

wiser to have injected it three weeks earlier as soon as the nature of the case was ascertained.

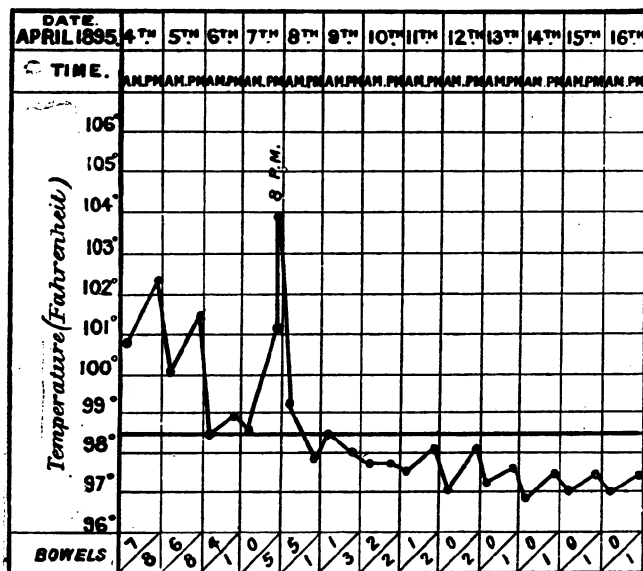
The two charts are given at page 1316, and we owe many thanks to Miss Girdlestone, the superintendent of the nurses, for the kind help she has given in preparing the charts and notes.

MEMORANDA:

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

TWO CASES SHOWING IRREGULARITY OF TEMPERATURE IN ACUTE ENTERITIS.

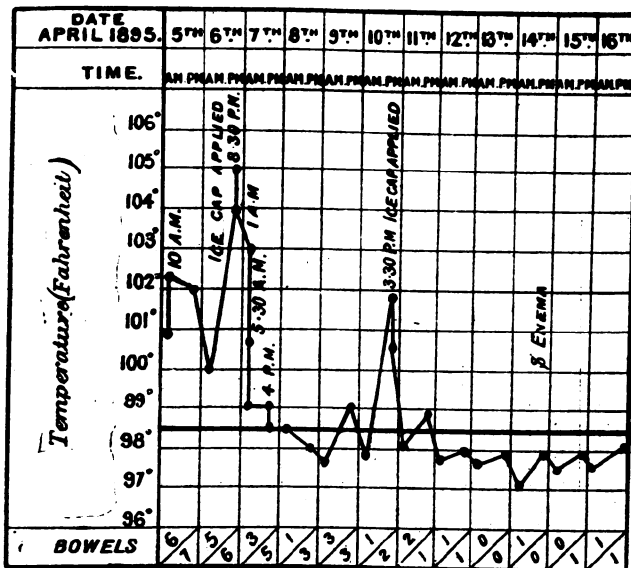
On April 4th, 1895, W. B., aged 10, complained of frontal headache, pains in the back, and acute diarrhoea. His bowels were moved seven times between 1 and 12 A.M., and eight times from 12 A.M. to midnight. His temperature at 10 A.M. was 100.6°, and at 9 P.M. 102.6°. The next day his morning temperature was 100.4°, evening 101.4°, and his bowels during the day were moved fourteen times. Next morning his temperature had fallen to normal, and in the evening was 98.8°, and the bowels were moved five times. The following morn-



ing the temperature was 98.6°, but the same evening suddenly ran up to 103.8°, the bowels being moved five times. Next morning his temperature was 99°, and in the evening 97.6°, the bowels being moved six times. From this day onward the temperature remained subnormal, going down to 96.6° on the 14th of the month, and gradually rising to normal twelve days after the onset of the attack.

The mother of this boy, aged 47, complained of similar symptoms, and on April 5th her morning temperature was 102.4°, evening temperature 102°, and the bowels were moved thirteen times. The next morning her temperature was 100°, but the same evening at 8.30 P.M. was 104.8°, and her bowels moved eleven times. The following morning the temperature fell to 99°, and in the evening to normal, and the bowels were moved eight times. The next day the temperature was only 98°, and the bowels moved four times; the following day 99°, and the bowels moved six times; the day after in the morning 97.6°, which by evening had gone up to 101.8°, and the bowels moved three times. Next day it fell to 98° and then to 97°, remaining subnormal between 97° to 98° until eleven days after the onset, when it returned to normal.

In these cases nothing of an unusual character had been taken in regard to food, and the symptoms at first all pointed to an attack of influenza. The motions soon became thin and watery, containing mucus and undigested food, but no blood.



Slight pain occurred at intervals, but it was never very pronounced. There was no vomiting. The tongue was only slightly furred. There was great thirst and some delirium when the temperature became high. No doubt the condition was attributable to the action of micro-organisms, and the high temperature to the absorption of toxins.

JAMES METCALFE, M.D.Brux., L.R.C.P., L.R.C.S.Edin.
Bradford.

LARGE SIZE OF OVARIAN CYSTS.

IN the EPITOME of the BRITISH MEDICAL JOURNAL of September 5th, par. 201, you quote as a rarity the case of M. Fournel, in which a multilocular ovarian tumour contained 46 pints of fluid. A still larger tumour was removed by me at the Crewkerne Hospital on June 29th last. The patient was an old-looking woman in her 67th year, of short stature; and as her general emaciation was extreme and abdominal distension enormous, the girth at the umbilicus being just under 50 inches, she presented an extraordinary appearance. This also was a multilocular tumour, springing from the left ovary, and dated back eighteen months at the longest. The loculi contained altogether just over 56 pints of fluid, while the solid tumour substance, left after the fluid had drained away, weighed 9 lbs. The right ovary was also cystic, of the size of a hen's egg, and the uterus about the size of the egg of a duck. The operation was quite simple and easy, the patient had an uninterrupted convalescence, her general health rapidly improved, and there is at present a firm cicatrix showing no inclination to yield.

Perhaps these enormous tumours are common in country districts, remote from the surgical zeal of our large medical centres.

Crewkerne.

EDWARD J. CAVE, M.D.Lond.

MALARIA AT ADEN.

I SEE that several writers in the BRITISH MEDICAL JOURNAL have lately broached the subject of malaria in Aden. I thought it might interest many readers to see the statistics (for malarial fevers) of the Civil Hospital since 1885; they concern the civil native population alone. Undoubtedly it is a remarkable fact that the number of cases of malarial fevers has increased enormously of late years amongst natives and Europeans alike. In different health reports several causes and theories have been discussed:

1. That of late years more rain has fallen in Aden than fell in former years, and that the fever increases with a larger rainfall. (Unfortunately I cannot obtain reliable information about the rainfall prior to 1885.)
2. That the dredging operations carried on in the harbour may have something to do with the increase, for Surgeon-Major Peterkin ascertained that the men working in the dredgers suffered considerably from ague.

3. The opening up of virgin soil by the excavations which have been carried on in the rocks when making new barracks and fortifications.

Surgeon-Major Anderson, in one of his recent annual reports, shows the rainfall theory as a likely cause.

Tabular Statement of Admissions for Malarial Fevers at the Aden Civil Hospital from 1885.

Year.	Total Admissions.			Malarial Fevers treated.			Rainfall.	
	In-door.	Out-door.	Total.	In-door.	Out-door.	Total.	Inches.	Cents.
1885	465	1,452	1,917	42	186	228	12	88
1886	478	2,215	2,693	30	180	210	3	14
1887	442	1,923	2,365	39	186	225	4	61
1888	493	1,678	2,171	81	190	271	4	99
1889	734	3,407	4,141	76	289	365	1	64
1890	1,096	5,079	6,175	332	952	1,284	12	35
1891	1,410	5,238	6,648	426	995	1,421	4	48
1892	1,229	5,416	6,645	422	859	1,281	4	76
1893	1,218	6,450	7,668	349	952	1,301	1	64
1894	1,190	6,583	7,773	438	1,407	1,845	2	87
1895	1,243	6,745	7,988	335	1,455	1,790	2	59

I think there remains one other cause which may account for the increase, and that is the fact of there being more water used by all classes of the community now than formerly, owing to its being more abundant and less costly; there are no drains of any kind in Aden, hence an increased consumption means also a water-logged area of ground, and a likely nidus for the malarial bacillus.—I am, etc.,

J. LLOYD T. JONES,
Surgeon-Captain; Acting Civil Surgeon, Aden.

REPORTS

ON

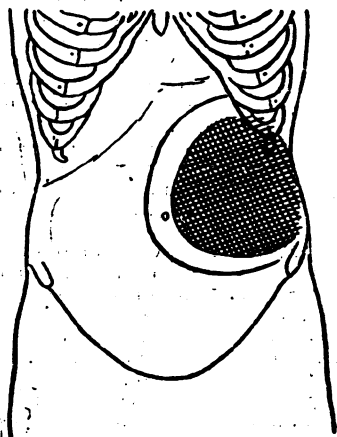
MEDICAL & SURGICAL PRACTICE IN THE HOSPITALS AND ASYLUMS OF GREAT BRITAIN, IRELAND, AND THE COLONIES.

MANCHESTER CLINICAL HOSPITAL.

A CASE OF PANCREATIC CYST IN AN INFANT.¹

(Under the care of T. C. RAILTON, M.D.Lond., M.R.C.P.,
Physician to the Hospital.)

M. J., aged six months, the daughter of a labourer, was admitted on December 30th, 1895. Her parents, and one other child which they had, were said to be perfectly healthy, although there was a history of phthisis in the father's family.



The patient was born naturally and had been apparently quite well until about a week before her admission, when she showed signs of discomfort, was fretful, and a day or two later her mother observed her abdomen to be swelling. So far as

is known she had never fallen, and there had been no injury to the body.

Condition on Admission.—She was a pale but not emaciated infant, free from fever, and apparently equally so from pain. She was not jaundiced, the bowels were normal, and the tongue slightly coated. The abdomen was prominent and measured 17½ inches in circumference at the level of the umbilicus. In the left hypochondriac region there was dullness which extended downwards from the ribs to the level of the anterior superior spine of the ilium, forwards a finger's breadth to the right of the umbilicus and merged behind into the region of the kidney. Almost co-extensive with the dullness a large rounded tumour was to be felt, which from its elasticity at once gave one the impression of being cystic. Resonance in places in front showed the swelling to be partially covered in the descending colon. A needle was inserted from behind at a point where fluctuation was distinctly felt, and a clear, pale fluid, containing no urea was withdrawn. The case was (too hastily as the event proved) concluded to be one of congenital hydronephrosis, and the idea of a pancreatic cyst not being entertained no examination of the fluid beyond the search for urea was made.

A few days later 18½ ounces of fluid, this time somewhat turbid in appearance, were withdrawn by means of the aspirator from the same region, and the girth of the abdomen was thus reduced to 15½ inches. Within a week, however, the tumour had increased even beyond its original dimensions and the circumference of the abdomen at the level of the umbilicus measured 18½ inches. It was therefore decided to incise and drain from the infracostal region behind, which was accordingly done by my colleague, Mr. Southam, on January 15th, 1896. The operation was unfortunately followed by considerable shock, from which the child with difficulty rallied. The rectal temperature rose in the evening to 103° and death occurred early in the morning of January 19th.

At the *post-mortem* examination the cyst was found to spring from the tail of the pancreas, being slightly overlapped in front by the cardiac end of the stomach and below by the descending colon. It consisted of a tough and thickened membrane which had no connection with any part of the omentum, in fact, having no adhesions whatever except at its place of attachment to the tail of the pancreas. At this point a dimpling of the inner surface of the cyst was to be seen, but no apparent communication. The remaining organs of the abdomen were healthy.

Remarks.—So far as I can gather from the literature of the subject, no instance of a pancreatic cyst has hitherto been recorded at so early a period of life as in the above case, the earliest age mentioned in the published accounts to which I have been able to refer being seventeen years.

It is of interest to notice the decidedly lateral position of the cyst, shown in the diagram appended. This position is a very unusual one, and is accountable to a considerable extent for the mistaken conclusion arrived at as to the nature of the disease. In no case of which I have seen an account has the tumour been described as extending so far round to the back. In Senn's case, published in his well-known paper "On the Surgical Treatment of Cysts of the Pancreas,"² the tumour is represented as being in the left hypochondrium, but the lumbar region is expressly mentioned as being clear. It is possible that the relatively large size of the liver in the infant may have been the cause of the tumour being pushed so far to the left.

Although since Senn's paper a very large number of cases of pancreatic cyst have been reported, many of which have been diagnosed previous to incision, and some even without an exploration with the needle, but few instances have been published in England in which a decided diagnosis has been arrived at before the operation. I can only mention three, though there may be others of which I am unaware. These three are the cases of Annandale,³ Pitt and Jacobson,⁴ and Churton,⁵ the latter case being complicated with diabetes. It is evident, therefore, that the diagnosis of pancreatic cyst is not without its difficulties. The fluid withdrawn from the cyst should, however, be pathognomonic if examined for its

² *American Journal of the Medical Sciences*, vol. 90, 1885.

³ *BRITISH MEDICAL JOURNAL*, 1889, i, p. 1,241.

⁴ *Med. Chirurg. Trans.*, vol. 74, p. 455.

⁵ *Clinical Society's Trans.*, vol. 27, p. 245.

¹ Read before the Pathological Society of Manchester, April 8th, 1896.

his early study of the physiology of that organ, and of the processes of digestion. In 1863 he published his work entitled *Jandice, its Pathology and Treatment*, a book marked by much originality of thought and method, and destined to have an important influence on the progress of medical knowledge and opinion on the subject with which it dealt. It was eventually succeeded and replaced by his large and important treatise on the *Diseases of the Liver*, published in 1883, a work in which the writer focussed all the experience and research of many years. This book was reprinted in Canada and in America, and was translated into German by Dr. J. Kraus, of Carlsbad. In 1885 he published a pamphlet on *Sounding for Gall Stones*; and in the following year a work on *Inflammations of the Liver*, in which, among other novel suggestions, he advocated puncture of the capsule of Glisson in congestive liver induration, and "hepatic phlebotomy" for acute hepatitis, a line of treatment which he first suggested in a communication to our columns.

Notwithstanding the number, volume, and variety of his contributions to medical literature, Dr. Harley suffered for many years from ill-health. While engaged in working with the microscope, during the time that he was Lecturer on Histology, he suffered a retinal hæmorrhage, which was followed by retinitis and glaucoma. Sympathetic ophthalmia ensued in the other eye, and extirpation of that first affected was advised. Dr. Harley, however, determined to try the effects of physiological rest, and for nine months he lived in two rooms which had been completely darkened. He recovered his sight, and has recorded many curious observations on his vision when he first began to use his eyes again; among other points he had lost the power of calculating distances and distinguishing certain colours. These powers he afterwards regained. Later in life he suffered from an obscure affection of the spinal cord, which interfered with the power of walking. The cause of his sudden death was rupture of a coronary artery and hæmorrhage into the pericardium.

Dr. George Harley was endowed with great abilities and possessed by an enthusiastic devotion to science. That he had also a high courage is shown by the eminent position which he won for himself under circumstances of ill-health which might well have excused retirement from the field.

Personally he was a man of great openness of mind. Genial to his friends, courteous to his opponents, he was ever ready to recognise sound scientific work and to applaud its spirit. Of an original turn of mind, of great industry, and holding strongly the views to which his scientific researches and clinical observations had led him, he stated his conclusions frankly and defended them with spirit. A physician of no ordinary skill in the practice of his profession, and one whose opinion was highly valued, his published writings show that, though he did not disdain the teachings of empiricism, they yet never satisfied his intellectual needs. He was always striving to find the scientific basis for empirical practices, and the influence of his writings has extended, and will extend, beyond their actual teachings. He was a ready speaker, and often took an effective part in discussions at the medical societies.

Of his social qualities, it is sufficient to say that he was a charming companion, always cheery, a mine of curious information on many subjects, and an excellent raconteur.

By his own desire his body is to be cremated at Woking Cemetery on October 30th, and the funeral service will take place at Kingsbury Old Church at 3.30 P.M. on the same day.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession who have recently died are Dr. Hélot, some time Senior Surgeon to the Rouen Maternity Hospital and Deputy Professor of Midwifery in the medical school of that city; Dr. R. E. Kerry, Director of the Bacteriological Laboratory of the Vienna Veterinary Institute, and son-in-law of Professor von Dittel, the eminent surgeon, aged 34; Dr. Eugen Sell, Extraordinary Professor of Chemistry in the University of Berlin, and Director of the Chemical Laboratory of the Imperial Health Office, aged 54; Dr. Léon Coze, Professor of Medicine and Therapeutics in the Medical Faculty of Nancy, and formerly Professor of Pharmacy in the University of Strassburg, aged 77; Dr. Saul Kowner, formerly Medical Director of the Njeschin District Hospital (Russia),

author of a work on the philosophy of Spinoza, and of a history of medicine in three volumes, aged 58; Dr. Wenzel Güntner, Emeritus Professor of Surgery at Salzburg; Dr. Belohradsky, Extraordinary Professor of Forensic Medicine in the Czech Medical Faculty of the University of Prague; Dr. A. B. Shaw, Professor of Neurology in the Beaumont Hospital Medical College, St. Louis, aged 48; Dr. Vermeulen, of Ghent, Inspector of Lunatic Asylums, and one of the most distinguished of Belgian alienists; Dr. Ricardo Gutierrez, of Buenos Ayres, the first practitioner in Argentina who took up the speciality of children's diseases, a writer and poet of considerable reputation, aged 60; and Dr. E. Trastour, Emeritus Professor of Clinical Medicine in the Medical School of Nantes, aged 68.

NAVAL AND MILITARY MEDICAL SERVICES.

ARMY MEDICAL STAFF EXCHANGE.

The charge for inserting notices respecting Exchanges in the Army Medical Department is 3s. 6d., which should be forwarded in stamps or post office order with the notice, not later than Wednesday morning, in order to ensure insertion in the current issue.

WANTED, exchange to England with tour-expired officer, trooping season 1897-98, by Surgeon-Lieutenant-Colonel, who arrived in India, December, 1895. Address—S.M.O., Station Hospital, Nusserebad, Bombay.

THE ARMY MEDICAL SCHOOL.

As we announced on October 17th would be the case, an extra assistant to Professor Wright has been appointed. The officer is Surgeon-Captain F. Smith, who, to his credit be it said, rose to the commissioned ranks of the Army Medical Staff from the position of Staff-Sergeant, Medical Staff Corps. This officer will be attached to the Surgical Division of the Royal Victoria Hospital for duty in addition to his work in the Pathological Laboratory.

APPROACHING VACANCY AT NETLEY HOSPITAL.

BRIGADE-SURGEON-LIEUTENANT-COLONEL E. J. FAIRLAND, A.M.S., Assistant Professor of Clinical and Military Medicine, will be moved from Netley on promotion to Surgeon-Colonel's grade, probably early in December.

THE SURGEON-COLONELS' ROSTER.

The following list of officers and the times of their arrival home will show their respective positions for foreign service:—

Surgeon-Colonel W. D. Wilson	...	...	November, 1895
" W. S. Price...	...	...	February, 1895
" W. E. Riordan	...	...	March, 1895
" J. H. Hughes	...	...	April, 1895
" J. Maturin	...	...	October, 1895
" T. O. Farrell	...	...	"
" R. H. Carew	...	...	March, 1893
" H. Comerford	...	...	July, 1896

THE NAVY.

The following appointments have been made at the Admiralty: JAMES P. WILLIS, M.B., Surgeon, to the *Victory*, for disposal, October 24th; JOHN GRANT, M.B., Surgeon, to be lent for three months' study at Edinburgh University and Infirmary; WILLIAM R. CENTER, M.B., Surgeon, to be lent to the *Cambridge*, October 27th; CORNELIUS BRADLEY, M.D., Surgeon, to the *Inflexible*, temporarily, October 21st; CHARLES H. UPHAM, Surgeon, to the *Defiance*, October 21st; NORMAN L. RICHARDS, Surgeon, to Plymouth Hospital, undated; D'ARCY HARVEY, Surgeon, to the *Wye*, November 4th; JOHN JENKINS, Surgeon, to the *Pembroke*, November 4th; ROBLEY H. J. BROWNE, Surgeon, to the *Pembroke*, additional, for three months' instruction at a metropolitan hospital.

Inspector-General CHARLES McSHANE died at Southsea on October 18th, at the age of 76. He was appointed Surgeon, August 17th, 1844; Staff-Surgeon, January 26th, 1855; Fleet-Surgeon, November 17th, 1865; Deputy-Inspector-General, March 3rd, 1876; and Inspector-General, August 7th, 1880, on retirement from the service. He was present at the attack on the sea defences of Sebastopol in 1854, and was attached as Surgeon to the Medical Staff at Therapia in 1855. He had the Crimean and Turkish medals, with a clasp for Sebastopol, and was in receipt of a Greenwich Hospital pension.

ARMY MEDICAL STAFF.

SURGEON-LIEUTENANT-COLONEL G. T. LANGRIDGE is promoted to be Brigade-Surgeon-Lieutenant-Colonel, *vice* J. G. Williamson, retired, July 22nd. Brigade-Surgeon-Lieutenant-Colonel Langridge's previous commissions are thus dated: Surgeon, September 34th, 1873; Surgeon-Major, September 30th, 1885; and Surgeon-Lieutenant-Colonel, September 30th, 1890. He served in the Afghan war of 1878-80 with the Koorum and Cabul Field Forces, including the affair at Karatiga, and the engagement at

MEDICO-LEGAL.

RANSOM v. OD CHEM CO.

In the High Court of Justice (Chancery Division), before Mr. Justice Cave, on October 21st, 1896, a motion upon behalf of the plaintiff, Dr. William Bramwell Ransom, a physician practising at Nottingham, and physician to the Nottingham General Hospital, for an injunction to restrain the defendants, their managers, servants, and agents, from publishing, circulating, or otherwise distributing any circulars or pamphlets containing or purporting to contain any writing or testimonial purported to be given or sent by the plaintiff in relation to the defendant's preparation or drug called Sanmetto, and from in any way representing or leading the public and other medical men to believe that the plaintiff had used the said drug or had certified as to its effects, or for such further or other order as to the Court should seem fit.

Mr. Boome, in support of the motion, said, according to the report in the *Times*, that the plaintiff was a gentleman holding very high qualifications. In addition to holding the appointment of physician to the Nottingham General Hospital, he was an M.D. of London, M.R.C.P. London, M.R.C.S. England, M.A. and late Fellow of Trinity College, Cambridge, and B.Sc. London. On September 3rd he received by post a pamphlet purporting to contain a testimonial from him in favour of a drug called "Sanmetto." The testimonial was as follows: "Hurrah for Sanmetto. W. B. Ransom, M.A., B.Sc., M.D., M.R.C.P. Lond., M.R.C.S., Fell. Roy. Med. Chir. Soc., Phys. Nott. Gen. Hosp., Balwell, Nottingham, England, says: 'Hurrah for Sanmetto. My results from its use in bladder cases astonished my confrères.....'" The testimonial then went on to say that in a certain disease its effect was nothing short of magical. The plaintiff had never seen or used the drug or given any testimonial respecting it. By way of answer the defendants set up that they had received a postcard purporting to come from the plaintiff, and containing statements something to the effect of those contained in the spurious testimonial.

Mr. Hart, for the defendant company, said that not only had the plaintiff been the victim of a cruel hoax in the nature of forgery, but the defendant company equally so. The signature upon the postcard bore a striking resemblance to the plaintiff's signature; but now that Dr. Ransom had come forward and had sworn that he had not written the testimonial, the defendants were willing to give an undertaking until the trial. A discussion then took place as to the form of an order by consent, but the parties being unable to agree.

Mr. Justice Cave said: There must be an injunction in terms of the notice of motion until the trial, and the costs must be the plaintiff's costs in the cause.

QUEEN'S BENCH DIVISION. (Before Mr. Justice Hawkins.)

BEATTY v. CULLINGWORTH.

This case was partly heard last sittings. It was an action by a professional nurse claiming damages on the ground that the operation which the defendant had performed was contrary to her explicit directions. It was arranged that the further hearing should be continued on November 16th, subject to there not being any part-heard case appointed for that day.

ILLEGAL SALE OF POISONS.

At Bow County Court on October 27th, proceedings were taken against a seaman who, according to the report in the *Daily News*, not being a registered chemist, was said to have sold a vermin killer which contained enough arsenic to poison 150 people. It was contended, however, that the defendant had merely acted for another man; but as it appeared he was liable, the judge made an order for the payment of £5 and costs at the rate of 1s. a month.

VACCINATION IN LEWISHAM.

In the Queen's Bench Division, before Mr. Justice Grantham and Mr. Justice Kennedy, on October 27th, application was made on behalf of the Lewisham District Board of Works for a rule nisi to compel the Guardians of the Lewisham Union to direct prosecutions for non-compliance with the Vaccination Acts, and also generally to enforce the law relating to vaccination. It was stated, according to the report in the *Times*, that for a long time the Guardians had simply excused anyone who said he objected to having his child vaccinated. After some discussion the rule was granted.

M.D. BRUX.

STUDENT asks the following questions: 1. Is the M.D. Brux. recognised in England and by the Apothecaries' Society? 2. A chemist gives advice and medicine; is this legal? 3. Can a qualified man employ an unqualified assistant who is not a student or chemist, and can such unqualified assistant give medicine and advice in the absence of the doctor?

* * 1. The degree of M.D. Brux. does not *per se* confer the right to practise in this country.

2. A chemist cannot legally advise or prescribe for patients.

3. An unqualified assistant should only act under the immediate supervision of his employer.

LIABILITY FOR MEDICAL ATTENDANCE ON SERVANT.

MEMBER asks our opinion on the following point: A lady having a large establishment is one day away from home. In her absence one of the servants meets with an accident, and our correspondent, being the nearest medical practitioner, is called in by a gentleman who is then a visitor at the house. He subsequently attends the servant to which the lady makes no objection, but when the account is rendered, she refuses payment on the plea that she never sent for him. Under such circumstances who is liable for the amount of the bill? Our correspondent

adds that the accident was not due to any carelessness on the part of the servant who was injured.

* * We observe that our correspondent writes from Scotland, and we can only reply to his question on the basis of the law as it prevails in this country. A mistress is not bound to provide medical assistance for her servant, but the obligation, if any, must arise from contract. Such a contract will not be implied because the servant is living under the mistress's roof nor because the illness of the servant has arisen from an accident met within the mistress's service. It is not altogether clear that the visitor who requested our correspondent's attendance is not liable. It has been held that even a mere stranger directing a surgeon to attend a poor man is liable to pay the surgeon's bill. It might be well to ask the visitor in this case if he is prepared to pay, otherwise our correspondent must, we think, look to the servant personally for his account.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF OXFORD.

At a meeting of the Master and Fellows of Pembroke College, Oxford, on October 22nd, Mr. Walter Ramsden, B.A., of Keble College, was elected Sheppard Fellow on the medical side of that foundation.

UNIVERSITY OF CAMBRIDGE.

APPOINTMENTS.—Mr E. H. Douty has been reappointed University Lecturer in Midwifery; Messrs. H. F. Newall, S. Skinner, F. H. Neville, S. Ruhemann, A. C. Seward, and J. J. Lister Examiners for the First M.B. Examination; Dr. A. Hill, Dr. L. E. Shore. Professor Paterson, Professor Halliburton, Mr. A. Ivatt, and Mr. R. H. Adie Examiners for the Second M.B. Examination.

PROFESSORSHIP OF SURGERY.—The General Board of Studies have reported in favour of granting a stipend of £500 a year to the Professor of Surgery, with liberty to hold a Fellowship and to engage in private practice. The Financial Board, however, point out that not more than £300 a year is at present available, owing to the depressed state of the University funds, though they hope that by 1898 it may be found possible to find the remaining £200. It is accordingly recommended that the stipend of the chair be fixed at £300 until the University shall otherwise provide.

ENTRY OF MEDICAL STUDENTS.—From returns kindly furnished by the College tutors and directors of studies, it appears that 135 of the freshmen entered this term have announced their intention of studying medicine. This is slightly lower than the number last year. The total number of freshmen matriculated this term is also somewhat less than in 1895.

UNIVERSITY OF LONDON.

An autumn meeting of Convocation, held in accordance with a resolution passed by Convocation in May last, took place on October 27th. Mr. Busk, Chairman, presided. It was fully ten minutes after the appointed time of meeting before a quorum of members (50) was present, and at no time were 100 graduates in the room.

MODE OF VOTING.—Dr. S. P. Thompson, D.Sc., moved:

That Standing Order No. 62 be omitted, and in lieu thereof the following be substituted: "The list of names of the graduates who shall have voted shall be printed in the *Proceedings of Convocation*."

Mr. H. M. Bompas, Q.C., objected to the resolution, as it would substitute open voting for voting by ballot in the election of members of the Senate. Mr. G. Eastes, M.B., held also that that was not desirable. The resolution was lost by a large majority.

THE SCHEMES OF RECONSTRUCTION.—The second resolution, standing in the name of Dr. S. P. Thompson, which directed that five various amendments to the scheme of reconstruction of the University should be placed before the Statutory Commission, was ruled by the Chairman, "under the rules of good debate," to be out of order on the ground that Convocation had no power to discuss any question which was under the consideration of a Committee of the House. The questions could be brought under the notice of the Committee which had been appointed in May last to watch and consider the whole subject.

HIGH STANDARD OF EXAMINATIONS.—Mr. W. J. Spratling, B.Sc., moved the following resolution:

That the excessively high standard maintained by this University in conferring its highest degrees has worked an injustice to many of its graduates, and is the main cause of the agitation from which the University is at present suffering. That steps be therefore taken to co-ordinate these degrees with those conferred by the other British universities:

1. That, for this purpose, powers be obtained to confer the title of "Fellow of the University" upon all graduates who, up to the present, have attained or shall in the future attain to the highest degree in their several faculties, according to the present high standard.

2. That the degree of Master or Doctor be conferred upon all Bachelors in the several faculties who have reached, or shall hereafter reach, such a standard in Honours in their final examination as the Senate may deem adequate.

He said that one of the main reasons why medical students did not flock to the University was the very high standard of its examinations, and the amount of time required in order to obtain the degrees. Again, the B.A. Lond. was more difficult to obtain than the B.A. Oxon. or Cantab., but the B.A. of these latter universities could after three years, by paying his fee, obtain the M.A. degree. In London this was of course impos-

sible; and this proposal was framed to rectify the anomaly. But as the proposition found no seconder it was dropped.

PROPOSED UNIVERSITY PROFESSORSHIPS.—Mr. W. T. Lynn, B.A., moved the following resolution:

That this House earnestly desires the early establishment, in accordance with the expressed intentions of the founders of the University, of University professorships and lectureships in science and literature, together with such institutions as may tend to the encouragement of original study and research on the part of members of the University.

Mr. T. Tyler, M.A., seconded the proposal, which was supported by Dr. W. J. Collins, Dr. S. P. Thompson, Dr. T. B. Napier, and Sir Philip Magnus, who all desired to see the establishment of University professorships. But, as the last speaker observed, there was little hope that the resolution could be carried out in the coming session of Parliament, as the estimates for the professorships would have to be placed among the estimates of the University and voted by the House of Commons, and in the present transition state of the University the Government would probably not be persuaded to place such estimates before the House. Mr. H. M. Bompas, Q.C., stated that over thirty years ago he had tried to make arrangements for courses of lectures in connection with the University, to be delivered gratuitously by distinguished graduates and other gentlemen, but the scheme fell through. He believed graduates of the University would to-day give such lectures for the honour of the thing. It was, however, the great professorships of Oxford and Cambridge which the University of London should endeavour to imitate. He hoped the Senate would attempt something of the kind at once. The resolution, slightly modified in its wording, was passed unanimously.

PROPOSED ASTRONOMICAL OBSERVATORY.—Mr. W. T. Lynn, B.A., moved a resolution in favour of establishing an astronomical observatory in connection with the University. Mr. T. Tyler, M.A., seconded the resolution, and Mr. W. Coode Adams, M.B., stated that, if the University would use the ground of the Botanical Society for its observatory, the Society would grant the use of a site free of rent. The small meteorological building in the gardens was 140 feet above the level of the Thames, and consequently above the general fog line. The resolution was carried unanimously.

The Chairman ruled out of order a resolution expressing sympathy with the Armenians.

A resolution proposing that no motion for adjournment should be received before 8 P.M. was not seconded.

EDINBURGH UNIVERSITY GRADUATION CEREMONIAL.

A SPECIAL graduation ceremonial was held on Saturday, October 24th, when the degrees of Bachelor of Medicine and Master in Surgery were conferred on the following forty-two gentlemen:

H. de M. Alexander, J. Anderson, W. Anderson, J. G. Bailey, A. B. Blair, A. W. Bowie, A. G. Carment, H. O. Dougall, C. C. Forrester, R. M. L. Gibson, W. T. Grant, S. J. O'Leary, W. T. Hedley, A. Hosking, R. Irvine, T. Johnstone, A. L. Jones, G. H. List, M. McKenzie, B.A., R. L. McKirdy, M.A., J. McMaster, J. D. G. Macpherson, N. Maudsley, B. N. Mullan, B. K. Nariman, H. Peck, W. J. Penfold, C. Porter, C. W. Reid, A. Rutherford, G. A. S. Sander, A. E. Scott, G. B. Serle, H. W. Smith (*in absentia*), J. F. Strickland, G. C. Taylor, A. E. White, A. E. Williams, F. Wilson, J. F. Wolfe, R. S. Young, and A. D. Yule (with second-class honours).

CONJOINT BOARD IN IRELAND.

SECOND PROFESSIONAL EXAMINATION.—The following candidates have passed this examination as undernoted:

Completed the Examination.—C. W. Crowe, T. O'C. Donelan, M. F. Hession, M. J. Hynes, C. G. Jones, G. Kennedy, N. P. Kirby, J. W. Langstaff, J. F. Loughrey, H. S. Maxwell, J. I. McGrath, H. J. C. Wallace, A. A. Woods.

Passed in Anatomy.—W. J. Anglim, A. D. Dunwoody, R. J. Franklin, P. A. Frazer, J. L. Jones, L. G. de Rosario, T. A. E. Rooke, G. F. Sheehan, J. Whelan.

Passed in Physiology.—W. J. Anglim, W. R. Blackwell, G. C. L. Kerans. *Passed in Materia Medica.*—R. B. Daly, P. J. M'Ginn, L. G. de Rosario, M. J. Russell, R. J. White.

Passed in Histology.—W. J. Anglim, A. D. C. Cummins, R. B. Daly, P. A. Frazer, C. A. A. Lener, T. A. E. Rooke, G. Tickell.

SOCIETY OF APOTHECARIES OF LONDON.

PASS LIST (October, 1896).—The following candidates passed in:

Surgery.—G. F. M. Clarke, Charing Cross Hospital; T. S. Collin, Manchester; G. W. Dutton, Middlesex Hospital; F. R. M. Heggs, Birmingham; W. J. Henson, Guy's Hospital; E. L. C. Muspratt, King's College Hospital; H. S. Oliver, Charing Cross Hospital.

Medicine, Forensic Medicine, and Midwifery.—G. E. Brooke, Cambridge and London; A. V. Moreton, Manchester; F. H. Wilkinson, Liverpool; J. B. Wall, St. Mary's Hospital.

Medicine and Forensic Medicine.—T. H. Guillaume, Dublin and Charing Cross Hospital.

Medicine and Midwifery.—A. Arent, St. George's Hospital; G. S. Thompson, St. George's Hospital.

Medicine.—J. Gott, King's College Hospital; A. P. Square, Middlesex Hospital.

Forensic Medicine and Midwifery.—R. S. Thompson, Belfast.

Midwifery.—A. J. Hull, Guy's Hospital; A. C. McLean, King's College Hospital.

The diploma of the Society was granted to the following candidates: Messrs. Collin, Heggs, McLean, Moreton, Oliver, and Wall.

Messrs. G. P. Putnam's Sons announce *A Textbook for Training Schools for Nurses*, including physiology and hygiene, and the principles and practice of nursing, by Dr. P. M. Wise, with an introduction by Dr. Edward Cowles, of Boston (illustrated) in 2 vols.

PUBLIC HEALTH

AND

POOR-LAW MEDICAL SERVICES.

THE SIGNIFICANCE OF SEWAGE-POLLUTED SUBSOILS: SOUTHBEND-ON-SEA.

At Southend-on-Sea during the past few years there has been a large amount of typhoid fever, ascribed by the local medical officer of health to the foul condition of the subsoil, polluted so long by excremental matter. The place is a health resort of much importance to London, seeing that some three-quarters of a million of people resort thither during five months of the year. The population, which was not 5,000 a quarter of a century back, is to-day estimated at 18,000, and 4,000 people are said to be taken there by sea from the metropolis every day in the summer. In the seven years ending with 1895 there have been 811 ascertained attacks from typhoid fever, and 69 deaths, or 8.5 per cent. of cases. We do not here enter into the varied phases of the prevalence disclosed by these data, as does Dr. Bruce Low in his recent elaborate report to the Local Government Board, but we merely state the figures to indicate the amount of fever with which the borough has had to contend during the last few years. Last year there were 95 cases reported, and the local health officer ascribes 54 per cent. of them to defects in the drains of houses. He tells how the practice has long prevailed of burying the excreta of fever patients in the gardens of houses, and of putting imperfectly disinfected excreta down the sometimes leaky house drains. He believes the soil of the town has thus become specifically polluted. The admittedly defective condition of certain tide-locked sewers has led to escape of sewage into the surrounding soil, and to flooding of the basements of houses. Some sewers are said to be laid with open joints and in running sand. Dr. Low, having passed in review all the sanitary circumstances of Southend, comes to the conclusion that the endemic prevalence and seasonal development of typhoid fever in the place are due to sustained befoulment of the superficial soil. The escape of excremental matters into the soil for many years has had the result of fostering a condition favourable to the spread of fever, Dr. Ballard's researches into the intimate relationship of diarrhoeal diseases and high temperature acting on a contaminated subsoil having demonstrated just what happened at Southend.

It is more pleasant reading to learn that the defects of sewers and drains have for some years tended to disappear under the attempts of the council to rid the town of these blots on its face. Doubtless the salutary lesson taught by the production of a Governmental report on the coast town will not be without its result in hastening of the removal of such defects as Dr. Low points out.

COUNTY HOSPITAL SCHEME.

A MEETING of sanitary authorities in Cheshire, convened at the instance of the Dukinfield Urban District Council, has been recently held in Manchester, to discuss the proposals of the county health officer, with reference to isolation hospital schemes for the county, under the Act of 1893. The county council have accepted Dr. Vacher's proposals, and have by this means raised great opposition on the part of the constituent local bodies. The outcome of the meeting has been to carry a resolution, by 18 votes to 1, opposed to the views of the county council, basing the resolution on the want of knowledge of the efficacy of hospitals in preventing the spread of disease. The views of some of the Cheshire local authorities have been in past years leaning towards a non-hospital policy, but it seems hardly credible that opinion should still be so largely biased against the usefulness of isolation buildings—a usefulness which has over and over again been verified in the curtailment of epidemics by the prompt removal to efficient hospital treatment of the early cases of infectious disease. The question of small-pox isolation was for some reason prominently brought forward, and the idea scouted, just at a time when certain Royal Commissioners would have us believe that this method of combating small-pox is an ideal mode of staying its spread. But the Cheshire schemes, we take it, have in view the other infectious fevers, rather than small-pox, and Dr. Porter, of Stockport, was able to confute the statements made as to the doubtfulness of hospitals as aids to disease prevention. We trust the county council will not be daunted by the persistence of a short-sighted policy. Whilst efficiency of hospital provision is being pressed for, however, there need be no excessive burdening of rates; Cheshire ought to lend itself to groupings which should secure hospitals of useful character for a reasonable annual outlay, and the return in the shape of money saved by arrested outbreaks of expensive sort, should more than recoup the county coffers. It is the old story of false economy, backed by unreasoning prejudice, that bars the way to smooth working of the Isolation Hospitals Act.

information were given regarding the salubrity of [the town. There were 2,515 major and 31,386 minor operations performed. Nearly one-half of the former were ophthalmic, and a large proportion of the remainder were trivial, such as opening abscesses and tapping and injecting hydroceles. The death-rate among indoor patients was 9.5 per cent. of total treated, and the mortality of major operations was 4.8 per cent. The cost of maintaining these hospitals was about 4 lakhs of rupees, of which Government contributed about 3 lakhs, most of the balance being obtained from municipal funds, the Tort Trust, and paying patients (Rs.33,450).

MEDICAL NEWS.

WE learn, as we go to press, that the number of undergraduates newly entered at Cambridge in the medical school is 146. The number at Oxford is 25.

DR. T. CRAWFORD HAYES, Physician for Diseases of Women to King's College Hospital, has been appointed by the Council of King's College Professor of Practical Obstetrics.

THE next meeting of the International Congress of Criminal Anthropology will be held, by invitation of the Dutch Government, at the Hague in 1901.

THE title of Excellency has been conferred on Professor Max von Pettenkofer, the distinguished hygienist, of Munich.

H.R.H. THE PRINCESS OF WALES has sent a donation of £20 in aid of the Extension and Improvement Fund of Queen Charlotte's Lying-In Hospital, Marylebone Road, of which she is a vice-patron.

THE Local Government Board has given its sanction, subject to certain reservations, to the purchase by the Metropolitan Asylums Board of 136 acres of land at West Croft, Carlsholton, as a site for a southern convalescent fever hospital for about 700 patients.

IN view of the spread of leprosy in the Transvaal it is reported that the Transvaal Government are about to erect a suitable establishment for the accommodation of this class. A site has been selected west of Pretoria, in the neighbourhood of the present leper asylum.

THE Royal University of Ireland on October 23rd conferred the degree of M.D. *honoris causa* on Sir Charles Cameron, Medical Officer of Health for Dublin. Sir Charles Cameron's original contributions to medical, chemical, and hygienic literature have been numerous and important.

INSANITY IN PENNSYLVANIA.—Statistics of public institutions in Pennsylvania, including State and private hospitals, almshouses, and gaols for the past twelve years show that the number of insane among the inmates has steadily increased. In the period 1884-95, the sum of the annual increases was 3,587, being an average annual increase of 299.

INSURANCE RATES FOR "THE LIQUOR TRADE."—In view of the resumption of the sittings of the Royal Commission on Liquor, it is stated that, compared with ordinary occupations, one great life office taxes publicans 25s. per cent. per annum; hotel and innkeepers, 20s.; licensed grocers in Ireland, 15s.; and in Scotland, 10s.

MASSACHUSETTS GENERAL HOSPITAL.—A laboratory built for the Massachusetts General Hospital, Boston, at a cost of over 20,000 dollars (£4,000) will soon be ready for use. The building includes well-equipped laboratories of chemistry, bacteriology, and histology. It is hoped that an additional sum of 100,000 dollars (£20,000) will be collected for an endowment.

MR. BANCROFT purposes devoting a great part of the winter to reading Dickens's *Christmas Carol* in the cause of charity, particularly on behalf of the great hospitals in London and the provinces. He hopes to continue these readings until he has visited all the principal towns in the United Kingdom, and in every case the entire receipts will be handed over to the authorities without deduction, except in payment of local charges, such as rent of building and cost of printing. Mr. Bancroft will commence his good work on November 23rd in Queen's Hall, in aid of the cancer wards of Middlesex Hospital.

A CORONER'S JURY ON UNQUALIFIED PRACTICE.—At the inquest on Sophia Louisa Holliday, who died at Battersea on August 31st, after being treated for cancer by an "American doctor" named Ferdinand, who, it was alleged, professed to be able to cure the disease, after five days' inquiry the verdict was arrived at that the deceased died from cancer, and the jury added the following as a rider: "We agree that John Ferdinand's treatment of the deceased was of a bad and reckless nature, but we do not consider the evidence sufficient to prove him guilty of manslaughter. The jury, in regretfully recording this verdict, desire to earnestly direct the attention of the authorities to the impunity with which persons of apparently no education or medical skill can, by means of extensive advertising, promise cures of incurable diseases, and thus defraud the working classes, who have no facilities for investigating their qualifications, of large sums of money, and probably in some cases hasten death; and the jury recommend most strongly that there should be some legislation giving the police power to interfere with such practices. The jury desire to add an appeal to the coroner to direct the attention of the police to the wilful perjury which John Ferdinand has committed in this court, and it is the jury's opinion that he has been guilty of obtaining money under false pretences."

At a meeting of the Select Committee on Medical Defence of the Civil Rights Defence Committee, on October 16th, a letter was read from the Faculty of Physicians and Surgeons of Glasgow stating that it had instructed its representative on the General Medical Council in the sense of the instructions given by the Royal College of Surgeons of England. A vote of thanks was passed to the British Guiana Branch of the British Medical Association for its resolution expressing strong sympathy with Mr. Anderson in his prolonged defence of his rights against judicial oppression and for its vote of £10 from the funds of the Branch, as well as for subscriptions amounting to £8 10s. from its members. It was resolved to make representations to the Association of Fellows and to the Society of Members of the Royal College of Surgeons of England inviting them to co-operate in moving and supporting at the annual meeting at the College in November a request to the Council of the College for a grant from its funds in aid of the Civil Rights Defence Committee in their defence of the rights of Fellows and Members involved in the case of Mr. R. B. Anderson, F.R.C.S. It was also reported that a letter and explanatory statement had been forwarded to candidates for seats on the General Medical Council who had expressed doubts as to the power and duty of the Council to apply its funds and exercise its powers in defence of such rights.

MALARIA IN THE TRANSCASPIAN.—Details are now to hand, says the *Times* correspondent, of the terrible malarial fever prevailing this year among the native population and the Russian troops in the Transcaspien. That region has been particularly unfortunate since the Russian occupation in producing first the Panjdeh plague, then an outbreak of boils and blains at Merv, and now a peculiar kind of fever of a very virulent nature, which began to attack the inhabitants of the Merv oasis and the troops of the garrison in spring and in June, had attained the dimensions of an epidemic. In a great many of the Turkoman aouls or villages of kikitka tents not a single person escaped it. From the middle of March to the beginning of September 4,330 died out of the total population of the oasis, numbering 86,000, which is a mortality of 50 per 1,000 during six months. The troops, both men and officers, also suffered severely, and a few cases were fatal. The cause of the epidemic is supposed to have been the extraordinary overflow last spring of the Murghab, and the effect of subsequent excessive heat upon the inundated and sodden soil. Measures of relief were taken by General Kuropatkin by removing the sick and the entire camp to healthier ground, and about 40,000 roubles were spent on extra medical assistance, improvements of diet, ambulance expenses, etc. Apparently the epidemic is by no means over, for a letter dated from Kerok, on the Amu-Daria, at the end of last month, says: "Malaria is raging here. Hundreds of persons are attacked daily, and quinine, which is served out in enormous quantities, cannot be procured fast enough. There have also been cases of yellow fever."

THE INTERNATIONAL MEDICAL CONGRESS.—We are asked to state that the organisers of the Surgical Section of the forthcoming International Medical Congress at Moscow propose to collect statistics of the administration of anæsthetics in all countries during 1896. They will, therefore, be glad to receive information from any member of the profession in a position to give it on the following points: (1) Number of administrations from January 1st, 1896, to January 1st, 1897; (2) the anæsthetic used; (3) number of deaths. Replies should be sent not later than July 1st, 1897, to the Secretary of the Surgical Section, Dr. F. Rein, Maison Scheschkov, Malaja Dmitrovka, Moscow, Russia.

MEDICAL VACANCIES.

The following vacancies are announced:

- BIRMINGHAM AND MIDLAND FREE HOSPITAL FOR SICK CHILDREN.**—Resident Surgical Officer. Salary, £50, with board, washing, and attendance. Applications to the Secretary, Children's Hospital, Steelhouse Lane, Birmingham, by November 4th.
- BOROUGH HOSPITAL, Birkenhead.**—Junior House-Surgeon; doubly qualified. Salary, £60 per annum, with board, lodging, and washing, but no wine, spirits, or beer. A further sum of from £20 to £25 a year is usually obtained from notification of infectious diseases and other sources. Applications to the Chairman of the Weekly Board by November 9th.
- CHESTERFIELD AND NORTH DERBYSHIRE HOSPITAL AND DISPENSARY, Chesterfield.**—Junior House-Surgeon and Dispenser. Salary, £50 per annum, with board, apartments, and laundress. Applications to the Secretary at the Hospital by November 5th.
- CHURCH OF SCOTLAND WOMEN'S ASSOCIATION FOR FOREIGN MISSIONS.**—Woman Doctor as Medical Missionary for Poona. Application to the Secretary, 22, Queen Street, Edinburgh.
- CITY ORTHOPEDIC HOSPITAL, Hatton Garden.**—Assistant Surgeon on the Honorary Medical Staff; must be F. or M.R.C.S.Eng. Applications to the Committee by November 20th.
- EAST LONDON HOSPITAL FOR CHILDREN AND DISPENSARY FOR WOMEN, Glamis Road, Shadwell, E.**—Pathologist and Registrar. Salary, £40 per annum. Applications to the Secretary by November 28th.
- GESIO HOSPITAL, Island of Skye.**—Medical Officer. Salary, £200 per annum, with furnished house, fire, and light. A knowledge of Gaelic desirable. Applications to Joshua MacLennan, Solicitor, Portree, Secretary to the Hospital Trust, by November 1st.
- GOVERNMENT LEPROSY HOSPITAL, Robben Island, near Cape Town.**—Resident Medical Officer and Bacteriologist. Appointment for two or three years. Salary at the rate of £500 a year, with quarters and rations. First-class passage by steamer to Cape Town provided for the successful candidate, and if engagement renewed similar passage home again provided. Applications to the Agent-General for the Cape of Good Hope, 112, Victoria Street, London, S.W., by November 5th.
- GOVERNMENT LUNATIC ASYLUM, Fort Beaufort, Cape Colony.**—Medical Superintendent. Salary at the rate of £300 a year, with quarters and rations. Appointment for three years. First class passage provided. Applications to the Agent General for the Cape of Good Hope, 112, Victoria Street, London, S.W., by November 5th.
- GLASGOW MATERNITY HOSPITAL.**—Obstetric Physician. Salary, £50 per annum. Applications to Arthur Forbes, Secretary, 146, Buchanan Street, Glasgow, by November 14th, of whom further particulars can be obtained.
- HOSPITAL FOR WOMEN, Soho Square, W.**—House-Physician; doubly qualified. Appointment for six months. Salary, £30. Applications to David Cannon, Secretary, by November 11th.
- MIDDLESEX HOSPITAL, W.**—Surgical Registrar; must be M. or F.R.C.S.Eng. Applications to F. Clare-Melhado, Secretary-Superintendent by November 19th.
- NOTTINGHAM GENERAL DISPENSARY.**—Resident Surgeon for a Branch Dispensary; must be doubly qualified. Salary, £200 per annum, with rooms and attendance. Applications to Charles H. Preston, Secretary, the General Dispensary, Broad Road, Nottingham, by November 16th.
- PARISH COUNCIL OF INVERARY AND GLENARY AND BURGH OF INVERARY FOR THE NORTH DIVISION OF THE PARISH.**—Medical Officer. Joint salary £85, and about £30 from two Societies. Applications to the Clerk of the Parish Council, or to the Town Clerk of Inverary, by November 10th.
- PARISH OF DURNES, Sutherland.**—Medical Officer. Salary, £150 per annum, with practice and free house. Applications to Robert Sutherland, Inspector of Poor, by November 10th.
- ROYAL EAR HOSPITAL, Frith Street, Soho Square, W.**—House-Surgeon; non-resident. Appointment for six months at an honorarium of 12 guineas. Applications to D. Murray, Secretary, by November 10th.
- ROYAL HOSPITAL FOR DISEASES OF THE CHEST, City Road, E.C.**—Resident Medical Officer. Appointment for six months, when re-election is required. Salary at the rate of £100 per annum, with furnished apartments, board, and washing. Applications to the Secretary at the Hospital by November 4th.
- ST. MARK'S HOSPITAL FOR FISTULA AND OTHER DISEASES OF THE RECTUM, City Road, E.C.**—House-Surgeon; must be F. or M.R.C.S.Eng. Salary, £50 per annum, with board and lodging. Applications to the Secretary by November 3rd.
- SEAMEN'S HOSPITAL SOCIETY.**—House-Surgeon at the *Dreadnought* Hospital, Greenwich; doubly qualified. Applications to P. Michelli, Secretary, by November 9th.

WEST END HOSPITAL FOR DISEASES OF THE NERVOUS SYSTEM. PARALYSIS, AND EPILEPSY, 73, Welbeck Street, W.—Honorary Anæsthetist. Applications to B. Heckstall-Smith, Secretary, by November 13th.

WOLVERHAMPTON EYE INFIRMARY.—House-Surgeon. Appointment for twelve months. Salary, £60 per annum, with rooms, board, and washing. Applications to the Secretary by November 5th.

MEDICAL APPOINTMENTS.

- ADAMS, P. E., M.R.C.S., L.R.C.P.,** appointed House-Surgeon to the Dorset County Hospital.
- ARMITAGE, Edward, L.R.C.P., L.R.C.S. Edin.,** reappointed Medical Officer of Health to the Grimsby Rural District Council.
- ASHWIN, R. H., L.R.C.P. Lond., M.R.C.S. Eng.,** appointed Assistant House-Surgeon to the County Hospital, York, *vice* G. W. Gostling, M.B. Lond., promoted to House-Surgeon.
- BERNARD, C. J., L.A.H. Dub., L.M.,** reappointed Medical Officer of Health to the Skegness Urban District Council.
- DOBBS, Kildare Dixon (Borrowes), L.R.C.P., L.R.C.S.I.,** appointed Medical Officer for the Tutbury District of the Burton-on-Trent Union.
- DUNN, P. H., L.R.C.P. Lond., M.R.C.S. Eng.,** appointed Medical Officer for the Fourth District of the Hitchin Union.
- FARNSON, C. T., M.D. Lond.,** appointed Senior Assistant Medical Superintendent to the Fulham Union Infirmary.
- GARDNER, Mr.,** appointed Honorary Surgeon to the Torbay Hospital, *vice* F. T. Thistle, L.R.C.P., L.R.C.S. Edin., appointed Honorary Physician.
- HAYDEN, R. H. H., L.R.C.P. & S.I.,** appointed District Surgeon of Sutherland, Cape Colony, *vice* J. Maciver, M.B., C.M., resigned.
- JENKINS, Dr. G. H.,** appointed Medical Officer for the Usk District of the Pontypool Union.
- JOHNSTONE, G. W., L.R.C.P. Edin., L.F.P.S. Glasg.,** appointed Medical Officer for the Upholland District of the Wigtown Union.
- JONES, Frederick Pryce, M.R.C.S. Eng., L.R.C.P. Lond.,** appointed House-Physician to the Swansea General and Eye Hospital, *vice* Dr. Fox Edwards.
- MORRIS, J. H., M.R.C.S. Eng., L.S.A.,** appointed Medical Officer for the Second District of the Salford Union.
- NASH, Lillias Frazer, L.R.C.P. & S. Edin.,** appointed Medical Officer to the Elizabeth Fry Refuge, Mare Street, Hackney, *vice* Dr. Hacon, resigned.
- O'GORMAN, R. P., L.R.C.P., L.R.C.S. Irel.,** appointed Medical Officer for the Fourth District of the Salford Union.
- PIM, F. E. De Beeho, L.R.C.P., L.R.C.S. Irel.,** appointed Medical Officer for the Pendle District at the Burnley Union.
- POTTER, Charles E., M.B., C.M. Edin.,** appointed Medical Officer for the Hartington District of the Ashbourne Union.
- PRINGLE, E. L. Kerr, M.B. Edin.,** appointed, Honorary Surgeon to the Bridgewater Infirmary.
- RENTON, Mr. M. W.,** appointed Medical Officer for the Luddington District of the Goole Union.
- STANWELL, Frederic Skey, M.B., C.M. Edin.,** appointed Assistant Medical Officer to the East Riding Asylum, Beverley.
- THISTLE, Frederick T., L.R.C.P. Lond., M.R.C.S. Eng.,** appointed Honorary Physician to the Torbay Hospital, *vice* Edward Last Smith, L.R.C.P., L.R.C.S. Edin., resigned.
- TURNER, F. M., M.D. Camb.,** appointed Medical Superintendent to the South-Eastern Fever Hospital.
- WAXLEY, G. S. A., L.R.C.P. Lond., M.R.C.S. Eng.,** reappointed Medical Officer of Health to Devizes Rural District Council.
- WILLIAMSON, Dr. James G.,** appointed Medical Officer for the First District of the East Ashford Union.
- WINSHIP, W. A., M.R.C.S. Eng., L.S.A.,** appointed Medical Officer for the Second Division of the Penrith District of the Penrith Union.
- WOODFORD, Dr.,** appointed Medical Officer of Health to the Easthamstead District Council.
- FINN, P. T., L.R.C.P., L.R.C.S. Edin., L.F.P.S. Glasg.,** appointed Assistant Medical Officer to the Isle of Wight County Council.
- LANGWORTHY, Mr.,** appointed Medical Officer for the Fourth District of the Plympton Union, *vice* J. E. Adkins, deceased.
- POTTER, Mr.,** appointed Medical Officer for the Hartington District of the Ashbourne Union.
- HAYES, T. Crawford, M.D., F.R.C.P.,** appointed Professor of Practical Obstetrics at King's College.

DIARY FOR NEXT WEEK.

MONDAY.

LONDON POST-GRADUATE COURSE, Royal London Ophthalmic Hospital, Moorfields, 1 P.M.—Mr. E. Treacher Collins: Injuries of the Eye. **London Throat Hospital, Great Portland Street, W., 8 P.M.**—Mr. George Stoker: Chronic Glandular Diseases of the Nose and Naso-Pharynx.

TUESDAY.

LONDON POST-GRADUATE COURSE, Bethlem Royal Hospital, 2 P.M.—Dr. Craig: Alcoholic Insanity; Insanity with Syphilis; Insanity with Organic Brain Disease. **Hospital for Diseases of the Skin, Blackfriars, 4.30 P.M.**—Dr. Phineas Abraham: Alopecia.

PATHOLOGICAL SOCIETY OF LONDON, 20, Hanover Square, W., 8.30 P.M.—Papers: Mr. C. B. Lockwood: (1) Specimens of Hydro-

salpinx; (2) Ovarian Sacs of Mouse; (3) Undescended Testes. Mr. J. Hutchinson, jun.: (1) Rodent Ulcer of Forearm; (2) Chondrosarcoma of Submaxillary Gland. Dr. H. D. Rolleston: Tubercle of Thyroid with Tuberculous Abscess bursting into Oesophagus. Dr. A. A. Kanthack and Mr. E. H. Shaw: Use of Formalin in the Preparation of Museum Specimens. Dr. H. H. Tooth: Multiple Bronchiectasis. Card Specimens: Dr. Rolleston, Dr. Parkes Weber, Dr. Kanthack, and Mr. T. S. Pigg.

NATIONAL HOSPITAL FOR THE PARALYSED AND EPILEPTIC (Albany Memorial), Queen Square, Bloomsbury, 3.30 P.M.—Dr. Ferrier: Clinical Lecture.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C., 2.30 P.M.—Dr. Lees: Rheumatism and Heart Disease.

WEDNESDAY.

LONDON POST-GRADUATE COURSE, Royal London Ophthalmic Hospital, Moorfields, 8 P.M.—Mr. A. Stanford Morton: Optic Neuritis.

OBSTETRICAL SOCIETY OF LONDON, 20, Hanover Square, W., 8 P.M.—Specimens will be shown by Dr. W. Duncan and others. Papers: Dr. T. G. Stevens: A Case of Completely Cleft Spine associated with an Unusual Visceral Malformation in an Anecephalic Fetus. Dr. T. W. Eden: Demonstration and paper on the Structure of the Ripe Placenta, and the Changes which occur in Placentae retained *in utero* after the Death of the Fetus.

THE CLINICAL MUSEUM, 211, Great Portland Street, 4 P.M.—Demonstration by Mr. Jonathan Hutchinson.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton, 4 P.M.—Dr. Hector Mackenzie: Treatment of Pulmonary Tuberculosis.

WEST LONDON POST-GRADUATE COURSE, West London Hospital, W., 5 P.M.—Dr. Ball: Throat Cases.

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: Qualitative Tests for Sugar and Acetone in Urine. Central London Sick Asylum, Cleveland Street, Mortimer Street, W., 5.30 P.M.—Dr. George Oliver: The Pulse with special reference to Tension.

ROYAL COLLEGE OF PHYSICIANS OF LONDON, 5 P.M.—Dr. W. R. Gowers: The Bradshaw Lecture on Subjective Sensations of Sound.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C., 4 P.M.—Dr. Voelcker: Hydrocephalus.

NEUROLOGICAL SOCIETY OF LONDON, National Hospital, Queen Square, W.C., 8.30 P.M.

HARVEIAN SOCIETY OF LONDON, Stafford Rooms, Titchborne Street, Edgware Road, W., 8.30 P.M.—Clinical Evening.

FRIDAY.

LONDON POST-GRADUATE COURSE, Bacteriological Laboratory, King's College, 3 to 5 P.M.—Professor Crookshank: 3 to 4, Actinomycosis and Glanders; 4 to 5, Staining Sections and Cultivations.

NATIONAL HOSPITAL FOR THE PARALYSED AND EPILEPTIC (Albany Memorial), Queen Square, Bloomsbury, 3.30 P.M.—Dr. Semon: Methods of Examining the Throat and Nose.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C., 11.15 A.M.—Dr. Penrose: Diseases of the Digestive Tract or Demonstration of Cases in the Ward.

BIRTHS, MARRIAGES, AND DEATHS.

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

BIRTH.

PARSONS.—On October 28th, at The Rowans, Lingfield Road, Wimbledon, the wife of F. W. Parsons, L.R.C.P. Lond., of a son.

MARRIAGES.

DOUGLAS—LOCKHART.—On October 22nd, at St. John's Presbyterian Church, Kensington, by the Rev. Charles Moinet, D.D., Carstairs Cumming Douglas, M.D., B.Sc. Skelmorlie, Ayrshire, N.B. to Anita Helena, eldest daughter of W. E. Lockhart, Esq., R.S.A., of 16, Phillimore Gardens, Kensington.

GREY—RIDLEY.—At Corbridge-on-Tyne Parish Church, on October 21st, by the Rev. John Grey, Vicar of Hibaldstow, Lincs., cousin of the bridegroom, assisted by the Rev. Francis Richardson, Vicar of the parish. Thomas Campbell Grey, F.R.C.S., L.R.C.P., of St. Neots, Hunts., second son of John T. Grey, of the Manor House, Shipham, and Weston-super-Mare, Somerset, to Hannah Edith, daughter of William Beverley, of Mount Pleasant, Corbridge.

PARKER—COATS.—At St. James Church, Paisley, on October 21st, by the Rev. W. Ainslie Walton, B.D., assisted by the Rev. James Walker, D.D., Free St. Matthew's, Glasgow, James Parker, M.B., C.M., Kilmacoll, to Eliza Balfour, elder daughter of George Coats, Stanley, Paisley.

SLEMAN—REAVELEY.—On the 21st of October, at the Parish Church, Kinnersley, Herefordshire, by the Rev. F. F. Reaveley, S.C.L., uncle of the bride, assisted by the Rev. F. Andrews, M.D., Rector of the parish, Richard Reginald Sleman, only surviving son of the late Richard Sleman, F.R.C.S., formerly of Tavistock, Devon, and Mary Isabella Charlotte Reaveley, second daughter of T. Reaveley, Esq., J.P., of Kinnersley Castle, Herefordshire.

HOURS OF ATTENDANCE AND OPERATION DAYS AT THE LONDON HOSPITALS.

CANCER, Brompton (Free). *Attendances*—Daily, 2. *Operations*—Tu. F. S., 2.
CENTRAL LONDON OPHTHALMIC. *Attendances*—Daily, 1. *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., 3.
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.
GUYS'. *Attendances*—Medical and Surgical, daily, 1.30; Obstetric, M. Tu. F., 1.30; Eye, M. Tu. Th. F., 1.30; Ear, Tu. F., 1; Skin, Tu. F., 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. 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., 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, Tu., 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., 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. Tu., 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., 9.
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., 3; Orthopaedic, W., 10; Throat, Tu. F., 3.30; Skin, M. Th., 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., 2; Th., 2.30; S., 10; (Ophthalmic), F., 10.
ST. PETER'S. *Attendances*—M., 2 and 5; Tu., 2; W., 2; 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; (Gynaecological), 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., 10; 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.