

us Dr. Firmin—alas! a fashionable humbug—but to contrast with him we have, both in *Philip and Pendennis*, Dr. Goodenough, the kind and honest physician. From Trollope we have the charming Dr. Thorne, honest man and faithful friend. Dickens in *Bleak House* has drawn a picture that we might style the “angelic doctor”—namely, Alan Woodcourt. Charles Kingsley portrays the rough diamond Tom Thurnall, a man who loves his profession both as art and science, who loathes disease, and likes prevention better than cure. Charlotte Brontë in Dr. John Graham Bretton, the secondary hero of *Villette*, has shown us the doctor as an accomplished man of the world, and dwells on his personal influence upon his patients. In Mrs. Gaskell's *Wives and Daughters*, and in Miss Martineau's *Deerbrook* we have two excellent types of first-rate country doctors.

But of all the doctors in the literature of this century, George Eliot's Lydgate in *Middlemarch* is the central figure. As a boy Lydgate experienced an intellectual passion for science, but he also loved the human aspect of his work as a doctor, and when, after a thorough medical education, he settles in the provincial town of Middlemarch, he is possessed by the twin ideals to do good small work for Middlemarch, but great scientific work for the world. With his newer lights he comes into contact with old-fashioned physicians and apothecaries, with the natural result that he becomes extremely unpopular. It is impossible to trace his struggles, but all who wish to know how small professional jealousies look to a large minded outsider should read and mark George Eliot's presentment of them in *Middlemarch*, and learn how Lydgate failed at Middlemarch, and how although he ended by becoming what the world calls a successful man, with a large fashionable practice, he yet always considered himself a failure because he had fulfilled neither of his ideals.

Recently, literature has been enriched by the vivid and pathetic picture of “A Doctor of the Old School,” by Ian Maclaren, in his volume of sketches entitled the *Bonnie Briar Bush*. After quoting the description of Dr. Maclure, Dr. Wills concluded by saying that the profession might fairly congratulate itself on the improvement in its social status that had taken place during the last 100 years. For if the literature of this century portrays doctors as worthy, lovable men, trustworthy and devoted like Dr. Thorne, it is because novelists have found them so in real life; if on the other hand, they satirise the little meannesses and jealousies to be found amongst doctors, it is for the same reason. Let it be the aim of each member of the profession to raise it higher, that it may never be said again, as it was in Thackeray's days, “he is only a doctor.”

## LONDON SCHOOL OF MEDICINE FOR WOMEN.

### THE ENDOWMENTS OF THE HUMAN BODY.

By A. BOYCE BARROW, M.B., F.R.C.S.,

Surgeon to King's College Hospital and to the Royal Free Hospital.

MR. BARROW, having expressed a hearty welcome, proceeded to speak to his hearers upon some of the endowments of the human body. Drawing their attention to the constant series of chemical changes going on in each cell of the body, and how these changes were concerned not only in the maintenance of the cell itself, but also in the manufacture of forces by which work could be done, he went on to show that the amount of energy produced depended upon the amount of food thoroughly consumed, just in the same way as the amount of power in a steam engine depends upon the amount of fuel consumed. He gave illustrations to show how any particular tissue could develop increased size and power by exercise, and that this increased power is associated with as storage of energy.

He advised the students to apply the lessons learnt from these examples to the training of their own mental powers so as to develop the various functions of the brain to the greatest state of perfection. He cautioned them, however, against exercising any one system of the body to the detriment of the others, explaining that there must be a certain proportion of chemical activity in all the tissues in order to maintain a satisfactory condition of health, and gave as a proof of such law the effect produced upon an individual by

the removal of the thyroid gland, and the restoration to health again of such individual by the administration of the thyroid glands taken from other animals. He also cautioned them that the energy produced in the body is a more or less common commodity, and, being used excessively by one organ, robs the others of some of their powers, giving as an instance that when much food is taken into the stomach it is liable to exhaust so much energy in digesting it that the individual is unfitted for any other kind of work, and sleeps.

He also pointed to the beneficial effect of exercise upon the organs concerned in maintaining the body, inasmuch as the increased employment of force means increased consumption of food, it calls upon the digestive, respiratory, circulatory, and other systems for increased work in order to supply this extra demand; and that the body can react and accommodate to such a demand is evidenced by the development and increase in functional activity of a kidney when its fellow has been removed, or the development of the heart to overcome a difficulty in the circulation.

He then spoke of another endowment of the body—the process of repair; and condemned the practice which has become so much the fashion, of rubbing and manipulation of an injured part, with the erroneous idea of causing the absorption of what may be called “Nature's splint.”

He then expressed his indebtedness to Sir Joseph Lister for having introduced a means of protection of this reparative process against the attacks of the bacterial inhabitants of the air and dust. He spoke of these organisms as a part of creation, and of their proper sphere of activity being to attack our dead bodies, and we must take care to guard ourselves against them when we are wounded or our tissues are slowly vitalised, and teach them to wait a little longer.

He concluded by congratulating them upon having given up the idea that it was an undignified thing for a woman to work—and especially upon their joining the medical profession, in which they were employing their energies in preparing for a calling of the highest and most responsible character, and one in which they could confer an appreciable benefit upon their fellow-creatures.

He thought they were fortunate in joining at the present time, when a doctor is no longer spoken of as a necessary evil; that they were fortunate in finding a lady's medical school so well established, and affording such ample opportunities for study; and he spoke in a very sanguine tone of their future success in practice, if they worked especially at the diseases of women and children, and thus gained the confidence of their own sex.

## MEMORANDA:

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

#### THE BENEFICIAL EFFECTS OF CYCLING AS AN ORTHOPÆDIC AGENT.

WE live in a cycling age, to such an extent that the public mind is getting almost nauseated with the arguments *pro* and *con*. this universally popular exercise which a vast section of the press obtrudes so unceasingly on our notice that, like the Athenians of old weary with the everlasting praises of Aristides the Just, many of us would fain be entertained at times with—anything else! But to the thoughtful mind everything offers a serious aspect, and accordingly I venture to submit to your readers a practical illustration of the beneficial effects of cycling.

For seven years a patient of mine has suffered with that essentially painful and disabling distortion, the over-riding of the right great toe by its minor neighbouring toe, which had to be kept in its normal position by the aid of constant strapping. Such overcrowding is by no means an uncommon source of distress, but its reduction in a very brief space of time is a rarity indeed. In a happy moment for herself my patient was led by the example of other young lady friends to take lessons in cycling, not in the least expecting so speedy and happy a result. After taking five lessons only, she is

now happily exempt from the necessity of any mechanical measures for keeping the overcrowding toe in its normal position, to which it has spontaneously returned.

I will not trespass on your valuable space with a long disquisition on the mechanism of this fortunate and unexpected cure. I simply seek publicity to this case for the benefit of brother practitioners with patients similarly afflicted, and I would strongly urge their prescribing in such orthopaedic cases a similar course of treatment.

J. BRINDLEY JAMES, L.R.C.P.I., M.R.C.S.,  
Surgeon, Municipal Throat and Ear Infirmary, City Road,  
Bridge Road, W.

## REPORTS

ON

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

#### EAST LONDON HOSPITAL FOR CHILDREN, SHADWELL.

##### A CASE OF POISONING BY CANNABIS INDICA.

(By JOHN ATTLEE, M.D.Camb., Clinical Assistant to the  
Hospital.)

T. T., aged 12, a well-grown but rather pale schoolboy, had been attending the Children's Hospital, Shadwell, as an out-patient, suffering with headache. Nothing organically wrong was found beyond slight anæmia and lack of tone, and he was accordingly ordered a tonic.

I saw him early on the morning of September 9th, 1895, and found him still suffering from headache. I prescribed for him 10-minim doses of the tincture of cannabis indica three times a day. He went at once to his home, which was about a hundred yards distant from the hospital. In about three-quarters of an hour he returned to the hospital, supported by his mother, who gave the following history:—

On reaching home her son at once took a dose of the medicine, and in a few minutes said he felt a burning pain in the pit of his stomach, and soon became strange in his manner, saying that his legs were jumping about, that he heard a ticking like a watch, that he saw the room on fire and the pictures falling down, etc. She then brought him back to the hospital with considerable difficulty, owing to his inability to walk by himself.

On admission he looked extremely ill, very pale, anxious, and distressed. He complained of no pain, but he was much collapsed. His pulse was 120—scarcely perceptible at the wrist. The pupils were dilated, but acted sluggishly to light.

He was at once laid on a couch, covered with blankets, and given two drachms of brandy in hot water, and immediately after this 10 gr. of citric acid in syrup of lemon. A blister was applied to the nape of the neck. He soon began to revive, his colour improved, and in about two hours and a half had recovered and said he felt quite well, his headache had gone, and he was able to walk back to his home.

On examining the bottle it was seen that the correct dose of medicine had been taken, and it was ascertained there was no mistake in the dispensing. Some of the tincture from the same dispensing bottle was given to another child the same morning, and subsequently with no ill effects. It was not a freshly-made tincture, having been in stock and in use for about two months.

REMARKS.—The interest of the case lies in the smallness of the dose which caused the poisoning, and also in the short duration of the symptoms. In looking up the literature on the subject I can only find one other case recorded of so small a dose causing toxic effects, and this was reported by Mr. Roche in the *Lancet* of 1871 (vol. ii, p. 493), and is mentioned in Taylor's work on Poisons. It was the case of a lady, aged 30, in which 7 minims caused narcotism. I am indebted to Dr. Hayward, whose out-patients I was taking at the time, for kindly allowing me to report this case.

## REPORTS OF SOCIETIES.

KIDDERMINSTER MEDICAL SOCIETY.—At a meeting on September 11th, Mr. WALTER MOORE, President, in the chair, Mr. J. L. STRETTON showed: (1) A girl, aged 12 years, whose Elbow Joint was excised in April; the usefulness of the limb had considerably increased. (A similar case in a boy was shown by Mr. DAVIES, for Mr. HODGSON MOORE.) (2) A man, aged 31 years, who ten weeks before admission met with an accident to the Elbow Joint. The skiagraph by Dr. Hall Edwards showed a dislocation forward of the radius and a multiple fracture of the head of the ulna (left). The arm was fixed and almost straight, the head of the radius being jammed against the anterior surface of the humerus, so that no flexion was possible and no rotation of the forearm. As the radius could not be returned its head was excised, and this allowed of considerable flexion and slight rotation. (3) Twenty-eight Calculi removed from a man, aged 76, by the suprapubic operation. He made an uninterrupted recovery. Mr. J. L. Stretton also read notes of a case of Subacute Rheumatism in a boy, aged 14 years, followed by chorea, endocarditis and pericarditis, bedsores, pneumonia, and death. The case was interesting as showing that a very mild attack of rheumatic fever may be accompanied by the most serious complications.—Mr. P. E. DAVIES read notes of several cases, in particular the cases of Tracheotomy performed in the hospital during the term of his house-surgeoncy. There were nine cases in all, and of these the first six died and the last three recovered. No bacteriological examination was made in any of the cases, but they were all regarded as diphtheria. Only the last three were treated with antitoxic serum.—Mr. J. L. STRETTON communicated a short essay on the Mode of Death in Cases of Hysteria.

WIGAN MEDICAL SOCIETY.—At a meeting on September 15th, Mr. WILLIAM MITCHELL ROOCROFT, and, afterwards, Mr. C. R. GRAHAM (President) in the chair, Dr. REES read a paper on the Remuneration of Medical Men. The paper, which touched on the overcrowding of the profession, underselling, clubs and medical aid associations, with canvassing and touting for such appointments, was listened to with marked attention; as it was full of suggestions and pointed out remedies for the abuses complained of. Dr. Rees alluded to the battle of the clubs in other towns, and advocated the formation of a medical union in connection with the Society. Almost every member present took part in the discussion, and Dr. Rees was requested to publish his paper, and that copies of the same should be obtained by the Society and circulated amongst its members and the non-members in the district with a view to a further consideration of the subject.

## REVIEWS.

MANUAL OF PRACTICAL ANATOMY. By D. J. CUNNINGHAM, M.D., D.Sc., LL.D., D.C.L., Professor of Anatomy and Surgery, University of Dublin. Vols. i, ii. Second Edition. Edinburgh and London: Young J. Pentland. 1896. (Cr. 8vo, pp. 1305. 12s. 6d. each vol.)

The appearance of another edition of Professor CUNNINGHAM'S *Manual* is sufficient guarantee of the favour with which the work is looked upon by English anatomists. It is now so well known and so widely used in the dissecting room that a detailed account of the work would only be detailing what is a matter of common experience.

The order of dissection which the author recommends is much the same as that which has been followed for many years in the practical anatomy department of Edinburgh University. The first volume deals with the limbs and the abdomen, and the second with the thorax, head, and neck. In dealing with the abdominal contents, the author has largely followed the topographical work of His, with the result that the account given of the relations of the abdominal viscera and the arrangement of the peritoneum is perhaps the best with which we are acquainted in any textbook.

come after the strictly regimental list, as serving with the regiment when they died. The omission of their rank and the place where their names are placed on the monument are sad incongruities.

**VÆ VICTIS** writes: While the War Office can get retired-pay officers on a small allowance, and civil practitioners on half contract rates to do work with troops, little will they care for vacancies in the Medical Staff.

\*.\* Surely the War Office takes into consideration that full-pay medical officers must be provided for foreign relief, and for the two army corps which are supposed to be always ready for mobilisation.

## MEDICO-LEGAL.

### CONSULTING CHEMISTS.

IN relation to the comment under the above heading, published in the *BRITISH MEDICAL JOURNAL* of September 12th, we have received a letter from our correspondent "L.A.H. Dublin," in which he refers to Section XXVI of the Irish Act of Parliament, 31 Geo. III, cap. 34, as conferring power on the Governor and Company of the Apothecaries' Hall of Dublin to take legal proceedings against any unqualified person in Ireland practising as an apothecary. If our correspondent will refer to and read Section XXVI of the Act in question, he will find that such Section is directed against apothecaries taking apprentices or assistants without obtaining the certificates referred to in Section XXIV of the Act, and does not impose any penalty upon an unqualified person practising as an apothecary.

### RECOVERY OF FEES.

**DOUBTFUL** inquires whether a man is liable for payment for professional services rendered under the following circumstances: A man's wife calls on our correspondent and asks him to attend her unmarried sister living at the man's house some miles distant. Our correspondent attended, and again on a message a week later brought by local postman at request of man's wife. The patient died, and payment of account is refused on the ground of non-liability. The man writes that it was at the wife's sister's request our correspondent attended, and that the wife's sister was only his lodger, and still owed him money.

\*.\* It is, we think, by no means clear that our correspondent would be successful in an action against the man in question, as it would probably be held that in such case the wife had no implied authority to bind her husband. If it could be shown that the husband was aware of our correspondent's visits it might help the matter if an action were brought against the man in the county court, or if it could be shown that he had given express authority to his wife. We assume that the wife has no separate property.

## UNIVERSITIES AND COLLEGES.

### UNIVERSITY OF LONDON.

**CONVOCATION.**—The Senate has sanctioned the new standing order fixing a third annual ordinary meeting for the last Tuesday in October. In consequence notice has been given that a meeting of Convocation will be held on Tuesday, October 27th.

### THE ROYAL UNIVERSITY OF IRELAND.

**THIRD EXAMINATION IN MEDICINE.**—The following candidates have satisfied the examiners:

*Upper Pass.*—R. T. Booth, Queen's College, Cork; P. Canning, M.A., Catholic University School of Medicine; D. McCay, Queen's Colleges, Cork and Belfast; A. B. McMaster, Queen's College, Belfast; E. C. T. Smith, Mason College, Birmingham.

The above candidates may present themselves for the further Examination for honours:

*Pass.*—Dora E. Allman, Queen's College, Cork; D. Brown, Queen's College, Belfast; W. Cahill, Queen's College, Cork; H. L. Craig, Queen's College, Belfast; J. Dorgan, Queen's College, Cork; F. Fulton, Queen's College, Belfast; W. Hartnett, Queen's College, Cork; G. Jefferson, Queen's College, Belfast; S. McCann, Catholic University School of Medicine; D. Mahony, Catholic University School of Medicine; J. Martin, Queen's College, Belfast; D. Murphy, Queen's College, Cork; J. Murray, Catholic University School of Medicine; W. Paisley, Queen's College, Galway; R. L. Patterson, Queen's College, Belfast; P. M. Quinn, Catholic University School of Medicine; W. J. Shannon, B.A., Queen's College, Belfast; R. A. Shaw, Queen's College, Belfast; Frances O. C. Sinclair, B.A., School of Medicine for Women, Edinburgh; J. B. Slattery, Queen's College, Cork; Lucy E. Smith, Queen's College, Cork; W. J. Sweeney, School of Physic, Trinity College, Dublin; and Royal College of Surgeons; W. White, Queen's College, Cork; J. E. Whyte, Queen's College, Belfast.

### UNIVERSITY OF DURHAM.

A CONVOCATION was held in the Castle Hall on Saturday, September 26th, the Warden (Dean Kitchin) presiding, when the following Degrees were conferred:

*M.D.*—R. A. Bolam, F. A. Cooke, W. N. D. P. D'Esterre, J. H. Hunter, T. Horton, C. Meaden, S. Powell, H. L. Rutter.

*M.D. (Practitioners).*—W. Bain, T. C. Booth, L. P. Booth, T. N. Chittenden, R. Edwards, E. English, J. Ferguson, W. F. Melis, T. E. White.

*M.B.*—E. G. E. Arnold, V. Pendred, B. Addenbrooke, M. F. Squire, W. H. Brown, R. H. Bellwood, C. H. Clarke, W. J. Codrington, G.

Norman, A. G. C. Pocock, F. W. Rise, W. E. Rudd, E. W. Sumpter, E. Tonge, J. Wreford, A. Warner;  
*B.S.*—B. Addenbrooke, E. G. C. Arnold, W. H. Brown, C. H. Clarke, W. T. Codrington, G. Norman, M. F. Squire, E. W. Sumpter, E. Tonge.  
*B. Hyg.*—C. V. Dingle.  
*B.Sc.*—A. L. Mellanby.  
*Dipl. Pub. Health.*—F. Evans.

## PUBLIC HEALTH AND POOR-LAW MEDICAL SERVICES.

### HEALTH OF ENGLISH TOWNS.

IN thirty-three of the largest English towns, including London, 5,900 births and 3,178 deaths were registered during the week ending Saturday, September 26th. The annual rate of mortality in these towns, which had declined from 24.8 to 15.1 per 1,000 in the nine preceding weeks, rose again to 15.3 last week. The rates in the several towns ranged from 9.7 in Croydon, 9.9 in Portsmouth, and 11.0 in Halifax, to 20.4 in Bolton, 21.7 in Hull, and 23.3 in Gateshead. In the thirty-two provincial towns the mean death-rate was 15.6 per 1,000, and exceeded by 0.7 the rate recorded in London, which was 14.9 per 1,000. The zymotic death-rate in the thirty-three towns averaged 1.9 per 1,000; in London the rate was equal to 2.0, while it averaged 1.9 per 1,000 in the thirty-two provincial towns, and was highest in Birkenhead, Wolverhampton, Cardiff, and Hull. Measles caused a death-rate of 1.1 in Halifax and in Gateshead, and 2.6 in Hull; scarlet fever of 1.1 in Oldham; whooping-cough of 1.1 in Swansea and 1.4 in Birkenhead; "fever" of 1.5 in Sunderland; and diarrhoea of 1.4 in Preston and 1.8 in Wolverhampton. The 84 deaths from diphtheria in the thirty-three towns included 61 in London, 7 in Birmingham, and 4 in Cardiff. No fatal case of small-pox was registered either in London or in any of the thirty-two large provincial towns. There were 6 cases of small-pox under treatment in the Metropolitan Asylums Hospitals and in the Highgate Small-pox Hospital on Saturday last September 26th, against 16, 12, and 7 at the end of the three preceding weeks; 1 new case was admitted during the week. The number of scarlet fever patients in the Metropolitan Asylums Hospitals and in the London Fever Hospital, which had increased from 3,370 to 3,805 at the end of the six preceding weeks, had further risen to 3,951 on Saturday last; 466 new cases were admitted during the week, against 484, 316, and 453 in the three preceding weeks.

### HEALTH OF SCOTCH TOWNS.

During the week ending Saturday last, September 26th, 950 births and 420 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had been 15.9 and 17.3 per 1,000 in the two preceding weeks, declined to 14.4 last week, and was 0.9 per 1,000 below the mean rate during the same period in the thirty-three large English towns. Among these Scotch towns the death-rates ranged from 10.1 in Greenock to 15.9 in Glasgow. The zymotic death-rates in these towns averaged 2.6 per 1,000, the highest rates being recorded in Paisley and Glasgow. The 215 deaths registered in Glasgow included 28 from diarrhoea, 9 from measles, 5 from whooping-cough, 4 from scarlet fever, and 2 from diphtheria.

### INCREASE OF SALARY OF MEDICAL OFFICER OF HEALTH.

At a recent meeting of the Barnsley Board of Guardians it was reported that Dr. Seaborne, the medical officer for the Wombwell district of the Union had written asking for an increase of salary. It was stated that the last increase was in 1882 when the total population was 11,445, and the estimated population of his district was now 17,678. Dr. Seaborne had been paid £35 a year from 1882 up to the present time. It was proposed and unanimously carried that the salary should be raised to £50 a year.

### OUR WORKHOUSE SYSTEM AND MR. PYE-SMITH.

BEFORE we close our criticisms on the correspondence aroused by Mr. Pye-Smith's action in visiting and recording his impressions of two large workhouses, we feel called upon to comment with some severity on the remarks that fell from Mr. Kennedy in a moment of temper, remarks which he doubtless regrets now as much as anyone, "that Mr. Pye-Smith's object was merely to make a fuss in the press;" unfortunately there have been those in Sheffield quite ready to follow the lead thus given them. We can, however, safely leave Mr. Pye-Smith to the judgment of his fellow-townsmen; there are not wanting indications that he holds a high position in their esteem, but we do think it is monstrous that a humane action, dictated by a solicitude on behalf of a neglected and forgotten class, who have no voice of their own, should be attributed to the low motive of "making a fuss," of self-advertisement, in fact. In our opinion the action of this public-spirited gentleman is one most worthy of imitation by the ratepayers in any neighbourhood; they contribute the funds for the relief of the poor, they are responsible for the administration of the same by the hands of their chosen representatives, and it is their duty to make themselves acquainted with the methods of relief and the treatment meted out to the paupers, some of whom after all may have contributed to the wealth of the town from which they receive relief.

### INSANITARY CONDITIONS AT WEST HAM.

ATTENTION was drawn, at a recent meeting of the West Ham Town Council, to the prevalence of diphtheria in the borough during the past few weeks, and to the supposed connection of the disease with the condition of the Channelsea river. The *Daily Mail* has caused inquiry to be made with regard to the matter, and has ascertained that 146 cases of diphtheria were notified during the last eight weeks. This number, large as it is, is however, less than the number notified during the corresponding period of last year. The disease, moreover, has not been limited to the neigh-

approval is not necessary, and it is stated that "the officers are commonly so burdened with other duties as to leave little time at their disposal for attending to those of inspectors under the Health Act." Some of the conditions with which the Board has been most occupied during the years under review are specially referred to. These conditions include the question of the removal of organic waste, noxious trade establishments of several sorts, protection against food adulteration, against unwholesomeness of drinking water, and against communicable disease. In a concluding paragraph the opinion is expressed that, having regard to the means which have been provided, and to the circumstances of the times through which the colony has been passing, there is but little ground for complaint; local administration has on the whole been progressive, and sanitary requirements are being attended to with increasing care by local councils, and with increasing desire to introduce such improvements as are practicable. The appendix to the report contains much detailed information with regard to particular districts. In each case the salary of the medical officer of health is given, and these salaries clearly show that public health has not yet risen to that height in public estimation in Victoria which it may be hoped it will ere long attain.

## MEDICAL NEWS.

THE Colonial Office informs us that five days' quarantine have been imposed in Cyprus on arrivals from Egypt direct if with passengers, and two days' if without.

DR. PERCY HOWARD DAY, Public Vaccinator for the Stalmine district of the Garstang Union, has been awarded, for the fourth time in succession, the Government grant for efficient vaccination.

PRESENTATION.—Dr. R. W. Goldie, of Morpeth, was recently presented with a silver salver by the members of his ambulance class as an acknowledgment of the services rendered by him as instructor. The presentation was made by Dr. Spence Watson, of Newcastle.

INFECTION BY LIBRARY BOOKS.—In order to prevent the spread of infectious disease by the circulation of library books, Dr. Dixon, M.O.H. for Bermondsey, has been instructed to supply the officials of the public library with particulars of houses in the district where such diseases exist, so that they may prevent books being issued to the residents until a certificate is received stating that the disease has been got rid of.

THE first lecture of the winter course at the Hospital for Consumption and Diseases of the Chest, Brompton, will be given on Wednesday, October 14th, at 4 P.M., by Dr. Frederick T. Roberts. The subject will be, the Value of the Simpler Methods of Examination of the Chest.

DIRECT REPRESENTATION ON GENERAL MEDICAL COUNCIL.—A meeting of Dr. Alderson's supporters will be held at 4 P.M. on Tuesday, October 6th, at Bellevue House, 299, Lavender Hill, S.W., by kind permission of Dr. Backwell, to report progress of his candidature, to hear an address, and to consider what further steps shall be taken to ensure the election of Dr. Alderson as one of the direct representatives on the General Medical Council.

THE Council of the Willesden Cottage Hospital have received a protest, signed by twenty-seven local medical men and one or two clergymen, urging that the proper course to be adopted in the choice of a medical staff was not to select, as now, some eight gentlemen, but to place the whole sixty local practitioners on the body. The Council have determined to write to the petitioners that the Council could not consent to alter the rules to meet their views.

THE Club and Institute Union Convalescent Home, Pegwell Bay, near Ramsgate, has proved such a marked success, and done so much good, that the committee have determined to build a new wing, and provide accommodation for thirty additional beds, at a cost of £3,000. When the new wing is finished and open, this convalescent home will be one of the largest and certainly one of the most economically conducted in the kingdom.

POOR-LAW MEDICAL OFFICERS IN ITALY.—Signor Rudini, Minister of the Interior, has appointed a Commission to draw up a Bill for the purpose of providing pensions for the *medici condotti* (the Italian parish doctors), which will be presented to the Chamber when it opens. This is good news for a hard-worked and very inadequately paid branch of the

profession, whose members are so much at the mercy of the Communal authorities, and whose small salaries—they do not average £80 a year—are often irregularly paid. In many parishes in Italy the sole means of livelihood of the *medico condotto* is this salary, as in these parishes there are few, if any, persons who are in a position to pay for medical attendance.

MEDICAL CONGRESSES IN ITALY.—The seventh Congress of the Italian Medical Society will be held in Rome on October 20th and three following days. The following questions are proposed for discussion: (1) Recent progress in the pathological physiology of the cerebrum and cerebellum; (2) myocardial insufficiency. The Italian Obstetrical and Gynaecological Society will hold its third annual meeting in Rome at the same time. The ninth Congress of Italian Alienists will be held at Florence on October 5th and four following days, under the presidency of Professor Tamburini, of Reggio-Emilia.

THE first session of systematic teaching for fifth years' students at the National Hospital for the Paralysed and Epileptic, Queen Square, W.C., will be opened by an introductory lecture by Dr. Gowers, F.R.S., on Tuesday, October 6th, at 3.30 P.M. All medical men are invited to attend, and the wards and museum will be open to inspection afterwards. Some further information as to the courses of instruction will be found in the Educational Number of the BRITISH MEDICAL JOURNAL (September 5th, p. 578), and a detailed prospectus can be obtained on application to the Secretary-Director at the hospital.

## MEDICAL VACANCIES.

The following vacancies are announced:

BETHLEM HOSPITAL.—Two Resident Clinical Assistants. Term of residence six months from November 1st. Apartments, board, and washing provided. Applications to John Brewer, Clerk, etc., Bridewell Hospital, New Bridge Street, E.C., before October 5th, endorsed "Clinical Assistantship."

BIRMINGHAM AND MIDLAND EAR AND THROAT HOSPITAL. House-Surgeon. Appointment for six months. Board, lodging, and washing provided. Applications to the Honorary Secretary of the Medical Committee by October 14th.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton, S.W.—Clinical Clerks to the In-patient Physicians, and Clinical Assistants to the Out-patient Physicians. Applications to the Secretary.

HOSPITAL FOR WOMEN, Soho Square.—Assistant House-Physician, non-resident. Appointment for three months. Candidates must be fully qualified. Applications to David Cannon, Secretary, by October 5th.

KING'S COLLEGE, London.—Sambrook Medical Registrarship. Applications from King's College Students only to Walter Smith, Secretary, by October 10th.

LONDON HOSPITAL, Whitechapel Road, E.—Assistant Physician. Must be a Member of Royal College of Physicians, London. Applications to be delivered at the House Governor's Office by October 16th.

METROPOLITAN ASYLUMS BOARD.—Assistant Medical Officers at the North-Eastern Fever Hospital, St. Ann's Road, Tottenham, and at the Brook Fever Hospital, Shooter's Hill, Kent. Salary, £160 during the first year, £180 during the second year, and £200 during the third and subsequent years of service, with board, lodging, attendance, and washing; must be doubly qualified, and not more than 35 years of age. Applications, on forms to be obtained at the chief office of the Board, Norfolk House, Norfolk Street, Strand, W.C., to be delivered not later than October 13th for the North-Eastern Hospital, and October 7th for the Brook Hospital.

METROPOLITAN HOSPITAL, Kingsland Road, N.E.—Dental Surgeon. Must be a Licentiate in Dental Surgery of the Royal College of Surgeons of England. Applications to C. H. Byers, Secretary, by October 9th.

NEWCASTLE-ON-TYNE DISPENSARY.—Visiting Medical Assistant; doubly qualified. Salary, £120 for the first year and £150 afterwards. Applications on forms provided to the Honorary Secretary, R. W. Sisson, 13, Grey Street, Newcastle-on-Tyne, by October 12th.

NORTH LONDON HOSPITAL FOR CONSUMPTION, Mount Vernon, Hampstead, N.W., and Fitzroy Square, W.—Assistant Physician. Applications to the Secretary at the Office, 41, Fitzroy Square, W., by October 5th.

PADDINGTON GREEN CHILDREN'S HOSPITAL, London, W.—House-Physician and House-Surgeon. Appointments for six months. Salary at the rate of £50 per annum, with board and residence. Applications to the Secretary by October 12th.

ROYAL HOSPITAL FOR DISEASES OF THE CHEST, City Road, E.C.—Assistant Physician; must be F.R.C.P. Lond. Also Resident Medical Officer; appointment for six months. Salary, at the rate of £100 per annum, with furnished apartments, board, and washing. Applications to the Secretary by October 14th.

**ROYAL LONDON OPHTHALMIC HOSPITAL, Moorfields.**—Senior House-Surgeon. The Junior House-Surgeon is an eligible candidate, and in the event of his appointment candidates must state whether they would be willing to accept the office of Junior House-Surgeon. Applications to the Secretary by October 6th.

**ST. LUKE'S HOSPITAL, E.C.**—Clinical Assistant. Appointment for six months, with board and residence. Applications to W. H. Baird, Secretary.

**ST. VINCENT'S HOSPITAL, Dublin.**—Two Resident Physicians. Election on October 24th. Applications to the Honorary Secretary.

**YORK COUNTY HOSPITAL.**—Assistant House-Surgeon; doubly qualified, Salary, £60 per annum, with board, rooms, washing, etc. Applications to Fred. W. Howell, Secretary and Manager, by October 14th.

### MEDICAL APPOINTMENTS.

**ADAMS, W. F., M.R.C.S.Eng., L.R.C.P.Lond.,** appointed Junior Assistant Medical Officer at the Cornwall County Asylum at Bodmin.

**ARNISON, T. W., M.B., Ch.B.Vict.,** appointed Junior House-Surgeon to the Salford Royal Hospital, *vice* J. P. Hall, elected House-Surgeon.

**ASHTON, George, M.B., Ch.B.Vict., M.R.C.S., L.R.C.P.,** appointed House-Surgeon to the Manchester Southern and Maternity Hospital.

**BANNISTER, William, M.R.C.S.Eng., L.S.A.,** reappointed Medical Officer of Health to the Havant Urban District Council.

**CHILD, Edwin, M.R.C.S., L.S.A.,** reappointed Medical Officer of Health to the Malden and Coombe Urban District Council.

**DALAL, Ratonjee Dinshaw, L.R.C.P.Lond., M.R.C.S.Eng., L.M. and S.,** Bombay, appointed Resident Medical Officer of the Finsbury Dispensary, *vice* Alfred Philipps, M.R.C.S.Eng., L.S.A., resigned.

**DOVE, John R. B., M.B., B.S.Lond., M.R.C.S.,** reappointed Medical Officer for the Ruislip District of the Uxbridge Union.

**EDWARDS, H. N., M.R.C.S., L.R.C.P.,** appointed Clinical Assistant to the Chelsea Hospital for Women.

**FARTHING, T., M.B., C.M.Edin.,** appointed Deputy Medical Superintendent to the Dartford Joint Hospital Committee.

**GLOVER, J. Hastings, M.B., C.M.Edin.,** appointed Medical Officer for the Botesford District of the Belvoir (Leicester) Union.

**GRIGG, N. B., F.R.C.S.,** reappointed Medical Officer for the Hockworthy District of the Tiverton Union.

**HALL, J. P., M.B., Ch.B.Vict., M.R.C.S., L.R.C.P.,** appointed House-Surgeon to the Salford Royal Hospital, *vice* J. H. Ray, M.B., Ch.B. Vict., M.R.C.S., resigned.

**JENKINS, George Harrison, L.R.C.P.E., L.R.C.S.E., L.F.P.S.G.,** appointed Medical Officer of Health to the Usk Urban District Council, Medical Officer of Health to the Pontypool Rural District Council, and Medical Officer and Public Vaccinator to the Usk District, Pontypool Union, *vice* P. Campbell, L.R.C.P.E., L.R.C.S.E., resigned.

**MASON, G. B., M.R.C.S., L.R.C.P.Lond.,** appointed Second Assistant Medical Officer to the St. Marylebone Infirmary, *vice* M. Townshend, resigned.

**PHILLIPS, H. H., M.R.C.S., L.R.C.P.,** appointed Clinical Assistant to the Chelsea Hospital for Women.

**RICE, W. Richardson, M.D.,** appointed Lecturer on Human Physiology at the Coventry Technical Institute.

**SIMONS, J., M.D.Amsterdam and Ghent,** appointed Clinical Assistant to the Chelsea Hospital for Women.

**SUTTON, J. B., L.R.C.P.Lond., L.S.A.,** appointed Medical Officer for the Hedgerley District of the Eton Union.

**THOMAS, W. E., L.R.C.P., L.R.C.S.Edin.,** appointed Medical Officer for the Pentre District of the Pontypridd Union.

**TUXFORD, Arthur, M.D.Edin.,** reappointed Medical Officer of Health to the Port Sanitary Authority, Boston, for three years.

**WARBURTON, E. S., M.R.C.S.Eng., L.S.A.,** appointed Medical Officer for the Treherbert District of the Pontypridd Union.

**WELSFORD, George F., B.A.Camb., M.B., M.R.C.S.,** reappointed Medical Officer for the Cruwys Morchard District of the Tiverton Union.

**WELSH, R. A., M.B., B.S.Durh.,** appointed Medical Officer for the Embleton District of the Alnwick Union.

**WHITE, Mr. J. H.,** appointed Medical Officer for the Second District of the Holsworthy Union.

**WILKS, Samuel, M.D.Lond., F.R.C.P., M.R.C.S., F.R.S.,** appointed Consulting Physician to the Great Northern Central Hospital, Holloway Road, N.

**WOOD, S., L.R.C.P., L.R.C.S.Edin.,** appointed Medical Officer for the Fifth District of the Newmarket Union.

**WOODWARD, Alfred, M.R.C.S.Eng., L.S.A.,** reappointed Medical Officer of Health to the St. Helens Urban District Council.

### DIARY FOR NEXT WEEK.

#### MONDAY.

**LONDON POST-GRADUATE COURSE, Royal London Ophthalmic Hospital, Moorfields, 1 P.M.**—Mr. W. Lang: Clinical Examinations of the Eye. London Throat Hospital, Great Portland Street, W., 8 P.M.—Mr. W. R. H. Stewart: Examination of the Ear.

**CHARING CROSS HOSPITAL MEDICAL SCHOOL, 4 P.M.**—The Huxley Lecture, by Professor Michael Foster, on Recent Advances in Science and their Bearing on Medicine and Surgery.

#### TUESDAY.

**LONDON POST-GRADUATE COURSE, Bethlem Royal Hospital, 2 P.M.**—Dr. Craig: Mania—Acute Hysterical; Acute Delirious.

**GRESHAM COLLEGE, Basinghall Street, E.C., 6 P.M.**—Dr. E. Symes Thompson. The Gresham Lectures: I. On the Discovery of Vaccination.

**NATIONAL HOSPITAL FOR THE PARALYSED AND EPILEPTIC, Queen Square, W.C., 3.30 P.M.**—Dr. Gowers: Introductory Lecture.

#### WEDNESDAY.

**LONDON POST-GRADUATE COURSE, Hospital for Diseases of the Skin, Blackfriars, 4.30 P.M.**—Dr. Phineas Abraham: Lupus and Scrofuloderma. Royal London Ophthalmic Hospital, Moorfields, 8 P.M.—Mr. A. Quarry Silcock: Diseases of the Iris.

**GRESHAM COLLEGE, Basinghall Street, E.C., 6 P.M.**—Dr. E. Symes Thompson. The Gresham Lectures: II. The Recent Epidemic of Small-pox at Gloucester.

**OBSTETRICAL SOCIETY OF LONDON, 20, Hanover Square, W., 8 P.M.**—Specimens will be shown by Dr. Dakin and others. Papers:—Dr. Lewers: A case of Double Uterus with Double Hematometra and Complete Absence of the Vagina. Dr. T. G. Stevens: A case of Completely Cleft Spine associated with an Unusual Visceral Malformation in an Anencephalic Fetus.

#### THURSDAY.

**LONDON POST-GRADUATE COURSE, British Institute of Preventive Medicine, Great Russell Street, W.C., 3.30 P.M.**—Dr. Allan Macfadyen and Mr. A. G. Foulerton: More Important Constituents of Normal Urine. Central London Sick Asylum, Cleveland Street, W., 5.30 P.M.—Mr. John Hopkins: Clinical Lecture.

**GRESHAM COLLEGE, Basinghall Street, E.C., 6 P.M.**—Dr. E. Symes Thompson. The Gresham Lectures: III. The New Photography.

**BRITISH GYNÆCOLOGICAL SOCIETY, 20, Hanover Square, W., 8.30 P.M.**—Specimens. Mr. Bowreman Jessett: On the Early Diagnosis of Carcinoma of the Body of the Uterus and its Treatment by Total Extirpation, illustrated by 75 cases of operation and specimens.

#### FRIDAY.

**LONDON POST-GRADUATE COURSE, Bacteriological Laboratory, King's College, 3 P.M.**—Professor Crookshank: The Microscope and Methods of Cultivation. 4 to 5 P.M. Examination of Cultivations.

**GRESHAM COLLEGE, Basinghall Street, E.C., 6 P.M.**—Dr. E. Symes Thompson. The Gresham Lectures: IV. History of the Discovery of the New Rays.

**NATIONAL HOSPITAL FOR THE PARALYSED AND EPILEPTIC, Queen Square, W.C., 3.30 P.M.**—Dr. Tooth: Anatomy and Physiology of the Spinal Cord.

**CLINICAL SOCIETY OF LONDON, 20, Hanover Square, W., 8.30 P.M.**—Mr. W. G. Spencer and Mr. S. Tippet: Punctured Wound of Right Ventricle of the Heart through the Second Left Intercostal Space; Severe Primary and Three Secondary Hemorrhages; Healing of the Wound; Subsequent Post-mortem Examination after Death from Disease. Mr. R. Lawford Knaggs: Aseptic Inflammation following the Operation of Tapping in Certain Hydroceles. Dr. F. Hawkins: Case of Hyperpyrexia with Double Lobar or Croupous Pneumonia (Jaundice); Recovery. Mr. H. B. Robinson: Very Large Hydatid Cyst of Liver involving Right Pleural and Peritoneal Cavities; Abdominal Section and Drainage.

### BIRTHS, MARRIAGES, AND DEATHS.

*The charge for inserting announcements of Births, Marriages, and Deaths is 8s. 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.

**HARMAR.**—On September 23rd, at Oak Cottage, Monument Road, Edgbaston, the wife of J. Raffles Harmar, of a son.

#### MARRIAGES.

**CARRUTHERS—HALDEMAN.**—On September 19th, at St. Andrew's Presbyterian Church, Upper Norwood, by the Rev. J. G. Train, assisted by the Rev. Robert Taylor and the Rev. John Jenkins, D.D., S. W. Carruthers, M.B., C.M.Edin., of Central Hill, Norwood, to Emily Hopkins, daughter of the late John Haldeman, of Columbia, Pennsylvania, U.S.A. No cards. Pennsylvania papers please copy.

**DUNKLEY—SULLY.**—At St. Michael's Church, Gloucester, by the Rev. G. James, Rector, W. Wilberforce Dunkley, L.R.C.P.E., to Mabel, fourth daughter of the late Albert Sully, of the city of Gloucester.

**FREER—TAYLOR.**—On August 15th, at St. Andrew's Cathedral, Singapore, Straits Settlements, by the Rev. W. H. C. Dunkerley (brother-in-law of the bride), Acting Colonial Chaplain, and the Rev. W. H. Gomes, Gerald Dudley Freer, M.R.C.S.Eng., L.R.C.P.Lond., Colonial Surgeon of Malacca, to Frances Maude, daughter of the late George Taylor and of Mrs. Taylor, of Welford House, Bakewell, Derbyshire.

#### DEATHS.

**POWELL.**—On September 12th, at Toomevara, co. Tipperary, George H. Powell, M.D., Medical Officer of Toomevara Dispensary, aged 38 years, deeply and deservedly regretted by his sorrowing wife and children.

**RAMSAY.**—At Lohwinnoch, on September 26th, Robert Ramsay, M.D., L.R.C.S.Edin., in the 76th year of his age and 50th year of his profession.



## 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.  
**CHARING 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., 9.  
**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. S., 9; Ear, S., 9.30; Skin, Th., 9; Dental, Tu., 9. *Operations*.—M. Tu. W. Th. F., 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., 2; 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., 1.30; S., 2; (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., 3; 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; Orthopedic, 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; Orthopedic, 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., 9; Ear, M. Th., 9; Orthopedic, W., 10; Throat, Tu. F., 3.30; Skin, M. Th., 9.30; Electrotherapeutics, 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., 2; 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, 1.30; Electrotherapeutics, 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; (Gynaecological), Th., 2.  
**SAMARITAN FREE FOR WOMEN AND CHILDREN.** *Attendances*.—Daily, 1.30. *Operations*.—Th., 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., 2; Skin, W., 1.45; S., 9.15; Throat, M. Th., 9; Dental, W., 9.30. *Operations*.—W., 2.  
**WEST LONDON.** *Attendances*.—Medical and Surgical, daily, 2; Dental, Tu. F., 9.30; Eye, Tu. Th., 2; Ear, Tu., 10; Orthopedic, W., 2; Diseases of Women, W. S., 2; Electric, Tu., 10; F., 4; Skin, F., 4; 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.

**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.

M.A., M.B. writes: Which is the best insurance office for a medical man for recompense during sickness?

**PATHOLOGIST** asks for a recipe for a reliable cement for museum jars which will retain the spirit; one that could be used cold would be preferable.

DR. DOVETON MARTIN (Northampton) would be glad to know of a convalescent home by the sea for a child suffering from chronic tuberculous peritonitis. She is 7 years of age.

MR. J. W. LANGRIDGE, M.R.C.S. (Croftside, Ilfracombe), asks for the addresses of some institutions where pathological specimens are examined, sputum examined for tubercle bacilli, etc.

MR. CRESSWELL F. WHITE (Sherborne, Dorset) asks: 1. What are the principal drugs in "Hair's Asthma Cure"? 2. Is there any basis for the popular idea that meat pies cooked without holes in the crust are poisonous?

H. W. H. asks what is the best application to the inside of an aural speculum belonging to Brunton's auriscope to blacken it, and which will allow it to be immersed in carbolic solution without removing the blackening agent?

E. B. G. would be much obliged if anyone would kindly suggest to him the best means of effectually stamping out scabies in a young man who has persevered with sulphur balsam of Peru, styrax, and beta-naphthol ointments for several months. All these are greatly relieving, but the rash reappears immediately they are withheld. Is it likely reinfection may occur from the outer clothing?

DR. GEORGE FISHER (Guildford, Surrey) would be glad to be informed if there be a home at Bath or Buxton where a governess who has had rheumatic fever recently, and rheumatism for some years, could be received for some time at a payment of from 10s. to £1 a week. She does not require medical supervision now; and, if there be no home at Bath or Buxton, if there be any home that would be good for a rheumatic patient in any other place.

PUCHNEWALD asks: (1) Is there any institution in Great Britain to which an idiot boy of Hindu parentage would be admitted for treatment and training? The father could only afford a small amount for maintenance, etc. (2) Can any member give the details of successful treatment of the pigmented patches on the forehead, malar bones, etc., subsequent to pregnancy? Bichloride has been tried without effect. What is the treatment with salicylates? Details should be full, as the inquirer is away from reference libraries.

ENQUIRER writes: I should like, through the medium of the BRITISH MEDICAL JOURNAL, to ask on what grounds inquests are considered necessary after deaths from anaesthetics. The administration of anaesthetics by a qualified medical man I have always understood to be a fully recognised and lawful medical proceeding, quite as much as the performance of a surgical operation or the exhibition of drugs by the same individuals. Supposing a qualified medical man gives an anaesthetic and death results, he is apparently expected to notify the case to the coroner; but if the same medical man performs a surgical operation, and death occurs, he is not expected to do so. And yet both are equally lawful, and ordinary medical procedures. Personally, I cannot see why the one case should be the subject of public inquiry more than the other. Death may be "sudden and unexpected" in the case of a surgical operation as in the case of anaesthesia, yet medical men never think of notifying the former. Information on the subject will oblige.

### ADDRESS WANTED.

MR. HOWARD J. COLLINS (House Governor, General Hospital, Birmingham) asks: Can any of your readers give me the present address of Mr. H. M. Crosby, M.B., C.M. Edin., who was assistant house-surgeon at the General Hospital, Birmingham, from October, 1894, to April, 1895, and was afterwards assistant to a doctor in Nantwich?

### PROFESSIONAL SECRECY.

ASSISTANT HOUSE-SURGEON asks the following question: A woman comes up to the out-patient department of a hospital suffering from a gonorrhoeal discharge, or perhaps mucous tubercles, etc. She asks you: "Please, sir, has my husband given me this?" What ought the reply to be?

\* \* \* We are advised that the reply to such a question should be, if such is the fact, that the infection must have been contracted somehow.

### THE TREATMENT OF SUNSTROKE.

STAFF-SURGEON writes: I should be glad to be referred to any account of the following treatment of sunstroke, a description of which I have had from a consular officer on the Mediterranean station, whose son is at present up the Nile with the Egyptian troops, and has tried it with success, and also tells me it was found successful during Lord Wolseley's Egyptian campaign. Some of my brother officers in India may know something of the mode of treatment, namely: A soldier falls to the ground insensible; he is turned on his side and the ear filled with salt, and water poured upon it; he is turned over and the other ear treated in the same way; he recovers in fifteen to forty minutes, and says he experienced a sensation of boiling water in his ears. I take it for granted his accoutrements, etc., are removed, and his dress loosened, but have no recollection; nor can I find any reference to such a mode of treatment.