

MEMORANDA: MEDICAL, SURGICAL, OBSTETRICAL, THERA- PEUTICAL, PATHOLOGICAL, ETC.

PROLONGED TYPHOID FEVER.

Miss —, aged 37, was found to be suffering from typhoid fever on December 13th, 1895, the fourth day of the disease. Her symptoms were headache, constipation, slight tympanites. The temperature was 103° to 104°.

On the sixth day a few spots appeared on the abdomen.

From the seventh to the seventeenth day the temperature slowly fell, reaching 101° in the evening.

From the seventeenth to the twenty-fifth day the evening temperature was about 102°, and there was some diarrhoea.

From the twenty-fifth to the thirty-fifth day the fever declined, the temperature being normal in the morning, and about 100.5° in the evening.

From the thirty-fifth to the thirty-ninth day the temperature rose again to 103°, and on the fortieth day the patient passed about 3iv of blood at stool. The bowels were kept quiet with opium for three or four days; on the forty-sixth day they acted naturally. The temperature now declined once more, and reached the normal on the fifty-eighth day. For ten days it remained between 97° and 99°, but the tongue did not get clean.

On the sixth-ninth day the temperature rose, and on the seventy-third day the evening temperature was 102.5°. Finally the normal was reached on the eighty-seventh day. The patient was allowed some solid food on the hundred and first day, and got up on the hundred and fourth day (March 22nd, 1896). She invariably slept well at night; abdominal pain and tenderness were completely absent from first to last; constipation was marked except for one week (seventeenth to twenty-fifth day).

The patient was carefully nursed by two trained nurses. Her diet consisted of milk (diluted), thin soups, Wyeth meat-juice and chicken broth; and after the first few weeks 3j of brandy was given each day. Bismuth salicylate, chlorine water, and resorcin were used at different times for checking tympanites. Of these resorcin proved the most satisfactory. There were no complications, except the one attack of hæmorrhage previously mentioned. The old-fashioned term "continued fever" would have been peculiarly applicable to this case.

Byfleet.

HOWARD S. WILLSON, B.A., M.B.

A CASE OF FATAL POISONING BY CARBOLIC ACID.

L. H., aged 19, five months pregnant, left the house for half an hour after an altercation, and returning went straight to her bedroom, and within a few minutes was heard by her sister to be breathing heavily. Her mother was at once called, and found the girl unconscious. I saw her at 2 P.M., exactly ten minutes after she entered her room. She was lying in the bed quite unconscious. The skin was cold, clammy, and livid; the pupils were contracted, but the conjunctivæ were sensible to touch. The pulse was rapid and feeble, later on becoming almost imperceptible. The breathing was laboured and stertorous, vomiting of white frothy mucus was frequent; the muscles were markedly relaxed. The usual remedies were at once tried, but as the patient was quite unable to swallow, nothing could be taken by the mouth. A hypodermic injection of apomorphine was given, which immediately increased the vomiting, and some food, mixed with the brown acid, and smelling strongly of the latter, was ejected.

On inquiry it was found that a bottle, containing 10 ounces of crude brown carbolie acid had been purchased, and of this acid 4 ounces had evidently been poured into a tumbler and swallowed. There were no marks upon the skin round the mouth, but the mucous membrane of the lips, etc., was brown and dry. The tongue protruded slightly between the teeth.

In six hours the patient became conscious, although unable to speak. She passed a quantity of dark brown urine, and the bowels moved frequently, the colour of the motions being pale yellow. She now became very restless and ex-

cited, and drank milk greedily. In this condition she remained all night. Next morning her breathing was very hurried, but she was conscious, and in a whisper admitted to having bought the poison from a chemist. She complained of pain in the throat and stomach. The pupils were now somewhat dilated. At 4 P.M. of the day following the taking of the poison violent pains came on in the abdomen, and the patient again became unconscious. From the character of the pains I diagnosed a speedy miscarriage, although there was no vaginal discharge; and at 7 P.M. a 5-months' child was born, the placenta following in its entirety as in a normal labour. There was no hæmorrhage worth noting.

The patient shortly again became conscious, remaining quiet and appearing to be better. The skin of the chin and round the mouth showed brown stains, and was dry and cracked, particularly at the angles of the mouth, where the tumbler had evidently fitted. In a few hours the breathing again became laboured, the pulse began to fail, and death occurred at 7 A.M. the following day, exactly forty-one hours from the time of taking the fatal dose. No *post-mortem* examination was obtained.

The chief points of interest in this case are (1) the large dose of the crude acid taken, (2) the non-staining and non-whitening of either the skin or mucous membrane for several hours, (3) the rallying of the patient and the marked relapse into unconsciousness, (4) and the time of the abortion, with the complete nature of this.

J. STITT-THOMSON, M.D., F.R.C.P.E., F.R.C.S.E.

Lincoln.

CASE OF OBSTRUCTED LABOUR DUE TO OCCLUSION OF THE OS UTERI.

On the forenoon of June 2nd, 1896, I was somewhat hastily summoned to Mrs. A., whom I found had been in labour for the past ten hours, this being her first confinement. She had been married about 18 months, was about 21 years of age, and seemed a healthy and fairly developed woman.

I found no evidence of a "show," although the attendants said there had been some; with the finger I explored the vaginal cavity, and found that the head was well down, covered at every point by the walls of the uterus, but no vestige of a cervix or os uteri. The vagina was, in fact, a veritable *cul de sac*, and I came to the conclusion that I had for the first time in twenty-eight years, and with an experience of over one thousand cases, met with one instance of the so-called occlusion of the os uteri.

As the patient was a primipara I resolved to wait a few hours, until more decided uterine contractions set in. Seven hours after my first visit, on vaginal and recto-vaginal and ventro-vaginal examination, I found matters still the same—no "show" and no os uteri or its representative to be found, but the pains were more regular in their character, and more in the fundus uteri, and the patient was getting exhausted, lapsing into sleep between the pains.

On ocular examination I found a small congested point on the uterine wall, about the usual site of the os. I took the blunt end of a hairpin, flattened it, and used it as a probe, and found a minute aperture, which I dilated with the extempore director, and found I could pass it round between the uterine wall and the child's head. I then dilated with the finger at intervals, the pains increased greatly, and I found a precipitous rupture through the recto-vaginal septum. I supported the perineum, applied the short forceps, and terminated the case, with safety to mother and child, the whole case lasting twenty-six hours.

Chatham.

WALTER R. S. JEFFERISS, M.D.

SUCCESSFUL AMPUTATION BELOW THE KNEE- JOINT FOR SENILE GANGRENE.

HAVING seen some time ago the aged subject—a man—of this operation hale and cheerful, I consider a memorandum of the case worth recording.

Six years ago I was called to the patient, then aged 75 years. Gangrene had set in in the right foot, the consequence of a slight abrasion. This quickly engaged the dorsum of the foot, and crept up above the ankle, where after a time a partial line of demarcation formed.

Assisted by my brother and a nurse I amputated below the

knee-joint. The arteries resembled the stems of clay pipes, and barely allowed of the constriction needful to obliterate their lumen; with the exception of a slight slough union soon became perfect.

This case is in opposition to modern teaching, and to the wide experience of Kuster, who, it is stated, in every case of senile gangrene¹ had to resort, early or late, to the high operation (above the knee).

Finsbury Pavement, E.C.

JAMES MACMUNN.

SUBSPINOUS DISLOCATION OF THE SHOULDER.

A SHORT time ago I was called to a man, aged 67, who had been thrown out of his trap by the shying of his horse. I found him sitting in a low chair, with his elbows both resting on his knees. He was leaning forward so as to allow his hands to support his head. I found a subspinoous dislocation of the right shoulder. The head of the bone was most evident below the spine of the scapula, while the elbow could not be approached to the side. Reduction was very easy by ordinary manipulation.

I report this case as I find on reference that this form of dislocation is very rare, and in Treves's *System of Surgery*, vol. i, pages 971 and 972, the position of the arm is not very clear if we compare the description and the figure 386. On page 978 it is said that reduction is difficult. The rarity is also noted in Erichsen, vol. i, page 324. There was, too, an ordinary Pott's fracture of the left ankle.

WILLIAM HAMMOND, L.R.C.P.Ed., M.R.C.S.Ed.

Liskeard, Cornwall.

REPORTS

ON

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

UNIVERSITY COLLEGE HOSPITAL.

CASE OF ANTIFEBRIN POISONING.

(Under the care of Dr. SYDNEY RINGER, F.R.S.)

[Reported by ALFRED DIMSEY, M.B., B.S.Lond., late House Physician, University College Hospital.]

M. M., aged 28, married, was admitted on December 18th, 1895, complaining of headache and a peculiar blueness of the skin. For two years she had been under treatment more or less constantly with headache. Under pressure, patient admitted that on her own account, and unknown to her medical attendant, she had been in the habit of taking during the last six months a remedy known as "Ellis's Daisy Headache Powders." At first she only took them when the pain was severe, but during the last month she had taken as many as six powders a day, during which period her friends had noticed her complexion had changed colour. It has since been ascertained that her medical attendant had not given the patient any antifebrin or allied bodies.

I wrote to the chemist for some of the powders the patient was in the habit of taking, and Mr. Elborne, B.A., of University College Hospital, who kindly analysed them, found them to consist of pure antifebrin. Each powder weighed 10 grains.

Patient, a well-nourished woman, had no distress. Her skin generally was very moist, and presented a peculiar bluish-grey tint, which colour was particularly well marked in the ears, lips, tongue, and in the extremities below the metacarpal phalangeal joints. The conjunctivæ also presented a bluish hue. The right pupil was a trifle larger than the left. There was no paralysis anywhere, and the reflexes were all brisk. There was no optic neuritis. The circulatory system was normal; pulse 84, regular in force and rhythm. The respiratory system was normal except for slight emphysema. The respirations were 20, and there was no distress. The digestive system was normal. The stools were rather dark, but otherwise normal. The temperature was normal.

On pricking the finger the blood that escaped was of a dis-

tinctly darker hue than natural, and had a somewhat purplish tint. Microscopically nothing abnormal was noticed.

Spectroscopically nothing abnormal was found. No methæmoglobin absorption band was seen.

The patient was given mild laxatives and diuretics.

On December 21st oxygen inhalations were given for 15 minutes without any effect on the colour of the patient.

On January 2nd she was discharged, to attend in the future as an out-patient. During her stay in the hospital she suffered severely from headache. From time to time the urine was examined, and was found normal. On several occasions it was tested for aniline, with a negative result. When she left the hospital the blue tint was slightly less marked than on admission.

The patient has been seen since at intervals, and the blue coloration is gradually diminishing, and at the present time is scarcely noticeable.

SHOREDITCH INFIRMARY.

A CASE OF EXOPHTHALMIC GOITRE TREATED BY THYMUS GLAND.

(By CHARLES TODD, B.A., M.B., B.C.Camb.)

THE value of the thymus gland in the treatment of exophthalmic goitre being at present *sub judice*, the following case is of interest:

E. D., a delicate-looking girl of 22, was admitted on May 16th, 1895, with well-marked symptoms of exophthalmic goitre. Her family history was interesting. Her father died of heart disease, "the result of fright due to a gas explosion"; her mother was alive but subject to epileptic fits. One sister had been in the infirmary suffering from myxœdema, and recovered completely under treatment with thyroid tablets. The patient attributed her present trouble to a fall from a window when 16 years old (six years before admission), since which time she had never been completely well. She had noticed palpitation for three years, and the swelling of the neck about a year later. She was a general servant up to the end of December, 1894, but was very delicate, and was then obliged to go home and lie up. She remained at home a month, then went to the Victoria Park Hospital, where she remained three months and then came to Shoreditch Infirmary. Since her admission to the infirmary she has been treated at different times with iron, belladonna, arsenic, digitalis, strophanthus and other drugs, with local applications of iodine, belladonna, ice, etc., without more than slight temporary benefit.

On September 29th, 1895, her pulse was 156 and very irregular, both in force and frequency. The apex beat was visible in the sixth space, $1\frac{1}{2}$ inch inside the nipple line. The heart sounds were irregular and tumultuous but no definite murmur could be made out. The pulsation over the cardiac area was very violent. The thyroid was symmetrically enlarged, with evident pulsation and a loud *bruit* audible over it. Exophthalmos was marked but not excessive. Von Graefe's sign was not well marked. She was much distressed by the palpitation and suffered greatly from insomnia.

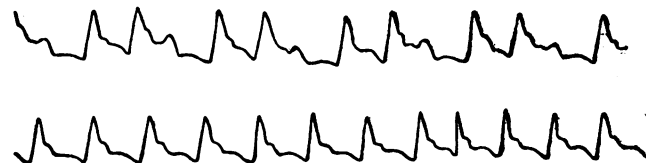


Fig. 1.—Tracing of pulse before thymus treatment; pulse 150.

Fig. 2.—Tracing of pulse after three days' thymus treatment; pulse, 129.

As she was obviously getting worse, I was led to try the effect of thymus gland. This was commenced on September 30th. Thirty grains of the dried gland were given in the form of compressed tabloids. The pulse at once began to fall in frequency, and on the third day of the treatment had fallen to 130, and was quite regular. On October 4th she expressed herself much better, and the pulsation over both the cardiac area and the thyroid was certainly less violent. The treatment was continued, the amount of thymus given being gradually increased up to 100 grains a day. At the end of three weeks the pulse had fallen to 72, and was quite regular, the pulsation over the cardiac area and the thyroid

¹ Medical Annual, 1893.

Munk), of which house he was one of the Senior Fellows. He proceeded: A.B., 1554-5; A.M., 1558; M.D., 1568; was four years Bursar of his College, and twice held Linacre's Lectureship. He was a Fellow of the College of Physicians, but of the date of his admission we can furnish no particulars. He was Censor in 1581, 1582, 1583, 1584, 1585; Elect February 5th, 1587; Consiliarius 1588, 1601, 1602; and President for eleven consecutive years, namely, from 1589 to September, 1600, when he was succeeded by Dr. Gilbert. He was the first Treasurer of the College, and was appointed to this newly-created office November 14th, 1583, and continued to hold it until September, 1586. He was reappointed 1604, 1605, 1607. Dr. Baronsdale was dead June 17th, 1608, when he was succeeded as Elect by Dr. Moundeford.

RAILWAY SERVANTS' EYESIGHT: TWO CASES OF "HARD LINES."

SIR,—The two following cases recently occurred in my practice. The men consulted me as to whether anything could be done to remedy their defects of vision. Case I was aged 43 years, and had been twenty years in the service; he was "passed" as to eyesight on five different occasions, and was suspended about ten days ago because he could not pass the "dot" test. Case II was aged 52 years, and joined the service in 1861, was "passed" on five different occasions as sound in vision, and was suspended on June 17th, 1896, not for defective distant vision, but for colour blindness, which, when I examined him, was found non-existent.

CASE I.—A. C. B., aged 43: R. $\frac{1}{8}$ (1) = - 1.25 = - 2.75 cy 85° (= $\frac{1}{2}$ (5). L. $\frac{1}{8}$ (1) = - 1.25 = - 2.25 cy 110° = $\frac{1}{2}$.

CASE II.—W. F., aged 52: R. and L. $\frac{1}{12}$ (2) c. + 1 = $\frac{1}{2}$. Colour blindness absent as tested by Holmgren's wools.

Both the above are earning 45s. per week or more as drivers, and if the suspension is confirmed will be put on ordinary labourer's wages, say, of £1 per week. All the examinations were made by unqualified persons, namely, railway servants, who naturally are ignorant of such things as refraction and accommodation. The myopic astigmatism case was missed over each time he was examined, and Case II, diagnosed as colour blindness which did not exist, was a simple case of latent hypermetropia becoming manifest, and not found out at all, as he passed the "dots" well.—I am, etc.,

Bath, June 28th. HENRY G. TERRY, M.R.C.S., F.R.C.S.E.

CONSULTANTS AND PRACTITIONERS.

SIR,—Complaint has often been made of consultants attending patients after being called in by the regular medical adviser. Personally, I would not object, provided the consultant charged a higher fee than the ordinary practitioner. But it is very hard to compete against such men as honorary and acting physicians and surgeons of a large hospital and holding lectureships in a medical school, who visit for 1s. 6d., and do midwifery under £1. What is more aggravating, these men of mature years pass resolutions against accepting clubs at 2s. 6d. per member per annum. Is there any other city of the size and importance of Dundee where such a state of matters exist?—I am, etc.,

Dundee, July 18th.

ROBERT MILLER.

AN ANGRY JUDGE.

SIR,—*Apropos* of your comment in the BRITISH MEDICAL JOURNAL of July 18th on the moderation of "one of the first men in his profession" when treating the Recorder of Dublin for a broken leg, the following extract from a letter I received from the manager of the Star Life Assurance Society may be of interest as showing how the first men in the profession inflict injury on the profession. I remonstrated with him for remitting me a half-guinea for examining a life for assurance, pointing out that whether the sum assured for was large or small, the medical examiner's work and responsibility were just the same. He replied: "I may say that one of the most eminent consulting physicians in Dublin informed me that the work was generally amply recompensed with 10s. 6d., and that the guinea fees averaged enough to pay for the extra trouble sometimes given in older lives."

From this it appears that moderation (!) is not confined to Yorkshire.—I am, etc.,

Galway, July 21st.

R. J. KINKEAD.

OBITUARY.

HENRY MOORE BOWMAN, M.D.LOND.

THIS promising young physician was found dead in his bed on the morning of July 17th. His health—never robust—had been weakened by influenza. The heart was found extremely hypertrophied, weighing 14½ ozs., and Mr. Jackson Clarke, who made the examination, considered that this morbid condition fully accounted for the suddenness of Dr. Bowman's decease. The inquest was held on July 18th, the verdict being "Death from Natural Causes."

Dr. Bowman was a son of the Rev. Isaac Bowman, the present vicar of St. Paul's, New Southgate. He was born in Westmorland in 1866. The reverend gentlemen, with whom all must sincerely sympathise, informs us that Dr. Bowman and his brother "both read with me entirely, and as neither of them was robust, and as I believed in late development, I did not begin to teach them till they were 12 and 11 years old respectively, Harry being the younger; nor did I fix the amount of their work. I simply asked Harry to do thoroughly all that he did, so that it might not need to be repeated, and he always repaid my trust. All that was done was accurate and painstaking, and in this way he laid the foundation of his future acquirements."

Dr. Bowman certainly did credit to the system on which he was educated and to his teacher. He distinguished himself, much to his own surprise, as a student; and after taking several academic honours and filling appointments on the house staff at St. Bartholomew's Hospital he became Assistant Demonstrator of Physiology and Pharmacy to the Medical School of that institution. He was also, at the date of his death, Assistant Physician to the Royal Hospital for Diseases of the Chest, City Road. He distinguished himself by some writings of high merit, including a memoir "On Diseases of the Spinal Cord" in *Brain*, 1894, and a paper of considerable importance on "Congenital Absence of both Pectoral Muscles" in the thirtieth volume of the *St. Bartholomew's Hospital Reports*. His sudden decease has been keenly felt by his colleagues at his hospital, where he was extremely popular.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF GLASGOW.

FOURTH (FINAL) PROFESSIONAL EXAMINATION FOR THE DEGREES OF BACHELOR OF MEDICINE (M.B.) AND MASTER IN SURGERY (C.M.). The following candidates have passed this examination:

(a) *Candidates who took Pathology in Final Professional Examination.*—

T. Angus, J. Bain, T. W. Bayne, G. A. Brown, J. A. C. Doonan, F. Elliott, A. F. W. Gunn, J. Hunter, E. B. Jago, C. Lawson, J. Marshall, J. Morton, J. McClure, J. C. McClure, A. McP. McIntosh, A. A. McNab, A. Robertson, M. W. Symington, R. T. Wood.

(b) *Candidates who passed Pathology in Third Professional Examination.*—

J. F. Agnew, W. Allen, S. Anderson, B.Sc., W. B. Armstrong, H. H. Borland, J. T. Bowie, W. Brown, J. Butler, C. H. Cairns, H. Calderwood, B.Sc., M. Campbell, J. L. Carstairs, M.A., T. Cochrane, P. L. L. Craig, M.A., B.Sc., J. B. Cumming, T. M'G. Fletcher, J. Gardner, D. M'Glen, J. Gordon, J. Green, W. Hansen, A. Iredale, J. Knight, A. Mason, J. W. Munro, W. M. Farlane, J. M'Gowan, J. S. M'Kendrick, T. D. Newbigging, W. S. Paterson, S. Prior, A. Scott, J. C. Taylor, H. H. Thomson, A. Vost, H. K. Wallace, B.Sc., J. Weir, H. Whitehouse, A. C. Wilson, B.Sc., J. E. Wilson, H. Yearnshaw. Women.—E. E. Goodrich, M. B. Hannay, M. S. Maclean, M. Ransome, R. H. M. Stewart.

The following degrees were conferred on July 21st:

Doctors of Medicine (M.D.).—F. Dittmar, M.A., M.B., C.M. (thesis, Scarlatinal Albuminuria); A. A. Gray, M.B., C.M. (thesis, An Investigation into Some of the Principles of Auscultation); A. T. Nisbet, M.B., C.M. (thesis, Observations on some Cases of Liver Abscess); J. Todd, M.B., C.M. (thesis, Puerperal Scarlatina); J. Brown, M.B., C.M. (thesis, On some Complications of the Puerperal State, with Notes of Cases); W. Brown, M.B., C.M. (thesis, Treatment of Acute Dysentery with Pulv. Ipecac. sine emetine); J. R. Bryce, M.B., C.M. (thesis, Modified Hydropathy); H. Dickie, M.A., M.B., C.M. (thesis, The Antiseptic Treatment of Cholera Infantum and Allied Diseases); A. Inglis, M.B., C.M. (thesis, Salol as an Antiseptic in cases of Gastro-intestinal Catarrh); H. Kelly, M.B., C.M. (thesis, Chronic Metritis: its Frequency, Nature, and Treatment); W. Robertson, M.B., C.M. (thesis, Infantile Cerebral Paralysis); P. A. Smith, M.B., C.M. (thesis, Pneumonia: How most successfully Treated in General Practice); D. Stiell, M.B., C.M. (thesis, Notes upon Prevalent Fevers (particularly Enteric) occurring amongst British Troops in Egypt); R. R. Young, M.B., C.M. (thesis, The Pancreatic Treatment of Diabetes Mellitus).

Bachelors of Medicine and Masters in Surgery (M.B., C.M.).—J. Knight, M'G. Speirs Maclean, S. Anderson, B.Sc., H. Calderwood, B.Sc.,

J. S. M. Kendrick,* J. A. Hope,* J. F. Agnew, W. Allen, T. Angus, W. B. Armstrong, J. Bain, T. W. Bayne, H. H. Borland, J. T. Bowie, G. A. Brown, W. Brown, J. Butler, C. H. Cairns, M. Campbell, J. L. Carstairs, M. A. T. Cochrane, P. L. L. Craig, M. A., B.Sc., J. B. Cumming, J. A. C. Doonan, F. Elliott, T. M. G. Fletcher, J. Gardner, D. M. I. Glen, Edith Ellen Goodrich, J. Gordon, J. Green, A. F. W. Gunn, W. Hansen, Mary Baird Hannay, G. D. Hunter, J. Hunter, A. Iredale, E. B. Jago, C. Lowson, J. Marshall, A. Mason, J. J. Morton, J. W. Munro, J. M. Clure, J. C. M. Clure, W. M. M. Farlane, J. M. Gowan, A. MacP. McIntosh, A. A. McNab, T. D. Newbigging, W. S. Paterson, S. Prior, Mildred Ransome, A. Robertson, A. Scott, M. W. Symington, Roberta Henrietta Margueretta Stewart, J. C. Taylor, H. H. Thomson, A. Vost, H. K. Wallace, B.Sc., J. Weir, H. Whitehouse, J. E. Wilson, R. T. Wood, H. Yearshaw.

† Mr. Knight gains the Brunton Memorial Prize of £10, awarded to the most distinguished graduate in medicine of the year.

* With commendation.
† Honours.

UNIVERSITY OF ABERDEEN.

APPOINTMENT OF EXAMINERS.—The following additional examiners for degrees were appointed as from February, 1897, by the University Court at its last meeting:—*Botany*: Robert Turnbull, B.Sc., Edinburgh, for two years. *Zoology*: J. R. Ainsworth Davis, B.A. Cantab., University College, Aberystwyth, for three years. *Chemistry*: P. Phillips Bedson, B.Sc. Lond., Durham College of Science, Newcastle-on-Tyne, for two years. *Anatomy*: Thomas Wardrop Griffith, M.D. Aberd., Yorkshire College, Leeds, for one year. *Physiology*: William H. Thompson, M.D., Queen's College, Belfast, for one year. *Materia Medica*: Ralph Stockman, M.D. Edin., School of Medicine, Edinburgh, for four years. *Medical Jurisprudence and Public Health*: Frederick W. Barry, M.D., D.Sc. Edin., Medical Inspector to the Local Government Board, London, for two years. *Pathology*: William Bulloch, M.D. Aberd., of the Institute of Preventive Medicine, London, for four years. *Surgery*: Charles Cathcart, M.A., M.B. Edin., for four years.

SOCIETY OF APOTHECARIES OF LONDON.

PASS LIST, July, 1896.—The following candidates passed in:—*Surgery*: G. L. Atkinson, King's College; C. N. Barton, St. George's; T. B. Bokenham, St. Bartholomew's; P. M. Brittain, St. Bartholomew's; A. M. Browne, Royal Free; F. M. Cooper (Intermediate), Royal Free; J. H. Crawshaw, Leeds; W. A. Davidson, London; C. Franks, Westminster; J. Gott, King's College; P. C. Higgins, Guy's; T. G. King, London; H. R. Marsh, Guy's; F. E. Marshall, Liverpool; S. R. Merry, Charing Cross; A. W. Shea, Sheffield and Dublin; R. E. Turner, King's College.

Medicine, Forensic Medicine, and Midwifery: G. L. Atkinson, King's College; M. I. Baker, St. George's; J. C. Cook, Middlesex; C. Franks, Westminster; S. H. Green, Charing Cross; C. G. Higginson, Manchester; H. Hughes, Liverpool; F. E. Marshall, Liverpool.

Medicine and Forensic Medicine: C. A. A. Coulthard, St. George's; A. C. McLean, King's College.

Medicine: S. E. H. Martin, Royal Free; W. O. Piper, Westminster; G. S. Taylor, Manchester.

Forensic Medicine and Midwifery: A. N. Clemenger, St. George's.

Forensic Medicine: F. Adams, St. Thomas's; T. Gregg, St. Bartholomew's.

Midwifery: E. J. O'Meara (Intermediate), Guy's; W. L. Roberts, St. Mary's.

The diploma of the Society was granted to the following candidates:—Messrs. Atkinson, Barton, Cook, Coulthard, Crawshaw, Franks, Higginson, Hughes, King, Marshall, Merry, Piper, Roberts, Taylor, Turner, and Miss Browne.

MEDICO-PARLIAMENTARY.

HOUSE OF LORDS.

PUBLIC HEALTH (PORTS) BILL.

LORD HARRIS moved the second reading of this Bill. He said its object was to facilitate the action that had to be taken when a ship on coming into port was reported by a medical officer to be in an insanitary condition. At present it was necessary to move the local authority to send an order, but it had been pointed out by the Local Government Board that the Act of 1890 (the Infectious Diseases Prevention Act) provided a far more simple procedure. The Board, therefore, had introduced legislation which would practically put a ship in the same position as regarded treatment of this kind as a house. That was the object of the measure, and the result of it would be that upon a medical officer presenting a certificate that the ship was in an insanitary condition, it could be sufficient for the clerk to the local sanitary authority to give orders to the captain to have the vessel cleansed at once. There was also a provision in the Bill that should the captain not be able to do so, the local sanitary authority could undertake to do the work at its own expense. The Bill was read a second time.

HOUSE OF COMMONS.

THE NEXT EXAMINATION FOR THE ARMY MEDICAL STAFF.

CAPTAIN NORTON asked the Under-Secretary of State for War how many names of candidates for the next examination for Army Medical Staff in August had been received, and what were the completed ages of these candidates. **MR. BRODRICK**: A large number of applications have been made for information as to the examination, and as to the qualifications necessary. As the list does not close till July 30th, and as most of the candidates usually apply in the last week, a statement of the number of names at present sent in would be misleading.

BARRACK SCHOOLS: THEIR INSPECTION.

MR. JAMES STUART asked the Vice-President of the Committee of Council on Education whether he would take such steps as might be

necessary to place under the inspection of the Education Department the education of the children in those Poor-law schools where the guardians desired to transfer such inspection from the Local Government Board to the Education Department, and where the Local Government Board assented.—**SIR J. GORST** said that from 1846 to 1863 the Committee of Council inspected the educational part of the work of Poor-law schools; but the arrangement was found to cause so much friction that in 1863 these inspectors were transferred to the Poor-law Board. The Committee of Council doubted the expediency of separating the educational from the other inspection of these schools; but they were in communication with the Local Government Board upon the subject.—**MR. J. STUART**: May I ask whether the right hon. gentleman's attention has been drawn to the report of the recent Commission on Poor-law Schools in which it was said that the educational work of those schools should be brought under the supervision of the Education Department, and whether the right hon. gentleman signed that report?—**SIR J. GORST**: Yes, sir, I am aware of that report; I signed it myself.

THE PREVENTION OF ANTHRAX.

In reply to **MR. FORTESCUE FLANNERY**, the HOME SECRETARY said: The special rules which have been suggested by the Dangerous Trades Committee, and which I propose to adopt, are based on the Bradford regulations, with some modifications and additions. The rules will apply, like the Bradford regulations, to all kinds of wool, in so far as they require that all bales shall be opened by skilled persons, but in other respects they will apply to those cases only that are dangerous. When they are issued there will be ample opportunity for both offering and considering objections; but in view of the general acceptance for many years past of the Bradford regulations, and of the desire which has been expressed that they should be given the force of special rules, I hope that no serious opposition will be encountered.

RABIES AND DOG MUZZLING.

MR. HENNIKER HEATON asked the President of the Board of Agriculture whether the Departmental Committee, appointed to inquire into the dog laws, would take evidence as to the inefficacy of the muzzle in preventing rabies or dogs from biting; whether evidence of that nature had been tendered, and when it was likely to be taken; and whether any special payments were made to the police for what they did in regard to dogs under the muzzling orders, and, if so, to what amount and on what principle were such payments awarded?—**MR. LONG**: I understand that evidence as to the value of muzzling for the purpose of preventing the spread of rabies has already been received by the Departmental Committee, and that further evidence on the same subject has been tendered and will be given at the next and succeeding meetings. It rests with the various police authorities to determine whether special payments should be made for work done under muzzling orders, and no general information on the subject is available. I may state, however, that in the metropolis no such payments are made, but certain fees taken on the restoration of dogs to their owners are paid into the Police Pension Fund.

TREATMENT OF THE INSANE IN IRELAND.

MR. M'CARTAN asked the Irish Secretary whether his attention had been called to the proceedings at an inquest held in Belfast Workhouse into the death of an inmate named Eliza Jane Hanna, in which it appeared that the deceased had been a patient in Belfast Asylum; would he state when and under what statute she was transferred to Belfast Workhouse; whether she belonged to the Belfast Union, and, if not, under what authority did the guardians of the poor there admit her and keep her confined in Belfast Workhouse at the expense of the ratepayers of Belfast; whether Belfast Workhouse had ever been certified by the inspectors of lunatics or the Board of Control as a suitable and proper place for the reception of the insane; whether he was aware that the doctor of the workhouse swore at the inquiry that the patient was transferred without any consultation between the doctors of the two institutions, and that the recreation yard at the workhouse was so small and usually so noisy that it had been described by one of the inspectors as a pandemonium; and whether he would have full inquiry made into the matter.—**MR. G. BALFOUR**: My attention has been drawn by the question to the proceedings at the inquest referred to in the first paragraph. The clerk of the union states that the woman was received into the workhouse in December, 1893, as a presumably destitute person in exchange for another person sent from the workhouse to the lunatic asylum. The woman did not belong to the Belfast Union. The reply to the fourth paragraph is in the negative. No such certificate is required. As to the fifth paragraph, no consultation is held regarding the condition of patients between the medical officers of the two institutions. I understand the medical officer of the workhouse stated at the inquest that he had heard that the inspector of lunatics had described the recreation yard in the manner mentioned, but I have not ascertained from the inspector of lunatics whether he has been correctly reported.

THE SLAUGHTER OF THE INNOCENTS.

The process of weeding out the measures which the period of the year and the exigencies of Government business render it impossible to place on the Statute Book during the current session has commenced in good earnest. Several days ago in the House of Commons the order for the second reading of the Public Health (Scotland) (No. 2) Bill, which measure has passed the House of Lords, was read and discharged, also the order for the second reading of the Women Bar Assistants (Limitation of Hours) Bill, and the order for the second reading of the Juvenile Offenders (Whipping) Bill, which measure, like the first mentioned, has also passed the House of Lords. Mr. Balfour, a few days after, in asking for special privileges for the furtherance of Government business, mentioned amongst the departmental Bills which must be passed the Friendly Societies Bill and the Collecting Societies Bill, two consolidation measures. He indicated a number of Bills which Ministers had no hope of passing if opposition were offered to them, and amongst them he placed the London University Bill, the Housing of the Working Classes (Scotland) Bill, and the Public Health Bill. The right hon. gentleman declared that no private member's Bill to which there was the slightest opposition would have any chance of coming on

MEDICAL NEWS.

THE "hanging" exhibition at the Westminster Aquarium has wisely been abandoned.

THE Metropolitan Hospital Sunday Fund has reached the sum of £43,000. This sum includes £1,000 which has been promised by Sir Savile Crossley as a further donation.

IN order to assist the funds of the Newcastle Infirmary it is intended to hold an exhibition of inventions in Newcastle next year.

ST. JOHN AMBULANCE ASSOCIATION.—Mr. Frank Shapley, M.R.C.S. (Lecturer to Classes held at Sidcup), was on July 1st, 1896, presented with an illuminated address signed by sixty-five pupils, and a Dollond's binocular glass.

AT a recent meeting of the Departmental Committee appointed by the Board of Agriculture to inquire and report upon the laws relating to dogs Professor Victor Horsley gave evidence on behalf of the Society for the Prevention of Hydrophobia.

THE personal estate of Sir John Russell Reynolds, Bart., M.D., who died on May 29th last, has been sworn at £11,142 4s. 2d. gross and £9,675 16s. 3d. nett. The executors are his widow, Lady Frances Russell Reynolds, his brother, the Rev. Henry Robert Reynolds, and Mr. Kyme Wright.

THE number of persons who died from snake bite in the Punjab during the past year increased by 5 per cent. The measures for encouraging snake killing have been relaxed considerably since it was found that their effect was to encourage breeding as well, but a considerable sum is still paid in rewards.

A NATIONAL AMERICAN UNIVERSITY.—The Bill establishing a National University in the United States has been favourably reported by the Senate Committee. It grants a charter to the university, provides for its government, grants it the ground in the city of Washington designated by President Washington as a site for a national university, and appropriates 15,000 dollars for the fiscal year ending on June 30th, 1897, and 25,000 dollars for the year following.

THE Lewisham Board of Works at a recent meeting decided to make a formal application to the Lewisham Union Guardians to put in force the Vaccination Acts. At present there is a majority of antivaccinators on the Board of Guardians, and they have excused parents who have made application to be relieved from carrying out the Acts. In the event of the guardians continuing their present policy a mandamus is to be applied for by the Lewisham Board of Works.

THE annual dinner of the British Laryngological, Rhinological, and Otological Association took place at the Langham Hotel on July 17th, the president, Dr. George Stoker, being in the chair. The toast of "The Association" was proposed by Mr. Timothy Holmes, and "The Visitors" by Dr. Dundas Grant, response being made by the Rev. Canon Shore, Mr. Holmes, Mr. Mackellar, and by the foreign visitors—Dr. Frank Bosworth and Dr. Porcher, of the United States.

BRITISH INSTITUTE OF PUBLIC HEALTH.—The annual Congress of the British Institute of Public Health is this week being held in Glasgow. The Congress opened on Thursday at the University, the Lord Provost of Glasgow delivering a presidential address, which was followed by an address by Professor Ramsay, of University College. After luncheon in the St. Andrews Hall the delegates were driven to view the sewage precipitation works and other municipal undertakings, and in the evening the Lord Provost and Lady Bell gave a *conversazione* in the City Chambers. The arrangements for the Sections are that meetings are held in the morning, and on Friday afternoon a garden party is given by the Faculty of Physicians and Surgeons. Excursions by land and water are the order for Saturday. On Monday the Sections meet till 4 o'clock, and in the evening the Corporation entertain to dinner representatives of all the authorities sending delegates. The closing meeting will be held on Tuesday in the Bute Hall of the University.

THE BRITISH LOVE OF QUACKERY.—Professor Struthers, President of the Royal College of Surgeons of Edinburgh, in distributing the prizes to the successful students of the Incorporated Dental Hospital and School of Edinburgh on July 16th, remarked upon the changes that had occurred in the dental profession during the last half century. The greatest change had been brought about by the Dental Act of 1878, before the passing of which nobody knew whether a man was a dentist or a quack. The Act enabled the public to distinguish between the qualified and the unqualified, and gave the profession a status. The British public, however, loved to be quacked, and would never agree to prevent anybody practising medicine or dentistry, though they had a right to know who were qualified and who were not. The Act provided that anyone using a dental title to lead the public to believe he belonged to a qualified class when he did not, behaved illegally, but it could not prevent men practising dentistry and advertising certain statements such as "a complete set for one guinea."

MEDICAL VACANCIES.

The following vacancies are announced:

CENTRAL LONDON OPHTHALMIC HOSPITAL, 238A, Gray's Inn Road, W.C.—House-Surgeon. Rooms, coals, and lights provided. Applications to the Secretary before July 28th.

CENTRAL PROVIDENT DISPENSARY, Bedford.—Two Medical Officers. Applications to the Honorary Secretary by August 31st.

CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST, Victoria Park, E.—Resident Medical Officer. Salary, £100 per annum, with board, etc. Must be doubly qualified. Applications to the Secretary at the hospital by July 31st.

COUNTY ASYLUM, Shrewsbury.—Junior Assistant Medical Officer, not over 27 years of age. Salary to commence, £100 per annum (and £8 in lieu of beer, etc.), with board, lodging, and washing, rising to £120 at the end of two years' service. Applications to the Medical Superintendent at the Asylum by August 7th.

CUMBERLAND INFIRMARY, Carlisle.—House-Surgeon. Appointment for one year. Salary, £70 per annum, with board, lodging, and washing. Applications to the Secretary by August 11th.

DENBIGHSHIRE INFIRMARY, Denbigh.—House-Surgeon; doubly qualified and conversant with the Welsh language. Salary, £80 per annum, with board, residence, and washing. Applications to W. Vaughan Jones, Secretary, by July 30th.

EARLSWOOD ASYLUM FOR IDIOTS, Redhill, Surrey.—Medical Superintendent; aged 30 to 45. Salary, £500 per annum, with furnished residence in the building, together with coals and gas. Applications, endorsed "Medical Superintendent," to be addressed to the Board of Management, 26, King William Street, London Bridge, E.C., by August 18th.

GENERAL HOSPITAL, Nottingham.—House-Surgeon. Salary, £100 per annum, rising £10 a year to £120. Applications to the Secretary by August 8th.

HOLLOWAY SANATORIUM FOR THE INSANE, Virginia Water.—Junior Assistant Medical Officer. Salary, £100 per annum, with board, lodging, and laundry. Applications to the Medical Superintendent, Dr. Philipps, Virginia Water.

MILLER HOSPITAL AND ROYAL KENT DISPENSARY, Greenwich Road, S.E.—Junior Resident Medical Officer. Salary, £30 per annum, with board, attendance, and washing. Appointment tenable for six months, with prospect of re-election as Senior, at salary of £60. Applications to the Hon. Secretary or Secretary by August 6th.

NOTTINGHAM BOROUGH ASYLUM, Mapperley Hill, Nottingham.—Second Assistant Medical Officer, unmarried. Salary, £100 per annum, with apartments, board, washing, etc. Applications to the Medical Superintendent by July 27th.

OWENS COLLEGE, Manchester.—Assistant Lecturer and Demonstrator in Materia Medica and Pharmacy. Stipend £120 per annum. Applications to the Registrar by July 31st.

ROYAL EYE HOSPITAL OR ROYAL SOUTH LONDON OPHTHALMIC Hospital, Southwark.—House-Surgeon; will be required to take up residence about October 1st. Salary, £50 per annum, with board and lodging. Applications to the Secretary by August 1st.

ST. JOHN'S HOSPITAL FOR DISEASES OF THE SKIN, 49, Leicester Square, W.C.—Superintendent. Salary, £200 per annum. Applications to the Secretary.

SOUTHPORT INFIRMARY.—Assistant House and Visiting Surgeon, doubly qualified. Honorarium at the rate of £30 per annum. Residence, board, and washing provided. Applications to Joseph Worrall, Infirmary Office, Southport, by August 14th.

STAFFORDSHIRE GENERAL INFIRMARY, Stafford. Assistant House-Surgeon. Salary, £30 per annum, with board, lodging, and washing. Applications to the House-Surgeon by July 29th.

SUSSEX COUNTY HOSPITAL, Brighton.—Fourth Resident Medical Officer; doubly qualified, unmarried, and under 30 years of age. Salary, £30 per annum, with board, washing, and residence in the hospital. Applications to the Secretary by August 5th.

WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL, Wolverhampton.—Resident Assistant. Appointment for six months. Board, lodging, and washing provided. Applications, inscribed "Application for Resident Assistant," to be addressed to the Chairman of the Medical Committee by July 27th.

MEDICAL APPOINTMENTS.

- BODGER, S. M.D.Durh., M.B. B.S., appointed Medical Officer for the Studley District of the Alcester Union.
- BROWNING, B., M.R.C.S.Eng., L.R.C.P.Lond., D.P.H.R.C.P.Edin., reappointed Medical Officer of Health to the Weymouth District Council.
- BURGE, Frederick John, L.R.C.P.Lond., M.R.C.S.E., appointed Deputy Port Health Officer for Shanghai, China.
- COGAN, L. F., L.R.C.P.Edin., L.M., M.R.C.S.Eng., reappointed Medical Officer of Health to the Borough of Northampton.
- DALAL, R. D., M.R.C.S.Eng., L.R.C.P.Lond., L.M. & S.Bombay, appointed to act as Resident Medical Officer to Farringdon General Dispensary and Lying-in Charity, London, *vice* W. Jobson Horne, M.A., M.B.Cantab., on leave.
- DAUNT, F. E. H., L.R.C.P.I., L.R.C.S.Edin., reappointed Medical Officer for the No. 4 District of the Holborn Union.
- DAVIS, Henry J., M.A., M.B., B.C.Cantab., M.R.C.S., L.R.C.P.Lond., appointed House-Physician to the West London Hospital.
- DIX, Wm. Ralph, M.B., B.S.Dunelm., appointed Resident Medical Officer to the Workhouse, Poplar Union, E.
- ELLACOMBE, Gilbert W., M.R.C.S., L.R.C.P., appointed House-Surgeon to the West London Hospital.
- FARRANT, M., jun., M.R.C.S., L.R.C.P.Lond., appointed Medical Officer of the Workhouse of the St. Thomas's Union, *vice* H. T. Hartnoll, M.R.C.S.Eng.
- GIDLEY, G. G., L.R.C.P.Lond., M.R.C.S., reappointed Medical Officer for the Kentisbeare District of the Tiverton Union.
- GOLDIE, J. O., M.B., C.M.Edin., appointed Junior House-Surgeon to the West Ham Hospital, Stratford.
- GUNN, F. W., M.D., B.S., L.S.Sc.Dunelm., M.R.C.S., L.R.C.P., L.S.A., A.K.C., appointed Public Vaccinator to No. 4 District, Morpeth Union.
- HARDMAN, F. H., M.B., M.S.Edin., appointed Medical Officer of Health for the Teme (Hereford) Rural District.
- HOCKRIDGE, Thomas G., M.D., M.R.C.S.Eng., reappointed Medical Officer for the Clerkenwell District of the Holborn Union.
- KIDD, Harold Andrew, M.R.C.S., L.R.C.P., appointed Medical Superintendent of the West Sussex Asylum, Chichester.
- LANGLEY, W. J., L.R.C.P., L.R.C.S.Edin., appointed Medical Officer for the Banghurst and Tadley District of the Kingsclere Union.
- LITTLEWOOD, H., F.R.C.S.Eng., L.R.C.P.Lond., appointed an Honorary Surgeon to the Leeds Infirmary, *vice* R. N. Hartley, M.B.Lond., resigned.
- LUNDIE, R. A., M.A.Edin., B.Sc., M.B., F.R.C.S., appointed Assistant Medical Officer to the Longmore Hospital for Incurables, Edinburgh.
- NEWALL, W. A., M.B., Ch.B.(Vict.), appointed Resident Visiting Surgeon to the General Infirmary, Chester.
- PARTINGTON, William, M.B., C.M.Glasg., reappointed Medical Officer of Health to the Tunstall Urban Council.
- POIGNARD, M., M.D.Aberd., M.R.C.S., appointed Medical Officer of Health to the West Dean Rural District Council.
- TOBIN, J. J., M.D.R.U.I., M.B., M.Ch., appointed Deputy Medical Officer of Health for the Borough of Ilkerton.
- WEBB, Frank, M.R.C.S., L.R.C.P., appointed Medical Officer of Health to the Newcastle-under-Lyme Town Council, *vice* W. H. Hallam, L.R.C.P.Edin., M.R.C.S., resigned.
- WOODFORD, Dr., appointed Medical Officer of Health to the Hungerford Rural District Council.
- WOOLRIGHT, A. P., L.S.A.Lond., Junior House-Surgeon, appointed Senior House-Surgeon to the West Ham Hospital, Stratford, E., *vice* Mr. Hillier, 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 ensure insertion in the current issue.

BIRTHS.

- DIXON.—On the 10th instant, at Eccleshall, Staffs, the wife of Thomas Dixon, M.R.C.S.Eng., L.R.C.P.Lond., of a son.
- RAYNER.—On the 10th instant, at Harcourt House, Camberley, the wife of Herbert E. Rayner, F.R.C.S., of a daughter.
- REECE.—On July 10th, at 31, Holland Villas Road, W., the wife of Richard J. Reece, M.D., of a daughter.

MARRIAGES.

- BRACEY—GOOLD.—On the 16th instant, at St. George's, Edgbaston, Birmingham, by the Rev. W. G. Heritage, of St. Mark's, Birmingham, William Edelman Bracey, L.R.C.P., etc., of Billinge, Wigan, second son of the late William Arthur Bracey, M.R.C.S., etc., of Birmingham, to Florence Marion, youngest daughter of the late John Canning Goold, of Handsworth, Birmingham.
- RHODES—LUCAS.—On July 15th, at the Parish Church, Dronfield, by the Rev. C. I. Bickerstaff, Vicar, assisted by the Rev. A. Wood, M.A., Vicar of St. Barnabas, Sheffield, Hugh Rhodes, M.D., of Highfield, Sheffield, to Henrietta, youngest daughter of the late Edward Lucas, Esq., of Rose Hill, Dronfield. No cards.

DEATH.

- BRETT.—On July 11th, at Watford House, Watford, Herts, Alfred Thomas Brett, M.D., C.C., aged 68.

HOURS OF ATTENDANCE AND OPERATION DAYS AT THE LONDON HOSPITALS.

- CANCER, Brompton (Free). *Attendances*—Daily, 2. *Operations*—Tu. F. S., 2.
- CENTRAL LONDON OPHTHALMIC. *Operations*—Daily.
- CHAMING CROSS. *Attendances*—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. *Operations*—W. Th. F., 8.
- CHELSEA HOSPITAL FOR WOMEN. *Attendances*—Daily, 1.30. *Operations*—M. Th. F., 2.
- CITY ORTHOPEDIC. *Attendances*—M. Tu. Th. F., 2. *Operations*—M., 4.
- EAST LONDON HOSPITAL FOR CHILDREN. *Operations*—F., 2.
- GREAT NORTHERN CENTRAL. *Attendances*—Medical and Surgical, M. Tu. W. Th. F., 2.30; Obstetric, W., 2.30; Eye, M. Th., 2.30; Throat and Ear, Tu. F. 2.30; Skin, W., 2.30; Dental, W., 2. *Operations*—W., 2.
- GUY'S. *Attendances*—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. *Operations*—(Ophthalmic) M. Th., 1.30; Tu. F., 1.30.
- HOSPITAL FOR WOMEN, Soho. *Attendances*—Daily, 10. *Operations*—M. Th., 2.
- KING'S COLLEGE. *Attendances*—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. *Operations*—M. F. S., 2.
- LONDON. *Attendances*—Medical, daily, exc. S., 2; Surgical, daily, 1.30 and 2; Obstetric, M. Th., 1.30; o.p. W. S., 1.30; Eye, Tu. F., 9; Ear, S., 9.30; Skin, Th., 9; Dental, Tu., 9. *Operations*—M. Tu. W. Th. S., 2.
- LONDON TEMPERANCE. *Attendances*—Medical, M. Tu. F., 2; Surgical, M. Th., 2. *Operations*—M. Th., 4.30.
- METROPOLITAN. *Attendances*—Medical and Surgical, daily, 9; Obstetric, W., 2. *Operations*—F., 9.
- MIDDLESEX. *Attendances*—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. *Operations*—W. F., 9.30; (Obstetric), Th., 2.
- NATIONAL ORTHOPEDIC. *Attendances*—M. Tu. Th. F., 2. *Operations*—W., 10.
- NEW HOSPITAL FOR WOMEN. *Attendances*—Daily, 2; Ophthalmic, W. S., 9.30. *Operations*—Tu. F., 9.
- NORTH-WEST LONDON. *Attendances*—Medical and Surgical, daily, 2; Obstetric, W., 2; Eye, W., 9; Skin, F., 2; Dental, F., 9. *Operations*—Th., 2.30.
- ROYAL EYE, Southwark. *Attendances*—Daily, 2. *Operations*—Daily.
- ROYAL FREE. *Attendances*—Medical and Surgical, daily, 2; Diseases of Women, Tu. S., 9; Eye, M. F., 9; Skin, Th., 9; Throat, Nose, and Ear, S., 9; Dental, Th., 9. *Operations*—W. S., 2; (Ophthalmic), M. F., 10.30; (Diseases of Women), S., 9.
- ROYAL LONDON OPHTHALMIC. *Attendances*—Daily, 9. *Operations*—Daily, 10.
- ROYAL ORTHOPEDIC. *Attendances*—Daily, 1. *Operations*—M., 2.
- ROYAL WESTMINSTER OPHTHALMIC. *Attendances*—Daily, 1. *Operations*—Daily.
- ST. BARTHOLOMEW'S. *Attendances*—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; Orthopaedic, M., 2.30; Dental, Tu. F., 9. *Operations*—M. Tu. W. S., 1.30; (Ophthalmic), Tu. Th., 2.
- ST. GEORGE'S. *Attendances*—Medical and Surgical, daily, 12; Obstetric, M. Th., 2; o.p. Eye, W. S., 2; Ear, Tu., 2; Skin, W., 2; Throat, F., 2; Orthopaedic, W., 2; Dental, Tu. S., 9. *Operations*—M. Tu. Th. F. S., 1.
- ST. MARK'S. *Attendances*—Fistula and Diseases of the Rectum, males S., 3; females, W., 9.45. *Operations*—M., 2; Tu., 2.30.
- ST. MARY'S. *Attendances*—Medical and Surgical, daily, 1.45; o.p., 1.30; Obstetric, Tu. F., 1.45; o.p. M. Th., 1.30; Eye, Tu. F. S., 9; Ear, M. Th., 3; Orthopaedic, W., 10; Throat, Tu. F., 3; Skin, M., 9.30; Electro-therapeutics, M. Th., 2.30; Dental, W. S., 9.30. Children's Medical Tu. F. 9.15; Children's Surgical, S., 9.15. *Operations*—M., 2.30; Tu. W. F., 3; Th., 2.30; S., 10; (Ophthalmic), F., 10.
- ST. PETER'S. *Attendances*—M., 2 and 5; Tu., 2; W., 5; Th., 2; F. (Women and Children), 2; S., 4. *Operations*—W. F., 2.
- ST. THOMAS'S. *Attendances*—Medical and Surgical, M. Tu. Th. F., 2; o.p., daily, 1.30; Obstetric, Tu. F., 2; o.p. W. S., 1.30; Eye, Tu. F., 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; Electro-therapeutics, o.p. Th., 2; Mental Diseases, o.p. Th., 10; Dental, Tu. F., 10. *Operations*—M. W. Th. S., 2; Tu. Th., 3.30; (Ophthalmic), Th., 2; (Gynecological), Th., 2.
- SAMARITAN FREE FOR WOMEN AND CHILDREN. *Attendances*—Daily, 1.30. *Operations*—W., 2.30.
- THROAT, Golden Square. *Attendances*—Daily, 1.30; Tu. F., 6.30. *Operations*—Th., 2.
- UNIVERSITY COLLEGE. *Attendances*—Medical and Surgical, daily, 1.30; Obstetrics, M. W. F., 1.30; Eye, M. Th., 2; Ear, M. Th., 9; Skin, W., 1.45; S., 9.15; Throat, M. Th., 9; Dental, W., 9.30. *Operations*—Tu. W. Th., 2.
- WEST LONDON. *Attendances*—Medical and Surgical, daily, 2; Dental, Tu. F., 9.30; Eye, Tu. Th. S., 2; Ear, Tu., 2; Orthopaedic, W., 2; Diseases of Women, W. S., 2; Electric, Tu., 10; F., 4; Skin, F., 2; Throat and Nose, S., 10. *Operations*—Tu. F., 2.30.
- WESTMINSTER. *Attendances*—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. *Operations*—Tu. W., 2.

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.