose the tent in a quill open at both ends, and split down the side. This dilates the parts in an even manner, and is easily withdrawn. I have no doubt a celluloid covering similar to the quill and perforated to allow a more free entrance of moisture would act better, but I have not tried it. The tent should be dipped in antiseptic solution immediately before use.

W. WATSON PIKE, F.R.C.S.I.,  
Belfast. Surgeon-Major, A.M.S.

### PRURITUS ANI SUCCESSFULLY TREATED BY APPLICATION OF UNGUENTUM CONII.

THE affection almost invariably made its appearance at the onset of a menstrual period, in a girl aged 16. It was worse at night and when warm in bed, and so painful as to prevent any sleep.

The girl had been treated for eczema of the eyelids when younger; there had been considerable constipation recently, and, on one occasion, there was somewhat sharp pain at the anal orifice while at stool, resulting in a streaking of the fæces with blood. Careful examination failed to disclose any evidence of piles or of a fissure of the anal margin, though there was a very painful and sensitive spot, pointing to the possible presence of the latter. Arsenic had failed to relieve the pruritus on previous occasions.

Concluding that the cause probably lay in local irritation from the lochial discharge, and perhaps reflexly from ovarian disturbances at the onset of the menstrual period, I ordered potassium bromide internally, the careful washing of the parts with soft water, and the local application of unguentum conii, made from the succus (not from the *B.P.* extract), with lanolin. This was supplemented by an occasional dose of cascara sagrada to keep the motions soft.

The result was most satisfactory, as perfect relief was given whenever the unguentum conii was applied, and after the third day of the application, the pruritus ani entirely disappeared, while the anal fissure has presumably been cured, as no pain is felt at stool.

GEORGE BIDIE,  
Surgeon-Lieutenant I.M.S., 6th  
Infantry, Hyderabad Contingent.

### HYDATID OF THE LIVER: OPERATION: RECOVERY.

THREE years ago M. J., a girl aged 9, was operated on by Dr. Weld, of Avenel, for hydatid tumour of the left lobe of the liver. She was previously tapped twice without ill results, but also without cure. She was seized one evening with severe dyspnoea, threatening death, through pressure on the heart. Dr. Weld incised the sac, stitching it to the lips of the wound, and draining. The mother cyst was not expelled, but a good recovery took place.

When I saw her on April 23rd, 1895—three years after the operation—I found her with a large hydatid cyst occupying the convex surface of the liver, and presenting at the margin of the thorax. She was in somewhat bad health from bronchitis, caused by the pressure of the tumour, and she was also only just recovering from a badly fractured elbow-joint.

A fortnight afterwards I made an incision below the rib margin, parallel with the fibres of the external oblique, and exposed the tumour, which lay tucked under the ribs. Owing to the thin state of the adventitious capsule I was unable to bring the tumour up to the wound margin after Lindemann's method. The anchoring ligatures cut through in attempting it, and a considerable quantity of hydatid fluid escaped into the peritoneal cavity, which, however, was well packed with sponges. On being turned on her side the cyst was soon emptied, for the most part clear of the peritoneum, and I was then able to bring the cyst into the wound.

The child made an uninterrupted recovery after the operation. She was well four weeks after, with the wound soundly healed, the scar being tucked almost out of sight beneath the rib's margin.

The feature of the operation was the absolute impossibility of following Lindemann's method of bringing the cyst well up before it was opened, owing to the delicate nature of its structural wall. This fact is also, in my opinion, the strongest argument which can be used in favour of the radical operation in this case. If tapping had been resorted to the escape of contents into the peritoneal cavity would have been certain, as the delicate adventitia would have collapsed after the withdrawal of the fluid to almost as small a compass as the cyst it contained, with the inevitable result of leakage into the peritoneal cavity.

If I had to operate again in a similar case I should most certainly do so through the pleura low down, where the hydatid, being immediately underneath, could have been simply and expeditiously sutured to the wound margin before the capsule was incised. The extra risk from the opening of the pleural cavity would be more than compensated for by the time saved and the less immediate risk to a patient in a delicate state. Moreover, in this situation the suturing of the two pleural layers would have been easily and speedily effected.

GEORGE FOX, M.R.C.S.E.,  
Euroa, Victoria. Late Resident Surgeon to Sydney Hospital.

## REPORTS

ON

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

#### [MATER MISERICORDIÆ HOSPITAL, DUBLIN.

SUCCESSFUL LIGATURE OF RIGHT SUBCLAVIAN AND COMMON  
CAROTID ARTERIES FOR INNOMINATE ANEURYSM.

(By CHARLES COPPINGER, M.D., F.R.C.S.I., Surgeon to the Hospital.)

A SOLDIER, aged 49, suffering from a large and thin-walled innominate aneurysm, which had caused dislocation forwards of his right clavicle, and which had defied the usual medical measures of treatment—namely, prolonged rest, potassium iodide, calcium chloride, etc.—is now under surgical treatment at the above hospital. His right subclavian and common carotid arteries were ligatured simultaneously three weeks ago, and both wounds have long since closed by first intention. Consolidation has not, however, taken place in the aneurysm, but its pulsation has become much less strong, while its walls have become perceptibly thickened by fibrinous deposit. The arteries of the right arm are, however, pulseless.

The distal operation for innominate aneurysm has been performed on three occasions only in Dublin: once by Mr. Conway Dwyer, of Jervis Street Hospital, and twice by myself. The first two patients are now well, and cured apparently of their disease, while the last promises fairly.

## REPORTS AND ANALYSES

AND

### DESCRIPTIONS OF NEW INVENTIONS

IN MEDICINE, SURGERY, DIETETICS, AND THE  
ALLIED SCIENCES.

#### MEAT JUICE.

It is claimed for Vitalia Meat Juice that it consists of the albuminous and extractive constituents of British lean beef, and that it contains in solution 20 per cent. of coagulable solids, including a considerable proportion of uncoagulated albumen, soluble phosphates, and colloid iron. Analysis confirms the statement as to the amount of coagulable material, and further shows the presence of 6.6 per cent. of mineral constituents, of which nearly 5 per cent. is sodic

chloride. The preparation also contains 0.25 per cent. chloroform, which is added as a preservative in addition to the sodic chloride. The use of chloroform as a preservative of materials to be used for nutritive purposes is not to be commended, and in many cases the presence of chloroform might be prejudicial to patients. In this preparation the amount of chloroform present is only about one half that present in the *Pharmacopœia* chloroform water, but even when the preparation is diluted in the proportion of a teaspoonful, the dose prescribed, to four of water the chloroform is quite perceptible. In other respects the meat juice is well made. The makers are the Vitalia Company, 1, Holborn Circus, E.C.

#### SOME NEW TABLOIDS.

MESSRS. BURROUGHS, WELLCOME AND Co. (Snow Hill Buildings, E.C.) have sent specimens of some recently introduced tabloids. Gregory Powder Tabloids contain a proportion of sodium bicarbonate in place of carbonate of magnesium. It is said that greater benefit follows the administration of this combination than of the ordinary pulv. rhei co. Tabloids of vinum ipecac. form a very convenient method of taking ipecacuanha; they contain in each tabloid the amount of ipecacuanha extract contained in 5 minims of the wine. Nasal Tabloids (Dr. Carl Seiler) are composed of bicarbonate, benzoate, biborate, and salicylate of sodium with thymol, menthol, etc. An antiseptic alkaline solution for irrigating the nostrils or gargling the throat in nasal or pharyngeal catarrh can easily be prepared by dissolving a tabloid in water.

#### COCOA EXTRACT.

This is a well prepared cocoa preparation giving a good infusion with agreeable flavour. It has had about 30 per cent. of the cocoa butter naturally present in the bean removed, and is thus rendered more acceptable to persons having a tendency to be dyspeptic. The analysis shows 33 per cent. of fat and 6.1 per cent. mineral constituents. It does not contain any admixture of starch or sugar. It is prepared by W. Teetgen, 52, Old Kent Road, S.E.

#### B. O. S. WHISKY.

SAMPLES of this whisky have been submitted to us for examination by Messrs. Pease, Son, and Co., Darlington and London. It is said to be a blend of the finest Scotch whiskies matured by storage in sherry casks. Analysis shows that it is a whisky of good character, strength, and flavour, and has evidently been carefully blended. It contains 47.1 per cent. of alcohol, by measure equal to 17.4 under proof; 0.098 per cent. solid contents, and 0.017 per cent. acidity as acetic. Its specific gravity is 940.4.

#### IMPROVED ETHYL CHLORIDE BULB.

THE latest improvement on Dr. Bengue's instrument for producing ethyl chloride spray is to have the bulb with both a curved and straight neck. This arrangement enables the operator to use either shape according to the operation to be performed, and also to have another spray ready if one should become stopped. The curved spray is closed with a metal screw cap. The straight one by a closed capillary glass tube, which when it is desired to open must have a small file mark made upon it close to the rim of the metal mantle, so that a sharp tap with the file on the side of the mark breaks off the protruding tube smoothly. Each bulb is supplied with a spare cap to be used for the fresh jet.

#### INFANTS' FOOD WARMER.

REID'S Infants' Food Warmer consists of a tin vessel or water bath in which three bottles are contained in a frame. This is half filled with water, and heated by means of a nightlight. The chief advantages claimed for this apparatus are that the food is always ready for immediate use, no warming or pouring out is required, and the trouble at night is reduced to a minimum. The nurse must, of course, be on her guard that milk or other liquid does not become sour during the night. The wholesale agent is Mr. William Toogood, Burlington Buildings, Heddon Street, Regent Street, W.

## UNIVERSITIES AND COLLEGES.

### UNIVERSITY OF CAMBRIDGE:

DR. F. WESBROOK, John Lucas Walker Student of Pathology in the University of Cambridge, has been appointed Professor of Bacteriology in the State University of Minneapolis, U.S.A. Dr. Wesbrook has taken an active part in the teaching of pathology at Cambridge, and has published in the English, French, and German journals a number of original papers on bacteriological subjects. He was entertained by his Cambridge colleagues at a farewell dinner in Caius College Combination Room on Monday, August 19th.

### THE REGISTRAR OF THE UNIVERSITY OF LONDON.

THE London University is threatened with the loss of one of its oldest and most esteemed officers on account of its subjection to Civil Service regulations. Mr. Milman, the second son of the late Dean Milman, became Assistant Registrar and Librarian to the University in 1874, and in 1879 succeeded the late Dr. W. B. Carpenter in the registrarship. Although still in the full height and vigour of his powers, the Civil Service age regulation will necessitate his resignation at the beginning of next year. It is to be hoped that some means may be found of preserving to the University the sound judgment and experience of the present head of its permanent staff.

ERRATUM.—In the list of gentlemen admitted Diplomates in Public Health by the Royal Colleges of Physicians and Surgeons, published in the BRITISH MEDICAL JOURNAL of August 10th, the name of Dr. W. W. Shrubshall was misprinted "Shrubsall."

## OBITUARY.

FREDERICK ALBERT HESLOP, F.R.C.S. EDIN.,  
Blackpool.

THE death is reported of Mr. Fred. Heslop, of Blackpool. On July 25th he was wet through, and returned home to change his clothes, but finding an urgent message to visit a poor patient in the country he set out at once, unmindful of the risk he was running. The next two days he did his work as usual, though feeling out of sorts. On the evening of July 27th he had a severe rigor, and his temperature was found to be 104°. He passed a delirious night. On Sunday he had an extensive area of dulness at the left base, rusty sputum, a poor pulse, and a pain in the left side, and the illness speedily ended in death. About twelve years ago Dr. Heslop suffered from an abdominal tumour, which was thought to be sarcomatous, and he was twice operated upon in Manchester and London, but on each occasion the surgeons dared not do more than make an exploratory incision. The deceased was born in Manchester in 1858, being a son of Dr. Robert Heslop, of St. Mary's Hospital. Having been educated at Epsom College he proceeded to Aberdeen and later to Edinburgh, where he took the L.R.C.P. and L.R.C.S. in 1882. He practised in Kemerton for several years, when his health broke down. After the operations mentioned above he settled in Blackpool, where he held the post of police surgeon, and was also one of the surgeons to the Blackpool Hospital, of whose Board he was a member. He had filled the office of President of the Fylde Medical Society, and was a lecturer and examiner for the St. John Ambulance Association, and was also a member of the British Medical Association. Just a month ago he had obtained the F.R.C.S. Edin. He had earned the affectionate regard of his medical brethren by his geniality and sterling qualities.

DR. JOHN H. CARSLAW, who died recently, was the eldest son of the Free Church Minister of the Park Church, Helensburgh. He passed with distinction through his period of probation as resident medical officer in the Western Infirmary, Belvidere Fever Hospital, etc. He was Subeditor of the *Glasgow Medical Journal*. Latterly he was obtaining a fair share of medical practice, and had also for several years held the position of tutorial assistant to the professor of medicine—at first in the clinical department, and for the last two years under an appointment from the University Court. Dr. Carslaw was married, and had one infant child.

PROFESSOR S. MOOS, the distinguished otologist of Heidelberg, whose death was recently announced in the BRITISH MEDICAL JOURNAL, was born in 1831, and studied medicine at Heidelberg, Prague, and Vienna, taking his doctor's degree in the first named of these Universities in 1856. He qualified

as *Privatdocent* in the University of Heidelberg in 1859, and in 1866 he was appointed Extraordinary Professor. After a time he devoted himself specially to the study of diseases of the ear, and in 1874 he published his researches on the anatomy and physiology, normal and morbid, of the Eustachian tube. In 1891 he was appointed Professor Honorarius of Otology, a title unique in Germany and specially created for him. In conjunction with Knapp he founded the *Archiv für Augen- und Ohrenheilkunde*; afterwards he started the *Zeitschrift für Ohrenheilkunde*, in which he published a series of valuable researches on the relations between affections of the ear and constitutional diseases, such as the infectious fevers, pneumonia, erysipelas, meningitis, diabetes, etc.

DR. WILLIAM C. JARVIS, Clinical Professor of Laryngology and Rhinology in the University of the City of New York, died after a short illness on July 30th. Though not much over 40 at the time of his death, Dr. Jarvis had for many years been a prominent member of the American Laryngological Society. He contributed largely to the literature of his speciality, and was the inventor of many instruments for the diagnosis and treatment of diseases of the throat and nose.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently passed away are: Dr. José Maria Teixeira, Professor of Pharmacology and Therapeutics in the University of Rio de Janeiro, Member of the Academy of Medicine of that city, author of important papers published in the *Transactions* of the Academy of Medicine of Brazil, and a distinguished medical journalist, aged 41; Dr. Elias Rodriguez, Professor of Therapeutics and Forensic Medicine in the Medical Faculty of Caracas; Dr. Em. Göth, Professor of Obstetric Medicine and Gynecology in the University of Klausenburg, aged 47; and Professor Nagel, Director of the Ophthalmological Clinic in the University of Tübingen, aged 62.

MAJOR THURE BRANDT, whose name is associated with massage of the female pelvic organs, died recently. He was not, we believe, a member of the medical profession.

## MEDICO-PARLIAMENTARY.

### HOUSE OF LORDS.

*The London University Question.*—EARL COWPER called attention to a question which, as it had not assumed a party character, was not so much discussed as many other matters. He meant the establishment of a great teaching University for the great metropolis of London. He would only touch upon the necessity for such a University—which, indeed, was widely acknowledged—and would not enter at all into the particular plan for the establishment of such a University which was before Parliament when Parliament was dissolved. Everybody was agreed that it was a positive disgrace that the great population of London was not possessed of that which almost every capital in Europe was possessed—a great teaching University, because they could not call by that name the University of London, which was merely an examining Board, well as it did its work and eminent as were the people connected with it, and which, in spite of its name, had no more to do with London than it had to do with the rest of the United Kingdom. What was wanted was that for which for years thinking people had been striving—namely, that there should be a proper and economical system of teaching which would apply to poor as well as to rich, and which would conduct the student from point to point up to that final examination which could only be considered as the crowning of the whole, and by which the stamp of a completed education would be conferred. The plan proposed by the Commission of which he had had the honour to be chairman had received the support of all the bodies interested in the question; and he urged the Government to act on the report of that Commission without any further delay. If in that first session a Bill had been brought forward to carry out the recommendations of the Committee, it would have slipped through utterly unopposed and with as little difficulty as an ordinary private Bill. Even last session a Bill would easily have passed if Parliament had not come to an untimely end, and the Bill, which he was grateful to the late Government for bringing in, would have become law. He could not, of course, hope that in the present short session anything would be done, although he wished that it could. But if an expression of opinion could be elicited from Her Majesty's Ministers to say that they were disposed to regard this subject favourably, that declaration, together with the fact that the late Government brought in a Bill on the subject—showing that both sides were unanimous—would have the effect of preventing those new differences of opinion arising which he deprecated, and would encourage the hopes of those who now for many years had been striving under every kind of difficulty for this end, and who would be assured

## MEDICAL NEWS.

**SIR JULIAN GOLDSMID** has been elected Vice-Chancellor of the University of London in succession to Sir James Paget, who has resigned.

**THE Merchant Taylors' Company** has contributed the sum of twenty guineas to the new building fund of the Royal Ear Hospital, Soho Square.

**CREMATION IN THE UNITED STATES.**—A new crematory has been opened in the Oddfellows' Cemetery, San Francisco. Within a fortnight of its erection 15 incinerations took place. The building is said to be beautiful architecturally, and, it is added, that "the average churchman will find all that he desires to make a funeral service solemn and impressive."

**THE ABERNETHIAN SOCIETY.**—The opening address of the 101st session of the Abernethian Society will be delivered by Dr. Church in the Anatomical Theatre of St. Bartholomew's Hospital on October 10th, at 8 P.M. The subject of the address will be "The Rise of Physiology in England and its Effect on the Practice of Medicine."

**METROPOLITAN WATER SUPPLY.**—The Clapham Ratepayers' Association has made a protest against the action of the water companies, and a hope is expressed that the new Government will deal with the whole question of the metropolitan water supply. It is understood that they have been advised that the Government is unlikely to be able to deal with the matter at present, but that if the question is brought to the attention of the Ministers next session, it will receive the attention of Parliament.

**THE SCIENTIFIC SLAUGHTER OF CATTLE.**—A meeting was held last week, in the Guildhall, York, under the auspices of the Church Society for the Promotion of Kindness to Animals and the York Sanitary Committee, to hear a paper by Mr. Greener, of Birmingham, describing a machine for the instantaneous and painless slaughtering of cattle. Canon Argles presided. The invention consisted of a single rifled barrel, fitted with a cartridge chamber and a simple detonating mechanism, and terminated by a bell-shaped chamber with an inclined face which serves to deaden the sound, protect the operator, and guide the bullet in the direction of the spinal cord when the machine is fired. A cartridge is placed in the bore, and the instrument is held to the animal's forehead: a tap on the striker explodes the charge, and the beast falls immediately to the ground completely unconscious, and can be bled at once in the usual way. Dr. Ramsay said that the weight of scientific testimony was in favour of a mode of slaughtering in which there was the least possible agitation, distress, and pain. After a few remarks from Dr. Cattle, the medical officer of health, and Canon Faussett, the company adjourned to the premises of Alderman Clayton, ex-Lord Mayor, and witnessed the slaughtering of a 3-year-old bullock. Upon the motion of the medical officer of health, seconded by Alderman Clayton, a resolution was passed expressing entire satisfaction in the manner in which the instrument had effected its purpose safely, painlessly, instantaneously, without smoke, and practically without noise.

**THE COATES MEMORIAL FUND.**—The usual monthly meeting of the Medical Association of India was held at Calcutta on July 17th. After the minutes of the last meeting were read and confirmed, and prior to proceeding with the business of the evening the following resolutions were proposed and duly adopted: 1. The members of the Medical Association of India have heard with deepest sorrow the sad intelligence of the death of Brigade-Surgeon J. M. Coates, M.D., I.M.S., late Principal of the Calcutta Medical College, and desire to place on record their high appreciation of him as the Principal of the College, the esteem in which he was held by them as a physician, and the confidence in which they held him as a friend. Resolved that a copy of the above resolution be forwarded to the relatives of the deceased. 2. That a public memorial fund be opened at once, to be called the "Coates Memorial Fund," the shape of the memorial to be determined hereafter. 3. That Dr. L. Fernandez, the Secretary of the Association, be appointed Honorary Treasurer to the above fund; and that

he deposit all subscriptions received in a public bank. As a mark of respect to the memory of Dr. Coates, no further business was transacted, and the meeting was adjourned. Subscriptions may be sent to the Bank of Calcutta, Limited, Clive Row, Calcutta, or to the Honorary Treasurer, Dr. L. Fernandez, No. 5, Royd Street, Calcutta.

**THE ASSOCIATION OF BRITISH POSTAL MEDICAL OFFICERS.**—The annual general meeting and conference of this Association was held recently at the Hôtel Métropole, Dr. John Watson, the Vice-President, occupying the chair in the unavoidable absence of the President, Dr. Frank Iliffe. There was a large attendance of members. The secretarial reports exhibited a persistent and encouraging increase in the membership, and the opinion was expressed by those present that it should be clearly intimated to those who are still non-members that admission into the Association in the near future would be attended by considerable difficulty. Several important matters were brought under discussion, but the reading of the paper by Dr. Giddings on the subject of "How much should Postal Medical Officers be influenced by Heredity in examining Candidates for the Postal Service?" was postponed on account of the numerous engagements connected with the meeting of the British Medical Association. The following executive was elected for the ensuing year: *President*: Mathew C. Halton, J.P., M.R.C.S., Ex-Mayor of Barnsley. *Vice-Presidents*: Frank Iliffe, M.R.C.S., Derby; John Watson, M.D., Manchester. *Honorary Secretary in Scotland*: W. Dougan, M.D., Glasgow. *Honorary Secretary in Ireland*: H. Fitzgibbon, M.B., Dublin. *Honorary General Secretary and Treasurer*: R. R. Giddings, M.B., Nottingham. *Executive Committee*: E. L. Adeney, J.P., M.D., Tunbridge Wells; T. W. Browne, M.D., Belfast; M. Coates, M.D., London; W. H. Hughes, J.P., M.R.C.S., Ashton-under-Lyne; W. Husband, M.R.C.S., Manchester; B. Thornton, J.P., M.R.C.S., Margate; S. Walker, M.R.C.S., Middlesbrough. *Auditors*: W. Dougan, M.D., Glasgow; E. W. Symes, M.D., Halifax. In the evening the annual banquet took place in the Whitehall Rooms, and was a very great success, Dr. Frank Iliffe, the President, being in the chair.

### MEDICAL VACANCIES.

The following vacancies are announced:

- BRIGHTON, HOVE, AND PRESTON DISPENSARY**, Queen's Road, Brighton.—Medical Officer for the No. 6 District. Applications to the Secretary by September 9th.
- CENTRAL LONDON THROAT, NOSE, AND EAR HOSPITAL**, Gray's Inn Road.—Clinical Assistants. Applications to Richard Kershaw, Secretary.
- CHILDREN'S HOSPITAL**, Temple Street, Dublin.—Resident Surgeon. Salary, 50 guineas a year, with rooms, fire, light, and attendance. Applications to the Honorary Secretary of the Medical Board.
- CITY ASYLUM**, Birmingham.—Resident Qualified Clinical Assistant. Board and lodging provided; no salary. Applications to the Medical Superintendent.
- CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST**, Victoria Park, E.—House-Physician. Board and residence and allowance for washing provided. Appointment for six months. Also Assistant Physician; must be M. or F.R.C.P.Lond. Applications to the Secretary for the former post by September 12th, and for the latter by September 14th.
- GENERAL HOSPITAL FOR SICK CHILDREN**, Pendlebury, Manchester.—Junior Resident Medical Officer; doubly qualified; must devote his whole time. Salary, £80 per annum, with board and lodging. Appointment for one year. Applications to the Chairman of the Medical Board by August 27th.
- GENERAL HOSPITAL**, Nottingham.—House-Physician. Appointment for two years, but eligible for re-election. Salary, £100 per annum, rising £10 a year to £120. Assistant House-Surgeon. Appointment for six months. Board, lodging, and washing in hospital; no salary. Applications to the Secretary for the former post by September 11th, and for the latter by September 7th.
- GLASGOW MATERNITY HOSPITAL**.—Obstetric Physician and Assistant Obstetric Physician. Applications to Arthur Forbes, Secretary, 146, Buchanan Street, Glasgow, by November 8th.
- MANCHESTER CLINICAL HOSPITAL FOR WOMEN AND CHILDREN**, Park Place, Cheetham Hill Road, Manchester.—House-Surgeon. Salary, £80 per annum, with apartments and board. Applications to Mr. Hubert Teague, Secretary, 38, Barton Arcade, Manchester, by September 3rd.
- NORFOLK AND NORWICH HOSPITAL**.—Assistant House-Surgeon; doubly qualified. Appointment for six months. Board, lodging, and washing provided. Applications to the House-Surgeon by September 2nd.
- ROYAL SOUTHERN HOSPITAL**, Liverpool.—Third House-Surgeon. Salary, £85 per annum, with board, lodging, and laundry. Applications to the Chairman of the Medical Board by August 26th.

**SCHOOL BOARD FOR LONDON.**—Medical Officer for the Board's Training Ship *Shafesbury*, lying off Grays, Essex; must reside within two miles of the ship. Commencing salary £100 a year, which may be increased by annual increments of £10 to £150 a year. Applications to A. E. Garland, Clerk to the Managers, School Board Offices, Victoria Embankment, W.C., by August 31st.

**WEST HAM HOSPITAL, Stratford, E.**—Senior House-Surgeon. Appointment tenable for one year. Salary, £75 per annum, with board, lodging, and washing. Applications to G. E. Adams, Secretary, by August 31st.

**WEST RIDING ASYLUM.**—Fifth Assistant Medical Officer. Salary, £100 per annum, rising £10 a year up to £150, with board, etc. Applications to the Medical Superintendent by August 28th.

### MEDICAL APPOINTMENTS.

**BENJAMIN, Dr.**, reappointed Temporary Medical Officer of the Chase Farm Schools of the Edmonton Union.

**CLENDINNEN, W. M.**, M.R.C.S.Eng., L.R.C.P.Lond., appointed Medical Officer of Sedgley No. 3 District of the Dudley Union, *vice* J. G. Clendinnen, deceased.

**HEATHCOTE, H. C.**, M.B., Ch.B., appointed Medical Officer for the Fifth District of the Bath Union.

**HOUGHTON, Dr. L. F.**, appointed Medical Officer for the Second District of the Liskeard Union.

**JENKINS, Dr.**, reappointed Medical Officer of Health for Lytham.

**KINGDON, E. C.**, M.B., M.R.C.S., appointed Honorary Surgeon to the Nottingham Eye Infirmary.

**MACKERETH, A. A.**, M.B., C.M.Glasg., appointed Medical Officer for the Seventh District of the Barnstaple Union.

**MIRZA, Ahmed, M.B.**, B.Sc.Edin., Medical Officer for the City of Hyderabad, appointed Lecturer on Medical Jurisprudence at the Medical School at Hyderabad.

**NAIRN, Dr. R. W.**, appointed Medical Officer for the Farnsfield District of the Southwell Union.

**NASH, Mr. W. G.**, appointed Medical Officer for the No. 7 District of the Market Harborough Union.

**NASON, W. S.**, M.B., C.M.Edin., appointed Medical Officer for the Nuneston Union Workhouse.

**O'SULLIVAN, Michael, M.B.**, B.Ch., appointed Medical Officer for the C, D, and G Divisions of the Dublin Police.

**PERKINS, Henry Campbell, M.R.C.S.**, L.R.C.P., appointed Medical Officer Nayar Brigade, Travancore, Madras.

**RAY, M. B.**, M.B., C.M.Edin., appointed Resident Medical Officer to Wadley Asylum, near Sheffield.

**SMILES, Thomas, M.D.St.And.**, L.R.C.P.Edin., M.R.C.S.Eng., reappointed Medical Officer of Health to the South Croftland Urban District Council.

**SMITH, R. W. Innes, M.B.**, appointed Assistant House-Surgeon at Ancoats Infirmary, Manchester.

**TEMPLEMAN, Charles, M.D.**, D.Sc., appointed Medical Officer of Health for the City of Dundee, *vice* Dr. A. M. Anderson, resigned.

**TURNER, G. J. K.**, M.B., C.M.Aberd., appointed Medical Officer for the No. 4 District of the Chipping Norton Union.

**WALKER, Dr. F. H. R. J. A.**, appointed Medical Officer for the Coleford District of the Frome Union.

**WHITE, J. A. Henton, M.B.**, B.S.Dunelm., L.R.C.P., M.R.C.S.Eng., appointed Resident Surgical Officer to the General Dispensary, Birmingham.

### DIARY FOR NEXT WEEK.

#### TUESDAY.

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

### 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 ensure insertion in the current issue.*

#### BIRTH.

**BENSON.**—August 14th, at Grosmont, Pontillas R.S.O., the wife of H. P. D'Arcy Benson, M.B., Ch.M.Edin., of a son.

#### MARRIAGES.

**FOTHERGILL-WOON.**—On August 15th, at St. Luke's Church, Chelsea, by the Rev. T. Bird, W. E. Fothergill, M.A., B.Sc., M.B., C.M., Manchester, to Edith Alberta, third daughter of J. Dillon Woon, Esq.

**YOUNG-WHITE-RICKARD.**—On the 15th inst., at St. Columb Minor, by the Rev. J. Broad Eade, Alfred H. Young, M.B., F.R.C.S., of the Owens College, Manchester, to Caroline Davy, daughter of the late R. White-Rickard, Esq., of "The Bays," Putney, and Newquay, Cornwall. No cards.

#### DEATHS.

**BRISTOWE.**—On August 20th, at Dixon Vicarage, Monmouth, John Syer Bristowe, M.D., LL.D., F.R.S., F.R.C.P., Consulting Physician to St. Thomas's Hospital, of Old Burlington Street, at 68.

**WALSH.**—On the 14th inst., at his residence, Jud-Falls, Stonyhurst, John Walsh, Esq., M.R.C.P., M.R.C.S., L.S.A., 25 years Physician to Stonyhurst College, Lancashire.

## LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

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

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

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

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

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

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

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

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

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

### QUERIES.

**Z. Y. T.** asks: What is the cost of disinfecting stoves, by whom made, and which kind are most suitable for rural hospital?

**H. W.** would be glad to hear of any recent literature on the subject of senility and senile diseases.

**H.L.D.** asks for particulars about Muybridge and Eddison's anatomical illustrations, alluded to by Professor Keen, as reported at page 358 of the BRITISH MEDICAL JOURNAL.

**RIFWOOD** asks: (1) Which is the best underclothing for extremely irritable and sensitive skins; and (2) if there is any genuine electric belt on the market?

**DR. J. J. RIDGE** (Enfield) writes: Can you or any of your readers inform me of any hospital—the nearer London the better—where the "plenum" system of ventilation is at work? I should also be glad to know the experience of this plan.

**MR. F. PENNY** (North Devon Infirmary, Barnstaple), writes: In the BRITISH MEDICAL JOURNAL of August 10th, page 384, there is an account of wounds and ulcers treated by exposure to oxygen gas. I should be glad to be informed (1) What is the exact method of procedure; (2) the apparatus required, and its approximate cost.

### A CASE FOR DIAGNOSIS.

**DR. W. F. MACFARLANE** (Abertillery, Monmouthshire) writes: I should be obliged if some readers would give me their opinion on the following case. M. E., aged 25, spinster, the daughter of a respectable working man, always enjoyed sound health until February last, when she began to feel nervous, and also noticed that her eyesight was not as good as it had been. The last week in February, while attending divine service, she had a fit of an epileptic nature, there being a distinct aura and then complete unconsciousness. She was carried home, and recovered in half an hour, but felt ill and weak for a fortnight after, and only with effort managed to get about her household duties. Then she had another attack of a similar nature, recovering again in the same way. Her sight began to fail, and she was unable to read or sew without a great effort. Her menstrual functions had also ceased. She now consulted a medical man, and was recommended to try a change of air and surroundings. She went to the country, and remained there until the end of May, and though she had no more seizures she found herself getting weaker and more nervous daily, her sight was getting worse and worse, and she suffered from violent headaches. Her menses had also not reappeared. She ultimately became so weak that she was obliged to take to her bed. She was now sent back home by the practitioner who was attending her, reported to be in a dying condition.

I now saw the patient for the first time. I found a well-developed young woman, who answered quite cheerfully any questions that were asked her, but immediately relapsed into a dull apathetic condition. She took time to gather her thoughts, however, before replying, sometimes pausing for about thirty seconds. She complained of hemi-crania, the pain being limited to the right side of the head, but not to any particular area. She was extremely weak, not being able to stand without support, and her hand pressure was very feeble. Her eyesight was very bad, she being only able to detect objects in the abstract, and not to distinguish what they were. Her eyes looked perfectly normal, but the pupils were somewhat dilated; they did not respond to light and accommodation. There was no pain elicited on pressing on the eyeballs, and their tension was normal. Her appetite was fairly good considering her confinement to bed; her bowels acted daily; she possessed perfect control over her sphincters, and she enjoyed a fair amount of sleep. On examining the chest the heart sounds were found normal, and her lungs showed no tendency to weakness. Her tendon reflexes were normal, and her sense of touch and hearing per-