a new ligament, and the mobility thus allowed-which is easily observable in cases that have been operated upon a few months previously—is all-important in permitting the necessary expansion of the uterus during pregnancy, and so obviating to a large extent the tendency to abortion which is said to exist.

It would be outside the province of this short paper to discuss the relative value of hysteropexy and the so-called "Alexander's operation," but in a recent case of hysteropexy under my care, the superiority of this operation in cases possibly associated with adhesions was made abundantly evident by the existence of adhesions which were by no means apparent before the abdomen was opened, and which would have rendered futile any attempt at shortening of the round ligaments.

Hysteropexy in selected cases is quite justifiable, and has already done much to relieve the intolerable pain sometimes associated with a displaced and adherent uterus in which

milder means have failed.

## MEMORANDA

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

TETANUS COMPLICATED BY TYPHOID SYMPTOMS

AND MANIA: RECOVERY.

On March 25th, J. L. P., a young Dutchman 24 years old, came to me complaining of a sore on the back of his right hand, with pains shooting up the arm. I found in the middle hand, with pains shooting up the arm. of the dorsum of the right hand a small solid purplish tumour about as large as a pea, and it formed the centre of a bleb, about the size of a penny, which contained a thin serum. There was some redness and swelling of the hand, and pain in Crookshank's gland. I dissected away the skin forming the bleb, and dried the wound. It then appeared raw, and of a raspberry formation. I applied lunar caustic, and dressed the wound with a compound tincture of benzoin on lint. The next day he said he felt better, and had slept well; I then gave him some ichthyol and boric ointment to keep applied to the wound, and cauterised it on March 27th, 28th, and 30th. On March 30th it appeared quite healed. On April 3rd I found the tumour, which had previously almost entirely disappeared, forming "proud flesh." I cauterised it on that and the next day, but on April 5th he complained of having been very restless all the previous night and that the arm was very painful, and I then cut out the growth with a sharp scalpel, and touched a few points which were left with caustic, and applied a soothing dressing. In the evening I was summoned in great haste. I found that he had just recovered from a spasmodic attack. While I was present another came on—he was lying quiet and conscious, and said he felt all right, except for the pain in the arm, when suddenly he stiffened himself out lying on his back, twisted from side to side slowly, his teeth became fast locked, and he became unconscious; but in a few minutes the spasm passed and consciousness returned.

I judged the case to be tetanus, and at once administered full doses of chloral and potassium bromide. I advised a consultation, and the medical man called in agreed with me as to diagnosis and treatment. The painful arm and hand were well bathed in a hot infusion of poppy and camomile heads, and a hot linseed poultice applied constantly over the wound. This greatly relieved the pain, but the attacks came on with increased severity, being very frequent, especially about 10 a.m. each day. The teeth during an attack were always firmly locked, and a stick had to be held in his mouth to prevent the tongue being bitten. The attack usually began by pain shooting along the arm and over the cardiac region. Then cramps ensued, commencing in the legs. For the first few days and nights he could not sleep for more than a few minutes at a time. A hypodermic injection of morphine, gr.  $\frac{1}{4}$ , had no effect, and the next night chloral, gr. xxx, and tinct. opii, xv  $\pi$ , had very little.

On April 7th (the third day of the spasms) I gave him the following mixture: B pot. brom. 3iv, chloral hyd. grs. xl, tinct. opii, m xl, aquam ad 3ij. M. dose 3iij, well diluted

with water, every two hours until sleep ensued, and during each attack chloroform was administered by inhalations. Between April 7th and 10th he took ten ounces of this mixture. After the first day or so only 3 ij and sometimes 3 j was given, according as necessity was shown, either by increase in the number or violence of the spasms, or by restlessness. He was able to sleep fairly well, was hungry when awake; the spasms gradually diminished, and finally ceased about April 12th. Just before the attacks entirely ceased they were characterised by the patient's throwing himself back and lying on his back with half-closed eyes for a few minutes, during which time he appeared to be quite un-conscious. The bowels, which tended to constipation, were kept acting two or three times a day by enemata and a mixture containing magnesium sulphate. The wound on the hand healed in a few days, but the spasms continued for several days longer. The pulse up to April 12th was always very full and regular—about 90 to the minute. About April 10th he complained of a good deal of pain in the bladder, which diminished on using copious draughts of barley water

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and some tincture of hyoscyamus.

On April 12th and 13th his temperature began to rise and pulse rate quickened, and a new set of symptoms showed themselves, approaching those of typhoid fever. On April 15th he complained very much of sore throat and mouth. In a few days he became quite insane, inclined to be violent, contradictory, and cross with everyone. About April 20th the fever left him. The insanity lasted until about April oth, when he began to go about again. He is now quite recovered, and got married a month after leaving his bed. I am inclined to think that the patient had his first spasm or premonitory symptoms on the night before I operated the second time. The character of the spasms, generally beginning with cramps in the legs and ending in locking of the jaws, render it almost impossible to doubt that he suffered from tetanus. The low feverish symptoms were in great part due to the irritable state into which the digestive, urinary, nervous systems and mucous membranes were-thrown, by the large and constant doses of chloral, bromides, and opium.

I do not think that many cases of tetanus have recovered which have been as near death as this. I attribute the patient's recovery to the almost heroic use of sedatives before the poison had made much way in the system, and to the patient's naturally good and sober constitution.

W. ARCHER ISAAC, M.D., B.A. (Univ. Dub.), Molteno, South Africa.

District Surge District Surgeon.

SELF-INFLICTED WOUND OF ABDOMEN; PROTRUSION OF VISCERA; RECOVERY.

THE patient, a man aged 32, was admitted into the Oldham Infirmary on the evening of May 10th. The man had wounded his abdomen with a razor after a quarrel with his wife, and he was brought to the infirmary on a hand ambulance by the police, the wound being covered with some wet lint.

On admission the patient was collapsed, his pulse being 60. a minute and very weak. On removing the blankets in which he was wrapped and the lint covering the abdomen, it was seen that the stomach, the transverse colon, the omentum, and the small intestines had escaped through the wound and completely covered the surface of the abdomen. The man was put under chloroform and the protruded viscera examined for any wound. During all the manipulations that followed a stream of hot sterilised saline solution was allowed to run over the bowels. No wound of viscera was found, and there was no hæmorrhage. The protruded viscera were then returned and the peritoneal cavity washed out. The wound was now seen in its full extent. It was 9 inches long, and passed from immediately over the symphysis pubis obliquely upwards towards the right side of the umbilicus, ending 2 inches above that point. The wound was closed in the usual manner, and a Keith's drainage tube was introduced at the lower end. A small quantity of blood-stained fluid was maked an through this drainate to night. sucked up through this during the night.

The man rallied excellently, and next morning expressed himself as quite well. The Keith's tube was removed. His temperature was 99°, the pulse 78. His after-progress was uneventful. The stitches were removed on the tenth day, the wound being soundly healed. The patient was kept on

his back for six weeks, the only trouble being that his bowels would only act after an enema. This trouble passed away when he was allowed to get up, the bowels acting daily without any aperient. He was discharged, wearing a bandage, at the end of eight weeks quite well.

I am indebted to Dr. Martland for permission to publish is case.

N. CAINE, M.B.,
Senior House Surgeon, Oldham Infirmary.

this case.

## REPORTS

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

UNIVERSITY COLLEGE HOSPITAL.

A CASE OF HEAD INJURY FOLLOWED BY COMPLICATIONS AFFECT-ING THE CRANIAL NERVES.

(Under the care of Mr. ARTHUR BARKER, Surgeon to the Hospital.)

[Reported with remarks by Mr. J. Howard Cook, M.B., B.S.Lond., F.R.C.S.Eng., formerly House-Surgeon to the Hospital.

During my term of office as house-surgeon the following case was admitted under Mr. Barker's care. The notes are an abstract of those taken at the time of admission, and during the after-treatment of the case. The patient was a porter

aged 26, of sober habits, and good past personal history.

On June 19th, 1896, he fell from the top of a pantechnicon van, striking the pavement with his head. He was at once picked up and brought to the hospital, and admitted at 3.10 PM., fifteen minutes after the accident. It was stated that after the fall he appeared dazed, but was able to complain of

pain in his head.

On admission he was semi-conscious, answering questions slowly. The pulse was 96, weak, and irregular in force and rhythm. The skin was moist and cold. Both eyes were open, the left pupil being somewhat larger than the right. The left pupil reacted readily to both light and accommodation, but the right was sluggish, though it reacted slightly to both kinds of stimulus. Blood was streaming from the patient's nose, and there was a small superficial wound over the right eyebrow. There was no fracture to be detected in this situation. There was some effusion of blood into the right upper eyelid, and slight subconjunctival hæmorrhage in the eyeball of the same side. He complained of great pain in the head, but none elsewhere.

At 3.15 P.M. (twenty minutes after accident) the patient vomited the contents of his stomach, mixed with several ounces of dark blood. At 3.20 P.M. (twenty-five minutes after accident) the right pupil did not appreciably react to light or accommodation. He again vomited similar material to that just described. He was now speechless, and drowsiness had deepened into apparent unconsciousness. There were no signs of paralysis of any of the voluntary muscles. At 3.30 P.M. (thirty-five minutes after accident) patient was transferred to an isolation ward. The pulse had fallen to 68, but was still irregular and somewhat dicrotic. At 4 P.M. (one hour and five minutes after accident) the patient had a wellmarked general convulsion lasting about a minute. All four limbs were moved, and there were twitchings of the facial muscles. The limb movements consisted in a rapid succession of clonic spasms in the direction of flexion and extension; finally the patient became rigid in a position of general flexion. During the fit he was markedly cyanosed. Immediately succeeding the fit a third attack of vomiting occurred. At 4.25 P.M. (one and a-half hour after accident), a second fit occurred. The first observed movement was a conjugate deviation of the head and eyes to the left side, then succeeded slight twitching of both sides of the face, then both arms simultaneously, and lastly both legs underwent similar clonic spasms to those observed in the first fit; finally the convulsion became general. Movements of twitching in the limbs rapidly increased to marked flexion. The fit lasted two minutes. There was no cry, no passage of urine or fæces.

Immediately after the second fit breathing became stertorous. The pulse dropped to 48, was regular in rhythm and force, though somewhat full in volume.

The head was now shaved and the patient prepared for operation, but in the absence of more definite localising signs it was decided not to operate. An ice bag was applied to the head, and hot bottles to the feet. In the course of half an hour the stertorous breathing ceased, the patient remaining, however, unconscious, with both knee-jerks exaggerated. He gradually became more restless, tossing about in bed. At 5.20 there was another attack of vomiting, about 6 ounces of altered blood being brought up. After this the patient became quieter, lying curled up in bed with the head thrown back. Consciousness returned at 7 P.M. The pulse was now small and irregular, 80 to the minute. The patient showed great irritability on being disturbed, and lay in a position of general flexion, avoiding the light by covering himself with the bed clothes. He complained greatly of the ice bag, which was accordingly removed for the time being. There was no retention of urine.

June 20th. The patient had another attack of vomiting this afternoon. He remained quite conscious, complaining of great thirst, and of pain and stiffness in the neck. The temperature had risen to 102°. The pulse (108) was of low tension, and irregular. Under the influence of an evaporating lotion the swelling of the right eyelid subsided; and now there was observed marked ptosis of this lid, with impaired movement of the eyeball, especially inwards; but a careful examination of the ocular movements could not be made on account of the general irritability of the patient, which increased to such an extent that a "strong sheet" was required to keep him from jumping out of bed. Eighty grains of potassium bromide and 30 grains of sulphonal were administered, and later croton oil (2 minims) was given on

butter. On June 22nd the temperature had fallen to normal, and the pulse was regular and of fair tension (60 to the minute). The right pupil was widely dilated, and did not react either to light or accommodation. There was an external squint, the right pupil not moving inwards beyond the median line. The right eye was now quite blind (no light appreciation). No change in the fundus was observable. The left eye was Retention of urine required the use of a catheter

this evening. The urine was quite normal.

June 23rd. A crop of herpes appeared this morning in the distribution of the fifth cranial nerve. Thus there was a patch of vesicles along the course of the supratrochlear and infratrochlear nerves, another larger patch over the supra-orbital, and another over the infraorbital and buccal branches. No loss of sensation could be detected in the face. On June 26th the herpes was well marked, having extended along the course of the nerves previously mentioned, and being also observable along the distribution of the auricular branch of the auriculo-temporal. The headache was less severe, the temperature remained normal, and the patient could now bear the blinds being drawn up for the first time. There was slight conjunctivitis. The temperature was 98°, the pulse 60, of fair

June 30th. The patient still complained of severe headache on the right side. He had no memory of the accident, though The herpetic vesicles had he remembered previous events.

mostly scabbed, and were drying up.

July 3rd. There was complete paralysis of the right third nerve. The pupil was widely dilated, and did not contract on any stimulus. The left pupil acted well to light directly, but there was no consensual reflex. There was considerable ecchymosis of the right upper lid near its inner end; on the left side there was ecchymosis of both lids. Marks from recent herpes ophthalmicus were to be seen. The fourth nerve had probably escaped, inasmuch as downward movements of the company the eye were associated with an outward deviation. No anæsthesia was found.

Ophthalmic Examination.—Right media clear. Optic disc rather pale, even on the inner side. The outer part of the disc was decidedly pale, and there was a large physiological

pit. Left optic disc and fundus normal.

July 6th. The herpes had now cleared off, leaving no scars.

The mental condition was improving. The patient The patient remembered riding the van before the accident, but no exDungon.

ago, when a serious illness set in, to conduct a large practice. The deceased went to Dunoon to take up the practice of Dr. Sutton. Several years ago he was the recipient of a public testimonial, presented to him in recognition of the interest which he took in the social welfare of the people of Dunoon. He was recently appointed an Honorary Sheriff Substitute of

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently are Dr. R. de B. Martins Pereira, Professor of Morbid Anatomy in the Lisbon School of Medicine; Dr. Victor Mayer, Professor of Chemistry in the University of Heidelberg, author of a Manual of Organic Chemistry and of many important contributions to organic chemistry, aged 48; and Dr. Dewindt, President of the Belgian Medical Federation.

## MEDICO-PARLIAMENTARY.

HOUSE OF LORDS.

HOUSE OF LORDS.

PUBLIC HEALTH (SCOTLAND) BILL.

On the report of amendments to this Bill, LORD BALFOUR, in order to meet a point raised on the previous day by the Earl of Camperdown to exempt from the power of appropriation to be conferred on a local authority in respect of all streams of water in its district any supply of water used for domestic or agricultural purposes, moved to add to Clause 1, Section IX, the following new subsection: "(2) Any supply of water which has been conducted to and is being used for any house or building used in connection with such house or occupied for agricultural purposes."—The amendment was agreed to.—The Bill was then read the third time and passed. third time and passed.

THE ROYAL ASSENT.

On the day of the Prorogation the Royal Assent was notified to 170 Bills, amongst the number being the Poor-Law Officers' Superannuation Act (1896) Amendment, Poor-Law, Cleansing of Persons, Infant Life Protection, Weights and Measures (Metric System), Burials Joint Committee, Dangerous Performances, Yorkshire Coroners, District Councils (Water Superanise Burble) Uncil (Sect.) Dangerous Performances, Yorkshire Coroners, District Councils (Water Supply Facilities), Metropolitan Water Companies, Public Health (Scotland), Water Orders Conformation, Borrowstounness Water Provisional Order, Duntocher and Dalmuir Water (Provisional Order), Deal and Walmer Water, Circucester Water, Newark Corporation Water, St. Neots Water, Belfast Water. East London Water, Nottingham Corporation Water, Weymouth Water, Tynemouth Corporation (Water). Gravesend and Milton Water, East Warwickshire Water, New River Company, Rhymney Valley Gas and Water, Fylde Water (Transfer), Harrogate Water, Harrogate Corporation (Water Transfer), and Southwark and Vauxhall Water.

OPHTHALMIA AMONG POOR-LAW CHILDREN IN THE METROPOLIS.
There has been presented to both Houses copies of a report by Sydney
Stephenson, Esquire, M.B., on an inquiry undertaken by him, at the
request of the Local Government Board, upon the Ophthalmic state of Poor-law Children in the Metropolis.

GLYCERINATED CALF VACCINE LYMPH.

There has been presented to both Houses copies of a report to the Local Government Board on the Preparation and Storage of Glycerinated Calf Vaccine Lymph; with an introduction by the medical officer.

### HOUSE OF COMMONS.

THE ARMY MEDICAL SERVICE.

On the Appropriation Bill Mr. PRICE called attention to the condition of the Army Medical Service, which he said was now in a very bad condition. It was impossible to get sufficient candidates to compete for the vacancies, It was impossible to get sufficient candidates to compete for the vacancies, and there was a progressive deficiency in the numbers. He hoped the medical profession avoided the military service. The concessions that were made some years ago had not had the effect of attracting more men to the service. It was no use for the Government or the House to think that the terms offered were good enough, if medical men said they were not; therefore the Department and the Government must try to find out in what respect the medical profession generally were discontented with the service, and as far as possible to meet their views. He also called attention to the treatment of disease in the army, and complained that the number of cases was higher than in civil life.—Mr. POWELL WILLIAMS, on behalf of the Government, said he thought that the grievance as to the Army Medical Service related more to the terms of the service than to the pay. One strong objection was that service abroad was too long. He could not hold out any promise on that point, as the matter had not been definitely determined, but the Secretary of State had proposals before him with the view to materially reducing the length of foreign service.

VIVISECTION.

On the Appropriation Bill. Mr. Mac Nell L raised the subject of vivisection, and urged that the Act of 1876 had been entirely nugatory. The inspections of the vivisection laboratories were absolutely worthless. The Home Secretary had refused to give a return showing the number of times the inspectors visited the laboratories and describing what they say, and the right hon. gentleman had admitted that even if the inspectors saw the most cruel tortures they could not raise a hand in protest; in fact, the Act of 1876 was not worth the paper it was printed on.—Colonel Lockwood said that though he was a determined opponent of VIVISECTION.

vivisection, he must acknowledge that the system initiated by the Home Office had alleviated the sufferings of the animals experimented upon. He firmly believed his right hon. friend the Home Secretary was keeping a strict eye on vivisection experiments, but that until they could induce the public to hold the same views the hon. member for Donegal and he held it was useless to raise the question on an occasion like this.—The Home Secretary said it was not his business to express an opinion upon vivisection; his business was to carry out the Act of 1876 to the best of his ability, and he asserted most positively that, not only during the time he had been at the Home Office, but also during the reign of his predecessors, the greatest possible care had been taken that licences should only be given to proper persons, and that the Act should be carried out in the spirit as well as in the letter. He believed it was not possible to secure better inspection than was secured at present. Nearly all the visits paid to the laboratories were surprise visits. Many places were visited six and eight times a year, and every one of them more than once. As to the mitigation of the suffering of the animals experimented upon, it must be admitted that what happened formerly was not possible under any circumstances, even for the benefit of humanity. The hon. member for Donegal was opposed to the use of animals under any circumstances, even for the benefit of humanity. The hon gentleman was not supported by the majority of the people of the country, who were honestly persuaded that animals might, under proper conditions, be used as a means of discovering the most beneficial modes of alleviating human suffering.

HEALTH OF THE BRITISH TROOPS AT AGRA.

Sir James Fergusson, on behalf of Colonel Kenvon-Slanry, asked the Under-Secretary for War whether in the 2nd Battalion York and Lancaster Regiment, stationed at Agra, there were between February 23rd and June 27th, 1897. 77 admissions into hospital from enteric fever, resulting in the deaths of 1 officer and 18 non-commissioned officers and men; whether he could state how many cases of enteric fever were developed in the military hospital by men under treatment for venereal and other diseases; and whether he would institute an inquiry into the causes of this outbreak, and into the water supply?—Mr. Brodrick: The returns received from Agra do not extend beyond April 30th. During the months of February, March, and April there appear to have been 63 admissions for enteric fever and 12 deaths, the great outbreak having occurred in April. There are no returns to show how many cases were developed in hospital in men suffering from other diseases. A special investigation was immediately instituted, with the result that the water supplied by the municipal authorities has been found to be infected with enteric microbe. Every possible precaution has been taken, and it was stated in the report for April that the epidemic seemed to be abating. HEALTH OF THE BRITISH TROOPS AT AGRA.

THE TULLA GUARDIANS AND PAUPER PATIENTS.

Mr. P. O'BRIEN for Mr. WILLIAM REDMOND asked the Irish Secretary whether the Tulla Board of Guardians were surcharged for sending patients who were inmates to Dublin for medical treatment; and whether it was necessary that an inmate should be a certain time, and, if so, what length of time, in a union workhouse before being sent to Dublin for medical treatment.—Mr. G. BALFOUR: The auditor held that the patients, whose expenses in Dublin hospitals he surcharged, were not bond fide inmates of the workhouse, their names having been merely entered on the workhouse books as a preliminary to sending them for special treatment to Dublin. The Act dealing with this matter is the Poor Law Amendment Act of 1862. No particular length of time in a workhouse is specified in the Act as necessary to qualify an inmate for transmission to a special hospital. All that is necessary is that such persons should be bond fide inmates at the time they are sent. THE TULLA GUARDIANS AND PAUPER PATIENTS.

The Brook Hospital.

Mr. Pickersgill asked the President of the Local Government Board whether the cost of the Brook Hospital, recently erected by the Metropolitan Asylums Board had been \$64,000 in excess of the estimates presented to the Board, and \$50,000 in excess of the actual amounts of contracts entered into; and whether, before he issued a further order for expenditure in respect of the erection of this hospital, he would have inquiry made into the causes of this extraordinary success.—Mr. CHAPLIN: The facts as regards the amount by which the cost of the hospital exceeds the amount of the estimates and of the various contracts entered into, are I believe as stated in the question. The managers have received a report from the Committee of the hospital as to these expenses and toonsideration by them of the report has been adjourned. Before sanctioning a further loan the Board will very carefully considerall the circumstances connected with the actual expenditure and the increase of the cost over the estimates. cost over the estimates.

JUVENILE PRISONERS UNDER REMAND. Mr. PICKERSGILL also asked the President of the Local Government Board what steps had been taken by the Metropolitan Asylums Board, Board what steps had been taken by the Metropolitan Asylums Board, under the new Order, to provide accommodation for juvenile prisoners under remand, and when such accommodation will be available?—Mr. Chaplin: The managers of the Metropolitan Asylums District are proceeding without delay with the consideration of the arrangements which can best be made for provision for the several classes of children (including the remand children) of whom they are to undertake the care, and the Local Government Board, who have had interviews with the managers on the subject, are rendering such assistance as they can in the matter. But it is impossible at present to state when the accommodation for the children referred to by the hon. member will be available.—Mr. Pickersgill asked if the construction of new buildings had begun?—Mr. Chaplin: I do not know whether the managers consider it necessary to have new buildings. I understand they are negotiating for the purchase of the existing buildings.

QUARANTINE AT COLOMBO.

Sir Charles Cayzer asked the Secretary of State for the Colonies if he was aware that steamers proceeding from Bombay to Colombo were subject to ten days' quarantine at the latter port, although there is no evidence of sickness on board; and whether he would make inquiries with a view to stopping this excessive delay in the case of vessels having clean

alterns. It is curious to find such a Board certifying "The injury is likely, or not likely (as the case may be) to interfere with his efficiency as a soldier." Of course the Board can only arrive at such a finding as a solider. Of course the board can only arrive as tent a number probably upon the evidence of some grey-haired and ancient medical witness summoned before it. Imagine a grey-haired major of Royal Engineers giving evidence on barrack construction before a youthful infantry Board sitting on a married quarter! The only cure for such anomalies in the medical branch is the formation of a corps, Royal or otherwise otherwise.

## MEDICO-LEGAL.

"THE USUAL BOND."

In the Chancery Division of the High Court of Justice on July 30th, before Mr. Justice Romer, Mr. Fawcett, Q. C., moved on behalf of Dr. G. H. Browne, of The Hermitage, Brynmawr, for an injunction to restrain P. J. Calnan from acting as assistant to Dr. Lawe, of Brynmawr, in the county of Brecon, in his profession or practice, and from, either by himself or in partnership, or as assistant, directly or indirectly practising as a surgeon or physician in Brynmawr, or within a radius of five miles therefrom. According to the report in the South Wales Daily News, after hearing evidence, Mr. Justice Romer thought he was entitled to the injunction. He said the defendant entered into the service of the plaintiff on an undertaking to execute the usual bond. There was no doubt as to what was intended by that. It appeared that in country surgeries the usual practice was for the assistant to agree and enter into a bond not to carry on business on his own account, or practise as an assistant, within five miles for a period of five years of the place where the principal carried on business. The defendant obtained his assistantship by his promise to execute a bond which, in his opinion, he could at any time have been called upon to perform. The mere fact that the document had not been executed did not, in his opinion, prevent the plaintiff insisting that the defendant should carry out its terms. He granted an injunction restraining the defendant within the limits of the time and space he had mentioned from carrying on business as a principal or assistant within five miles of Brynmawr. The costs would be costs in the action.

## UNIVERSITIES AND COLLEGES.

UNIVERSITY OF CAMBRIDGE

UNIVERSITY OF CAMBRIDGE.

THE JOHN LUCAS WALKER STUDENTSHIP.—Applications for this studentship, the holder of which shall devote himself (or herself) to original research in pathology, are invited and should be sent not later than October 15th, 1897, to Dr. A. A. Kanthack, Pathological Laboratory, Cambridge, to whom also applications for further information regarding the studentship may be addressed. The studentship, which is of the annual value of £250, may be held by a person of either sex, and is tenable under cartein conditions for three years. certain conditions for three years.

UNIVERSITY OF EDINBURGH.

FIRST PROFESSIONAL EXAMINATION.—The following candidates have satisfied the examiners

FIRST PROFESSIONAL EXAMINATION.—The following candidates have satisfied the examiners:

R. V. C. Ash, R. T. Baillie, R. A. Belilios, A. N. Bond, R. J. Bradley, A. J. Brock, A. Brown, E. E. Brown, G. M. Brown, J. Brownlee, H. Buist, E. P. Calder, S. M. D. Campbell, T. F. Cavanagh, C. C. Choyce, B.Sc.; R. E. Collins, B.A.. P. T. Copeland. J. Dagliesh, W. H. Dickinson, J. L. Duncan, W. Eggeling, A. Emslie. O. J. Evans, J. Ferrier, A. H. Firth, M.A., G. Forrest, Catherine Fraser, A. Frew, H. J. George, G. Grey, M.A., M. D. Gulland, A. F. Haegert, A. R. Hallam, A. M. Hamilton, W. Hamilton, N. C. R. Hansen, R. A. J. Harper, D. C. Henry, L. A. Holcroft, L. J. Hood, C. W. Howe, A. E. Hunter, L. G. Hunter, R. Imrie, A. R. Johnston, M.A., G. A. Jolly, E. Jones, A. C. Keay, W. Lee, E. W. Lewis, R. M. Liddell, C. H. Lindsay, Isabella Logie, S. Lyle, J. G. M'Bride, S. W. M'Clean, L. T. M'Clintock, Harriet M'Cloghry, J. B. M'Cutcheon, H. K. Macdonald, W. Macdougall, M.A., A. M'Ewan, P. F. M'Farlan, A. P. M'Gregor, N. F. MacHardy, J. M'Kenzie, V. C. M'Laren, E. Macmillan, K. D. C. Macrae, A. M. Malcolmson, H. C. Martin, R. H. Martin, A. F. G. Masson, E. C. C. Maunsell, J. H. Meikle, M.A., BSc., W. H. Meyer, G. R. Mill, J. Miskelly, J. Morrison, G. S. Murray, D. A. Ogilvie, G. Pereira, A. C. Peterson, L. W. Pole, D. E. Pratt, W. H. Prentice, M.A., A. H. Reid, O. L. Rhys, R. Rorie, L. Rundall, H. W. Rusack, C. W. V. Rutherford, C. W. Saleeby (with distinction), R. A. Savage, E. T. Selkirk, J. F. Selkirk, T. B. Shaw, D. Smellie, J. A. Smith, M. M. Smith, T. A. Smyth, G. B. A. Speirs, M. M. Stevenson, S. S. Steyn, G. C. Straithairn, J. Sullivan, D. Sutherland, P. Telles, H. P. Thompson, T. L. Thomson, P. S. Tillard, E. J. Tyrell, E. A. Walker, A. R. Wallis, C. E. Watts, A. G. Waugh, T. S. B. Williams (with distinction), C. C. Wilson, F. E. Wilson, J. Woods, R. T. Young, M.A.

UNIVERSITY OF LONDON.

INTERMEDIATE EXAMINATION IN MEDICINE (HONOURS).—The following candidates have passed this examination:

Anatomy.—First Class: W. H. Willcox, B.Sc. (Gold Medal), St. Mary's Hospital. Second Class: W. Gough, B.Sc., Yorkshire College, Physiology and Histology.—First Class: W. Gough (Exhibition and a Gold Medal), Yorkshire College; J. F. Northcott (Gold Medal), Cambridge and Guy's Hospital: F. A. St. John, St. Mary's Hospital. Second Class: E. A. Miller, Guy's Hospital; W. H. Willcox, St. Mary's Hospital.

Second Class: E. A. Miller, Guys Hospital; W. H. Willcox, St. Mary's Hospital.

Organic Chemistry.—First Class: W. Gough. Yorkshire College; W. H. Willcox (Exhibition and Gold Medal). St. Mary's Hospital.

Materia Medica and Pharmaceutical Chemistry.—First Class: J. Atkins, Guy's Hospital; J. Moreton, Owens College; W. H. Willcox (Ex-

hibition and Gold Medal), St. Mary's Hospital. Second Class: Isobel Sarah Bryson, London School of Medicine for Women and Birkbeck Institute; E. A. Miller, Guy's Hospital; A. R. Spencer,

University College.
ERMEDIATE EXAMINATION IN MEDICINE. PASS LIST.—The following

Birkbeck Institute; E. A. Miller, Guy's Hospital; A. R. Spencer, University College.

Intermediate Examination in Medicine. Pass List.—The following candidates have passes dthis examination:

Entire Examination.—First Division: Louisa Hamilton, Loudon School of Medicine for Women; Mary Hannah F. Ivens, London School of Medicine for Women; Mary Hannah F. Ivens, London School of Medicine for Women; D. J. McGavin, Mason College. Second Division: W. F. Addey, University College; V. C. Bensley, St. Mary's Hospital; G. Black, St. Thomas's Hospital; F. D. Blandy, Middlesex Hospital; Susila Anita Bonnerjee, London School of Medicine for Women; P. F. Braithwaite, Owens College; C. H. Bullen, Mason College; J. A. Butler, Guy's Hospital; P. W. L. Camps, Guy's Hospital; T. Chetwood, London Hospital; H. Collinson, Yorkshire College; T. Evans, University College; Harriet Rosa Delo Ford, London School of Medicine for Women; H. G. Franklin, London Hospital; A. Freear, St. Mary's Hospital; W. E. Hornas's Hospital; E. L. Gowlland, St. Mary's Hospital; D. G. Greenfield, Guy's Hospital; W. C. Hirst, Yorkshire College; T. Hoban, St. Thomas's Hospital; E. W. Holyoak, St. Mary's Hospital; J. W. Hunt, St. Mary's Hospital; B. F. Hussey, St. Mary's Hospital; J. W. Hunt, St. Mary's Hospital; R. G. Johnson, Medical School and University College, Bristol; J. E. Judson, Owens College and Manchester Royal Infirmary; R. B. Kinloch, University College, Cardiff: T. N. Leah, St. Mary's Hospital; G. Lewin, Guy's Hospital; A. E. J. Lister, St. Bartholomew's Hospital; Olive McDougall, London School of Medicine for Women; M. T. Male, University College; E. Morgan, University College, Cardiff: F. M. Morris, London Hospital; T. C. Orford, Owens College, H. McD. Parrott, Guy's Hospital; T. C. Orford, Owens College; H. McD. Parrott, Guy's Hospital; T. C. Orford, Owens College; A. R. G. Pocock, University College; J. E. Richards, Charing Cross Hospital; C. A. S. Ridout, St. Bartholomew's Hospital; B. H. St. C. Roberts, Mason College; F. B. Skerrett, B.Sc College

women; G. T. Wrench, Guy's Hospital; P. R. Wrigley, Owens College.

Excluding Physiology.—First Division: W. P. Panckridge, Middlesex Hospital; A. W. Penrose, Guy's Hospital; A. T. Pridham, St. Bartholomew's Hospital. Second Division: N. C. Beaumont, St. Bartholomew's Hospital; A. J. V. Betts. Westminster Hospital; Josephine Brown. London School of Medicine for Women; J. E. Chapman, Sheffield; L. Cook, Westminster Hospital; F. G. H. Cooke, London School of Anatomy and Birkbeck Institute; Margaret Bernard Dobson, London School of Medicine for Women; A. G. Ede, St. Bartholomew's Hospital; J. E. Francis, University College; A. Jones, London Hospital; J. E. Francis, University College; A. Jones, London Hospital; B. R. Lloyd, University College, Cardiff; S. A. Mahmood, University College; P. T. Manson, Guy's Hospital; O. Marriott, Guy's Hospital: J. C. Marshall, St. Bartholomew's Hospital; M. F. Reaney, London Hospital; E. Russell-Risien, St. Bartholomew's Hospital; W. E. Ruttledge, University College; Mary Ethel S. Scharlieb, B.A., London School of Medicine for Women and Birkbeck Institute; F. W. Sheppard, St. Bartholomew's Hospital; N. F. Stallard, University College, P. T. H. Stedman, University College; C. W. Wirgman, University College.

College.

P. T. H. Stedman, University College; C. W. Wirgman, University College.

Physiology only.—Second Division: C. R. Brown, St. Bartholomew's Hospital; H. Burrows, St. Bartholomew's Hospital; W. H. Cazaly, B.A., St. Bartholomew's Hospital; J. M. Collyns, St. Bartholomew's Hospital; G. H. Coltart, Westminster Hospital; W. H. Coltart, Birmingham Medical School: Mabel Eliza Cousins, London School of Medicine for Women; J. B. Davey, Middlesex Hospital; A. Densham, Guy's Hospital; Susan Jane H. Eastwick-Field, Royal Free Hospital and London School of Medicine for Women; F. F. Elwes, Middlesex Hospital; Erie Evans, London School of Medicine for Women; F. F. Elwes, Middlesex Hospital; E. C. Hadley, Mason College; P. M. Heath; University College; E. C. B. Ibotson. Guy's Hospital; S. A. Millen, St. Bartholomew's Hospital; H. H. Mills, Westminster Hospital and King's College; J. R. Morton, London Hospital; B. W. Moss, Guy's Hospital; E. E. Parrett, B.A., Guy's Hospital; C. G. Seligmann, St. Thomas's Hospital; W. G. Stewart, Guy's Hospital; P. G. Stock, Bristol Medical School; Margaret Helen Style, London School of Medicine for Women; J. F. Walker, London Hospital; A. J. W. Wells, St. Bartholomew's Hospital; R. E. B. Wilmot, St. Marry's Hospital.

PRELIMINARY SCIENTIFIC EXAMINATION.—The following candidates have satisfied the Examiners:

Entire Examination.—First Division: F. Barker, Mason College; A. C. School Margaret Helen Style, Col.

Entire Examiners:
Entire Examiners:
Entire Examination.—First Division: F. Barker, Mason College; A. C. Begg, University of Edinburgh; J. H. D. Bolton, University College; J. T. Hicks. The Leys School; H. B. Jackson, Epsom College; T. L. Llewellyn, University College, Cardiff; M. R. C. MacWatters, King's College; W. O. Meek, Owens College: R. Phillips, University College, Aberystwith; M. T. Williams, University College, Aberystwith; C. J. Wilson, St. Paul's School. Second Division; J. B. Albury, St. Mary's Hospital; F. H. S. Ashworth, Owens College; E. Bayley, University College; E. R. Bell, University Tuorial College; Emily Maria Beverley, Somerville College, Oxford; J. B. Burt, Epsom College; A. Cameron, Epsom College; J. A. Coupland,

Royal Masonic School, Wood Green; J. A. Drake, King's College; W. J. Edgar, University Extension College, Reading; D. E. Finlay, C. Goldstein, University Tutorial College and Guy's Hospital; C. O. Gray, University Totorial College and Drivate study; F. P. Hughes, University Totorial College and private study; F. P. Hughes, University Tutorial College, and private study; F. P. Hughes, University Tutorial College, and private study; S. Hughes, University Tutorial College, J. Jones, University College, Aberystwith, and University Tutorial College; J. Jones, University College, Aberystwith, and University Tutorial College; J. H. S. Martin, University College, Aberystwith, and University Tutorial College; J. R. Martin, University College, Aberystwith, and University Tutorial College; J. R. Martin, University College; A. R. H. A. Lyth, University College; J. R. Martin, University College; A. R. H. A. Lyth, University College; J. R. Martin, University College; A. R. H. A. Lyth, University College; J. R. Grand Perchical School, H. B. W. Smith, Yorkshire College; A. R. Sand, A. Pechnical School, H. B. W. Smith, Yorkshire College; H. G. Tansier, Owens College; C. T. Treslian-Davy, University College; H. G. Tansier, Owens College; L. C. Thompson, Epsom and University Tutorial Colleges; P. C. Treslian-Davy, University College; H. G. Tansier, Owens College; L. C. Thompson, Epsom and University Tutorial Colleges; H. R. H. Well, Wyggeston School, Leicester; A. Whaton, Owens College; A. R. H. Allingham, King's College, K. Anderson, Guy's Hospital; O. F. H. Allingham, King's College, K. Anderson, Guy's Hospital; O. F. H. Allingham, King's College, K. Anderson, Guy's Hospital; O. F. H. Allingham, King's College, K. Anderson, Guy's Hospital; H. J. Brewer, Physical College; C. H. Servic, University Tutorial College; C. H. Berry, University College, A. Anderson, Guy's Hospital; H. J. Brewer, Epsom College; H. G. Barthamie, Guy's Hospital; H. J. Brewer, Epsom College; E. W. Charlon, S. George's Hospital; H. J. Brewer, Epsom College;

F. S. L'ngmead, St. Mary's Hospital; W. C. Lewis, University Colleg, Abersstwith, and Guy's Hospital; \*C. E. W. Lyth, Firth College, and private study; \*G. E. Malcomson, Owens College; \*E. L. Martin, St. Bartholomew's Hospital; L. H. Moiser, Yorkshire College; E. S. Montagu, University College, and private study; A. E. Pinniger, University College and Middlesex Hospital; \*E. Prall, St. Thomas's Hospital, and private study; W. P. Price, St. Bartholomew's Hospital; E. G. Pringle, St. Bartholomew's Hospital; \*W. A. Rees, University College and Middlesex Hospital; \*W. A. Rees, University College and Middlesex Hospital; \*G. S. Robertson, Guy's Hospital and Dulwich College; \*F. C. Robinson, Guy's Hospital; E. S. Routly, St. Mary's Hospital; \*C. C. Rushton, Owens College; W. H. Scott, University Tutorial College; P. H. Seal. University College; H. B. Simpson. University College; D. Smith. University College; E. B. Smith, St. Bartholomew's Hospital; \*J. E. S. Smith, Owens College; R. W. Sprague, St. Paul's School; \*Alice Taylor, University College; \*Louisa Graham Thacker Bedford College, London; \*E. C. Whitehead, Wyggeston School, Leicester; Hilda Kate Whittingham, University Tutorial College; E. Wilkinson. Mason College; Lilian May Barker Wright, University College, Nottingham; \*G. P. Young, King's and University Tutorial Colleges.

Internetial Examination in Science and Preliminary Scientific Examiners:

EXAMINATION CONJOINTLY.—The following candidates have satisfied the

EXAMINATION CONJOINTLY.—The following candidates have satisfied the Examiners:

Inorganic Chemistry (Honours)—First Class: †G. E. Shaw. Birkbeck Institution; J. Talbot (Exhibition), Trinity College, Cambridge. Second Class: E. G. Highfield, University College, Liverpool, and private study; F. Horton, King Edward's High School, Birmingham, and Mason College; H. M. Joseph, University College, Isr. Shedden, Mason College; A. Slator, Mason College; Third Class: R. H. Aders, University and University Tutorial Colleges; W. Burton, University College, Aberystwith; A. E. Dunstan, Firth College; A. T. Etheridge, Mason College; W. Eyre, Firth College; W. H. Harwood-Yarred, University Tutorial College and private tuition; W. W. Jones, Mason and Cleobury Mortimer Colleges and private study; E. Likiernik, private study; E. C. Williams, St. Bartholomew's Hospital and Birkbeck Institute.

Experimental Physics (Honours).—First Class: W. H. Eccles, Roysl College, Oxford; J. Talbot (Neil Arnott Exhibition and Medal), Trinity College, Cambridge. Second Class: A. E. Dunstan, Firth College; F. Horton, King Edward's High School, Birmingham, and Mason College. Third Class: A. B. Chatwood, University College and private tuition; M. Coales, Mercers' School; R. C. Roberts, University College, Bangor.

Zoology (Honours).—Second Class: W. H. Harwood-Yarred, University Tutorial College and private tuition; J. E. Stratton, University College. Edith Waine Turner Watts, University Tutorial College and private study.

Pass List.—First Division: R. J. Carter, Christ Church, Oxford; J. T.

Edith Wanne Turner Trans, S. S. Carter, Christ Church, Oxford; J. T. Brass List.—First Division: R. J. Carter, Christ Church, Oxford; J. T. D'Ewart, private study; F. Fritsch, University Tutorial College, A. R. Short, Merchant, Venturers' Technical College, Bristol; W. E. J. Tuohy, Guy's Hospital. Second Division: Dora Eliza Bailey, Royal Holloway College: H. J. Bailey, University College, Sheffield; C. J. Loosely, University and University Tutorial Colleges and private study.

LOOSely, University and University Autorias Confedence of Study.

Honours Candidates recommended for a Pass.—E. R. Carling, Westminster Hospital and Carlyon College; A. E. H. Pakes, Guy's Hospital.

\* These candidates have now completed the examination.
† Obtained the number of marks qualifying for the exhibition.

CONJOINT BOARD IN ENGLAND

CONJOINT BOARD IN ENGLAND.

The following gentlemen passed the First Examinations of the Board in the subjects indicated. under the Five Years' Regulations:

Part I. Chemistry and Physics.—C. M. Anthony, Guy's Hospital; C. R. H. Ball, Cambridge University; W. B. Barnes, University College, Bristol; J. A. Bartlett, University College, Bristol; R. L. Beane, St. Thomas's Hospital; T. E. Blunt, London Hospital; F. E. Bolton, University College Hospital; M. O. Boyd, Oxford University; C. Bramhall, London Hospital; R. E. Brayne, Guy's Hospital; C. J. Brierley, Yorkshire College, Leeds; H. L. Burgess, London Hospital; R. Butterworth, St. Mary's Hospital; F. W. Cheese, St. Bartholomew's Hospital; J. W. H. Clark, London Hospital; R. Cock, Charing Cross Hospital; R. T. Collins, Guy's Hospital; N. A. W. Conolly, St. Bartholomew's Hospital; C. H. Cox, Mason College, Birmingham; B. A. Cox, King's College Hospital; W. Crampton, University College, Liverpool; F. W. Cresswell, St. Mary's Hospital; P. P. Croly, London Hospital; G. W. Curtis, University College Hospital; L. Daft, Firth College, Sheffield; C. F. Day, private study: E. J. Dermott, University College, Bristol; C. M. Dickinson, London Hospital; H. T. Doble, St. Mary's Hospital; T. W. H. Downes, St. Thomas's Hospital; W. R. L. Drawbridge, St. Bartholomew's Hospital; H. R. Dutton, Middleesx Hospital; T. R. Eames, Owens College, Manchester; L. S. Edginton, London Hospital; G. J. Evans, St. Mary's Hospital; H. Everett, London Hospital; G. S. Ewen, St. Bartholomew's Hospital; H. Gardner, Firth College, Sheffield; A. C Gould, St. Mary's Hospital; H. Gardner, Firth College, Sheffield; A. C Gould, St. Mary's Hospital; H. Gardner, Firth College, Sheffield; A. C Gould, St. Mary's Hospital; H. Gardner, Firth College, Sheffield; A. C Gould, St. Mary's Hospital; A. Gregory, Yorkshire College, Leeds; W. H. Griffith, University College, Birmineham; F. W. Jackson, St. Bartholomew's Hospital; G. W. G. Hughes, King's College Hospital; T. Hutchinson, Mason College, Birmineham; F. W. J

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mew's Hospital; J. L. Lewis, London Hospital; G. C. Lowe, Guy's Hospital; O. L. Lewis, Candon Hospital; G. C. Lowe, Guy's Hospital; O. L. Lewis, Candon Hospital; H. V. McGueller, University College, Birmingham; J. F. McQueen, Clifton Laboratory, Bristol; W. McD. MacDowall, London Hospital; H. V. McGuire, University College, Liverpool; H. M. Major, St. Mary's Hospital; R. P. Mar's College, Liverpool; H. M. Major, St. Mary's Hospital; R. P. Mar's Month of the Mary of the Mary of the Hospital; A. F. Miskin, St. Thomas's Hospital; G. Lower, G. Mary's Hospital; A. F. Miskin, St. Thomas's Hospital; G. Lower, G. Mary's Hospital; A. F. Miskin, St. Thomas's Hospital; G. Lower, G. College, Leeds; R. Moyle, Guy's Hospital; C. Lower, St. Bartholomew's Hospital; A. C. Osburn, Guy's Hospital; C. L. C. Owen, St. Bartholomew's Hospital; A. C. Osburn, Guy's Hospital; C. L. C. Owen, St. Bartholomew's Hospital; N. R. Phillips, University College, Cardiff; C. A. G. Phips, Owens College, Manchester; A. P. Piggott, Pharmaceutical Society's School: J. F. Powell, St. Georce's Hospital; C. A. G. Phips, Owens College, Manchester; A. P. Piggott, Pharmaceutical Society's School: J. F. Powell, St. Georce's Hospital; T. Richards, University College, Cardiff; P. M. Rivaz, Nonconformists Grammar School, Bishop Stortford; B. B. Riviere, St. Paul's School, West Konsington: W. C. Roberts, Guy's Hospital; C. R. Rivag, University College, Hospital; C. R. Rivag, Hospital; D. R. Scott, St. Bartholomew's Hospital; H. W. Shang, C. R. Rivag, H. R

College Hospital; L. S. Edginton, London Hospital; H. Fretcher, London Hospital; A. W. Gater, Guy's Hospital; G. F. Gill, St. Bartholomew's Hospital; A. S. G. Goldsmith, St. G-orge's Hospital; B. W. Gonin. St. Mary's Hospital; A. Godall, St. Kartholomew's Hospital; H. A. S. Gover, St. Mary's Hospital; E. W. Grogono, Londou Hospital; L. Hirsch, Grant Medical College, Bombay; G. T. Holford, St. Thomas's Hospital; C. E. A. Huddurt, Loudon Hospital; W. S. Hughes, Charing Cross Hospital; I. Ide, Charing Cross Hospital; F. C. Lambert, St. Mary's Hospital; C. J. M. Lawrence, Owens College, Manchester; R. E. H. Leach, St. Thomas's Hospital; J. W. Lewellyn, University College, South Wales, Cardiff; R. R. Lewis, Middlescx Hospital; N. S. Meiklejohn, St. Paul's School, West Kensington; F. W. Miller, King's College, Liverpool; W. Martin, St. George's Hospital; N. S. Meiklejohn, St. Paul's School, West Kensington; F. W. Miller, King's College, Bristol: L. W. Morgan, University College, South Wales, Cardiff; H. W. Morris, Guy's Hospital; F. W. Morgan, University College, Bristol: L. W. Morgan, University College, South Wales, Cardiff; H. W. Morris, Guy's Hospital; F. M. M. Ommsnney, Guy's Hospital; F. D. Parbury, St. Bartholomew's Hospital; F. B. Peafold, Middlesex Hospital; R. C. Pitt, London Hospital; F. D. Pye-Smith, Firth College, Sneifield; G. Raymond, St. Thomas's Hospital; C. A. E. Ring, Guy's Hospital; R. A. de B. Rose, University College Hospital; C. W. Sharpley, Yorkshire College, Leeds: A. W. Soper, Guy's Hospital; F. M. G. Tulloch, St. Mary's Hospital; G. de B. Turtle, King's College Hospital; J. A. W. Webster, St. Mary's Hospital; J. H. Wickert, London Hospital; H. A. Woodriff, St. Bartholomew's Hospital; Part I. Chemistry, including Chemical Physics.—E. J. E. Bowen, London Hospital and University College, London; E. R. Eddison, St. Bartholomew's Hospital; E. S. Crisjin, King's College, London; St. Bartholomew's Hospital; E. S. Crisjin, King's College, London; St. Bartholomew's Hospital; E. Gray, Queen's College

VICTORIA UNIVERSITY.

VICTORIA UNIVERSITY.

FINAL EXAMINATION IN THE FACULTY OF MEDICINE.—The following candidates have satisfied the Examiners:

Part I.—D. A. Alexander. Univ; J. W. Anderson, Univ.; D. A. Ashton, Owens; J. T. Auld, Owens, J. W. Barker, Yorks.; T. T. Bark, Univ.; H. P. Clarke, Owens, J. Craig. Owens, H. R. Cross, Yorks.; W. Crozier, Univ.; S. S. Depree, Univ.; E. C. Dutton, Owens; E. W. Floyd, Owens; J. Goodall, Yorks; J. P. H. Greenhalgh, Owens; R. Hamer, Owens; H. F. Hart, Univ.; T. W. Hart Owens; E. M. Hime, Yorks; F. Hoyle, Owens, F. W. Inman, Univ.; H. H. MoNabb, Owens, E. J. Martin, Owens; J. Mooney, Owens; S. C. Moore, Univ.; H. Osborne, Owens; W. H. Richardson, Owens; W. Rigby, Owens, A. Sporg, Yorks; E. Trotter, Yorks.; E. Turton, Yorks; G. C. Walker, Univ.; L. S. Whitwam, Univ.; T. H. Wignall, Owens; O. H. Woodcock, Owens.

Part II.—M. Aungier, Univ.; T. F. Bamford, Owens; W. H. Bateman, Owens; R. W. Bollans, Yorks.; J. J. Butterworth, Owens; J. H. Clarke, Owens; F. Darlow, Yorks.; J. E. Dutton, Univ.; P. H. Fearnsides, Yorks.; W. Graham, Univ.; D. G. Hurter, Univ.; A. T. Lakin, Owens; J. R. Lambert, Yorks.; A. Lawson, Owens; J. H. Mason, Yorks.; J. Mooney, Owens; C. H. Moorhouse, Yorks.; A. M. Pilcher, Owens; F. S. Pitt-Taylor, Univ.; J. Prestwich, Owens; F. Pritchard, Owens; A. L. Rhind, Owens; J. H. Willett, Univ.

Honours, Class II.—W. H. Bateman, Owens: J. E. Dutton, Univ.; W.

Univ. Univ. Univ.; W. H. Bateman, Owens; J. E. Dutton, Univ.; W. Graham, Univ.; A. S. Griffith, Univ.; H. Hartley, Owens; D. G. Hurter, Univ.; C. H. Moorhouse, Yorks.; J. H. Sheldon, Owens; R. Sutherland, Univ.

SECOND EXAMINATION.—The following candidates have satisfied the registros.

xaminers

SECOND EXAMINATION.—The following candidates have satisfied the xaminers:

Anatomy and Physiology.—S. W. Battle, Yorks.; G. Binns, Owens; J. P. Brown, Owens; W. J. Butcher, Owens; J. S. Byrne. Univ.: H. H. Bywater, Owens; E. W. Falconer, Owens; F. A. L. Foulds, Owens; H. Holt. Owens; H. S. McLellan, Owens; F. A. Morrison, Owens; R. S. Nichol, Owens; T. E. Kegan, Owens; H. Scholfic'd. Owens; G. M. Sharpe, Yorks.; H. Snape, Owens; W. A. Stott, Yorks.; E. Swales, Univ.; R. N. West, Owens; R. D. Willcocks, Univ.; P. G. Williamson, Owens.

Materia Medica and Pharmacy.—G. Ainsworth, Owens; A. Anderson, Owens; E. W. Anderton, Yorks: M. B. Arnold, Owens; E. M. Asheroft, Owens; J. T. Bailey, Owens; H. Bates, Univ.; A. D. Beckett, Owens; P. Benington, Univ.; A. T. Rlease, Owens; H. Brown, Yorks; P. A. Browne, Univ.; C. W. Budden, Univ.; F. Bullough, Owens; E. R. Cooper, Owens; J. M. Cort, Owens; D. Cowin, Owens; C. W. Crawshaw, Owens; J. L. Dimond, Univ.; T. H. B. Dobson, Owens; W. F. Ellis, Yorks; R. J. Ewart, Univ.; A. H. B. Fletcher, Yorks; H. E. Fox, Owens; M. Gamble, Owens; W. Garstang, Owens; D. G. Gellatly, Owens; R. Gordon, Owens; F. Griffith, Univ.; F. G. Hack, Owens; C. R. Hall, Owens; W. Garstang, Owens; F. W. Harrowell, Yorks; L. C. Johnson, Owens; R. E. Kelly, Univ.; R. Lawrence, Owens; C. H. Lee, Owens; H. S. Lister, Owens; J. McIlraith, Owens; J. C. Mann, Univ.; H. J. Moon,

Owens; T. F. Pugh, Univ.; P. A. H. Radcliffe, Yorks.; A. Ramsbottom, Owens; S. Renshaw, Owens; E. E. Roberts, Univ.; J. H. Sutcliffe, Yorks.; R. W. Taylor, Yorks.; T. Tierney, Owens; C. R. Willans, Yorks.; T. B. Williams, Owens; F. P. Wilson, Univ.; J. D. Windle, Owens; W. A. B. Young, Owens.

FIRST EXAMINATION.—The following candidates have satisfied the

examiners:

FIRST EXAMINATION.—The following candidates have satisfied the graminers:

Part II. Biology.—R. Appleton, Yorks.; P. W. Ashmore, Yorks.; F. H. S. Ashworth, Owens; J. B. Barnes, Owens: J. H. Battersby, Owens: H. M. Berry, Univ.; C. H. Booth, Yorks.; N. Bradley, Univ.; S. B. Brentnall, Owens: R. N. Butterworth, Yorks.; W. H. Canter, Yorks.; J. B. Cook, Owens; A. Cran, Owens; E. N. Cunliffe, Owens; S. W. Davies. Univ.; A. M. Deane, Yorks: T. Eastham, Owens; J. E. Floyd, Owens; F. W. Gatenby, Owens; G. W. Gelderd, Univ.; P. H., Green, Owens; J. W. Greenwood, Owens; P. T. Harding, Owens; F. W. Hayes, Yorks.; G. Heathcote, Owens; R. T. Heathcote, Owens; J. P. Henderson. Univ.; A. G. Jackson, Univ.; S. J. C. Johnson, Owens; C. J. Lapage, Owens; C. Mackay, Owens; H. C. McManus, Univ.; G. G. Parkin, Owens; R. T. A. Patchett, Owens; H. D. Pearson, Yorks.; S. Platts, Yorks.; M. B. Potts, Yorks.; H. H. Rayner, Owens; S. W. Swindells, Owens; W. Rotherham, Univ.; E. Savill, Yorks.; F. R. Sawdon, Owens; G. H. Shaw, Owens; W. F. Shaw, Owens; S. W. Swindells, Owens; H. G. Tansley, Owens, J. C. Teasdale, Yorks; M. G. L. Walker, Yorks.; H. C. Waterhouse, Owens; A. Wharton, Owens; R. G. Wills, Univ.; B. M. Wilson, Owens; J. G. Woolham, Owens; F. W. B. Young, Univ.

DIPLOMA IN PUBLIC HEALTH.—The following candidates have satisfied

the examiners:

J. H. Ashworth, H. P. Butterworth, W. E. Davies, T. W. H. Garstang.
The following degrees have been conferred:

Bachelor of Medicine and of Surgery.— W. H. Bateman, Owens; \*J. E.
Dutton, Univ.; \*W. Graham, Univ.; \*A. S. Griffith, Univ.; \*H.
Hartley, Owens; \*D. G. Hurter, Univ; \*C. H. Moorhouse, Yorks;
\*J. H. Sheldon, Owens; \*R. Sutherland, Univ.; M. Aungier, Univ.;
T. F. Bamford, Owens; R. W. Bollans, Yorks; J. J. Butterworth,
Owens; J. B. Clarke, Owens; F. Darlow, Yorks; P. H. Fearnsides,
Yorks: H. M. Henderson, Univ.; A. T. Lakin, Owens; J. R. Lambert, Yorks; A. Lawson, Owens; J. H. Mason, Yorks; J. Mooney,
Owens; A. McL. Piloher, Owens; F. S. Pitt-Taylor, Univ.; J. Prestwich, Owens; F. Pritchard, Owens; A. L. Rhind, Owens; A. Wightwick, Owens; J. H. Willett, Univ.

\* Second Class Honours

#### \* Second Class Honours.

CONJOINT BOARD IN SCOTLAND.

THE following candidates have passed the respective examinations as

Inter Iollowing candidates have passed the respective examinations as inder:
First Examination Five Years' Course.—J. M. Morton (with distinction), J. L. Stephenson, J. M'Intyre, R. D. Duif, Rona Lockhart, R. Wardlaw, A. M'Millan (with distinction), W. H. Duncan, P. M. Dewar, Charlotte M. Crea, M. F. Cusack, E. J. Evatt, K. P. Chatterjee, J. O'Connor, J. J. Lynch, J. C. Galloway, J. E. Cooper, C. H. Nash, S. V. T. Barr.
First Examination: Four Years' Course.—C. A. R. Hall, D. C. Blair, R. Roberts, A. C. Turner, J. Graham, G. A. Thomson.
Second Examination: Five Years' Course.—O. F. M'Carthy, W. J. Buckmaster, E. M. M'Swiney. D. Fyfe, C. M'Donnell, J. N. Meade, J. T. Bradley, W. Oglivy, W. A. Benson.
Second Examination: Four Years' Course.—H. R. Battiscombe, R. C. Reid. T. E. Saxby, J. Robertson, G. A. Thompson, J. T. Farren, T. W. Colthurst.

W. Colthurst.
Third Examination.

W. Colthurst.

Third Examination.—J. M. Inverarity, R. Stewart, A. J. Wilson, W. M. Farlane, J. Ross, J. Dunlop.

Final Examination, and admitted L.R.C.P.and S.E. and L.F.P.S.G.—J. R. Riddell, R. H. Fleming. A. Ross, R. S. Elvins, R. H. Munro (with honours), G. H. A. Taylor. A. C. Adderley. J. Junlop (with honours), G. L. Jones, T. E. Saxby. J. Elliott, A. Emlyn, J. Sanderson, J. A. Campbell. W. G. Silvester, D. M'Gregor, D. A. Chalmers, E. F. L. de Jersey, T. S. Ross, E. H. Sheldon, D. C. Rowlands, T. D. Waddell, G. B. Simpson.

ERRATUM.—In the BRITISH MEDICAL JOURNAL of August 7th, page 349, in the list of those who were granted the diploma in Public Health of the Royal College of Physicians conjointly with the Royal College of Surgeons, the third name was misspelt; it should have been Robert Erskine.

## PUBLIC HEALTH

#### POOR-LAW MEDICAL SERVICES.

THE REGISTRAR-GENERAL'S QUARTERLY RETURN.

THE Registrar-General has just issued his return relating to the births and deaths registered in England and Wales during the second or spring quarter of this year, and to the marriages during the three months ending March last. The marriage-rate was equal to 11.7 per 1,000 of the population, and corresponded with the average rate in the same quarters of the ten preceding years.

The births registered in England and Wales during the three months ending June last numbered 20,345. and were equal to an annual rate of 20,2 per 1,000 of the population, estimated by the Registrar-General to be rather more than thirty-one millions in the middle of this year. This rate was below that recorded in the corresponding quarters of any of the ten preceding years, during which the birth-rate averaged 31.4 per 1 000. The birth-rates in the several countier ranged from 21.4 in Rutlandshire, 22.0

in Sussex and in Westmorland, and 23.4 in Surrey to 33.4 in South Wales, 34.0 in Monmouthshire, 34.2 in Staffordshire, and 35.0 in Durham thirty-three of the largest English fowns, including London, the birth-rate last quarter averaged so fowns, including London, the birth-rate last quarter averaged so fowns, including London, the birth-rate last quarter averaged so fowns, among which it averaged 30.6 in the thirty-three was 13.9 in Fighton, and 35.0 in Coydon to 33.9 in Salford, 34.0 in Halifax, 23.0 in Brighton, and 35.0 in Gateshead.

The births registered in England and Wales during the quarter ending June last exceeded the deaths by 100.267; this represents the natural increase of the population during that period. It appears from returns issued by the Board of Trade that 57.128 emigrants embarked during last quarter, for places outside Europe, from the various ports of the United Kingdom at which emigration officers are stationed. Of these, 21.66; were English, 3.71 Scotch, and 6.36 Irish, while 15.67 were of foreign origin. Compared with the averages in the corresponding periods of recent years, the proportion of emigrants from each of the three divisions of the United Kingdom showed a considerable decline.

During the second quarter of the current year the deaths of 126.078 persons were registered in England and Wales, equal to an annual rate of 16.3 per 1,000 of the estimated population; this rate was 1.8 per 1,000 below the mean rate in the corresponding periods of the ten preceding years. The lowest county death-rates last quarter were 11.1 in Middlesex, 12.5 in Surrey, 12.6 in Sussex, and 12.0 in Rutlandshire; while the highest rates were 18.0 in Warwickshire, in Cheshire, and in South Wales, 19.6 in Lancashire, and 21.4 in North Wales. In the urban population of nearly ten millions the rate was 15.5 per 1,000. These rates were respectively 21 and 173 per 1,000 below the average rates in the corresponding quarters of the ten preceding years. Among thirty-three of the largest English towns the mean d

The rate of infant mortality in England and Wales last quarter, or the proportion of deaths under 1 year of age to registered births, was equal to 124 per 1.000, and was slightly below the mean proportion in the corresponding periods of the ten preceding years. In London the rate of infant mortality was 112 per 1.000, while it averaged 130 in the thirty-two provincial towns, among which it ranged from 88 in Croydon, 100 in Portsmouth, 105 in Swansea, and 108 in Huddersfield to 167 in Preston, 168 in Burnley, 174 in Bolton, and 194 in Salford.

The mean temperature of the air during last quarter at the Royal Observatory, Greenwich, was 53.1°, and was 0.7° above the average in the corresponding quarters of 126 years; it was 0.2° below the average in April and 0.3° in May, but showed an excess of 2.7° in June. The rainfall during the quarter amounted to 4.80 inches, and was 0.82 of an inch below the average.

HEALTH OF ENGLISH TOWNS.

In thirty-three of the largest English towns, including London, 5,760 births and 5,666 deaths were registered during the week ending Saturday last, August 7th. The annual rate of mortality in these towns, which had risen from 14 7 to 22.9 per 1,000 in the five preceding weeks. Further increased to 26.9 last week. The rates in the several towns ranged from 12.0 in Halifax, 12.3 in Huddersfield, 13.9 in Gafeshead, and 16.1 in Sunderland to 34.2 in Nottingham, 35.1 in Sheffield, 41.3 in Liverpool, and 46.2 in Preston. In the thirty-two provincial towns the mean deathrate was 27.7 per 1,000. The zymotic death-rate recorded in London, which was 25.7 per 1,000; in London the death-rate was equal to 8.1, while it averaged 0.5 per 1,000; in London the death-rate was equal to 8.1, while it averaged 10.5 per 1,000; in London the death-rate was equal to 8.1, while it averaged 10.5 per 1,000; in London the death-rate was equal to 8.1, while it averaged 10.5 per 1,000; in London the death-rate was equal to 8.1, while it averaged 10.5 per 1,000; in London the death-rate of 1.8 in Birmingham, 2.2 in Manchester, 2.4 in Wolverhampton and in Blackburn. 4.2 in Salford, and 19.0 in Preston; whooping-cough of 1.1 in Oldam; and diarrhea of 10.5 in Leicester, 11.9 in Birmingham, 12.3 in Portsmouth, 13.3 in Sheffield, 14.5 in Liverpool, and 16.3 in Nottingham. The mortality from scarlet fever and from "fever" showed no marked excess in any of the large towns. The 62 deaths from diphtheria in the thirty-three towns included 42 in London, but not one in any of the thirty-two large provincial towns; and one small-pox case was under treatment in the Metropolitan Asylums Hospitals and in the London Fever hospital, which had increased from 2,380 to 3,106 at the end of the fourteen preceding weeks, had further risen to 3,239 on Saturday last; 370 new cases were admitted during the week, against 381, 396, and 360 in the three preceding weeks.

## MEDICAL NEWS.

THE SANITARY CONDITION OF RAILWAY CARRIAGES.—Many of the Boards of Health in the United States are now giving attention to the sanitary condition of railway carriages. It is stated that, in consequence of pressure put upon them, some companies are issuing stringent regulations relative to the airing, cleaning, and disinfection of the carriages at stated

VENTILATION IN HOUSES AND HOSPITALS.—The Society of Chemical Industry held its annual meeting in Owens College, Manchester, on July 14th, when Dr. Schunck, the President, mentioned the nuisance caused by dense smoke in large towns. He said that the great distress caused to those suffering from pulmonary disorder by the fogs so often prevailing in large centres of population had no doubt more than once suggested to inquirers the possibility of filtering the air before allowing it to enter our dwellings. The difficulties of such a device did not seem great in themselves, the real difficulty arising from the habits and prejudices of the people, who could not understand the possibility of ventilation except it be through windows and doors. Professor Oliver, in a paper on The Effects of Urban Fog upon Cultivated Plants, mentioned with favour a plan devised by Mr. Thorp, a horticulturist of Stepney, who caused the air entering his hothouses to pass through boxes containing trays with sticks of charcoal before impinging on the hot-water pipes, an out-draught of air being secured by means of "exhaust caps" placed on or near the ridge of a house. The plan, in Professor Oliver's opinion, was an efficient one. That any such plan would be a proper of the plan would be a plan would be appeared by a plan would be a plan would succeed in private houses as at present constructed was very doubtful, but in institutions such as hospitals, especially consumption hospitals, some such scheme might be tried, an essential condition of success being that all entrance of air except through the ventilating boxes be entirely prevented.

#### MEDICAL VACANCIES.

#### The following vacancies are announced:

BIRMINGHAM GENERAL HOSPITAL.—House-Physician. Salary, £70 per annum, with residence, board, and washing. Appointment for one year, but eligible for re-election. Applications to Howard J. Colline, House-Governor, by September 3rd.

BLACKBURN AND EAST LANCASHIRE INFIRMARY. Senior House-

Furgeon. Salary, from per annum, with board, washing, lodging, etc.
Applications to Nathan W. Smith, Secretary, Infirmary Office, 15, Richmond Terrace, Blackburn, by August 23rd.

BRISTOL ROYAL INFIRMARY—Resident Casualty Officer. Appointment for six months. Board, lodging, and washing provided. Conditional honorarium of £10. Applications to the Secretary by August 21st.

BRITISH INSTITUTE OF PREVENTIVE MEDICINE.—Bacteriologist to BRITISH INSTITUTE OF PREVENTIVE MEDICINE.—Bacteriologist to the Antitoxin Department at Sudbury. Salary, \$\(\xi\_2\)\cop per annum, with dwelling accommodation on the premises. Applications to Allan Macfadyen, Honorary Secretary and Director, 101, Great Russell Street, London, W.C., by September 15th.

CAMBRIDGE: ADDENBROOKE'S HOSPITAL.—Resident House-Physician. Salary, \$\(\xi\_6\)\$ per annum, with board, lodging, and washing. Applications to the Secretary by August 24th.

CENTRAL LONDON OPHTHALMIC HOSPITAL, Gray's Inn Road, W.C.—House-Surgeon. Rooms, coals, and lights provided. Applications to the Secretary by August 17th.

DENBIGHESHIRE INFIRMARY. Denbigh.—House-Surgeon. Must be

DENBIGHSHIRE INFIRMARY, Denbigh.—House-Surgeon. Must be doubly qualified and conversant with Welsh language. Salary, £80 per annum, with board, residence, and washing. Applications to W. Vaughan Jones, Secretary, by August 31st.

- Vaughan Jones, Secretary, by August 31st.

  EDINBURGH: ROYAL EDINBURGH HOSPITAL FOR SICK CHILDREN.

  —Two Resident Physicians. Applications to Messus. Henry and Scott, 20, St. Andrew's Square, Edinburgh, by September 15th.

  EDINBURGH: VICTORIA HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST.—Non-resident Medical Officer for six months. Salary at the rate of £60 per annum. Applications to the Honorary Secretaries. Messrs. Wallace and Guthrie, 1, North Charlotte Street, Edinburgh, by August 20th.

  EVELINA HOSPITAL FOR SICK CHILDREN, Southwark Bridge Road, S.E.—Senior Resident Medical Officer. Salary, £70 per annum, with board and washing. Applications to the Committee of Management by August 18th.

  GARTLOCH ASYLUM. near Glasgow.—Assistant Medical Officer. Salary
- GARTLOCH ASYLUM, near Glasgow.—Assistant Medical Officer. Salary, £100 per annum, with board, lodging, etc. Applications to Medical Superintendent before August 21st.
- GREAT NORTHERN CENTRAL HOSPITAL, Holloway Road N .- House Physician. Appointment for six months, with salary £60 per annum,

and board, lodging, and washing. Applications, on forms provided, to be sent to Lewis H. Glenton Kerr, Secretary, by August 16th.

GUILDFORD: ROYAL SURREY COUNTY HOSPITAL.—Assistant, House-

Surgeon. Board, residence, and laundry found. Applications to the Honorary Secretary.

- JOHN LUCAS WALKER STUDENTSHIPS.—Studentship value £250, and tenable for three years; must devote himself or herself to original research in pathology. Applications to Dr. A. A. Kanthack, Pathological Laboratory, Cambridge, by October 15th.
- LANARK, COUNTY OF.—Resident Physician for the Middle Ward Isolation Hospital. Salary, £140 per annum, with board, etc. Applications to J. F. Mackenzie, District Clerk, County Buildings, Hamilton, by August 25th.
- LANCASTER: ROYAL ALBERT ASYLUM.—Assistant Medical Officer, unmarried; age not under 25. Salary commencing £120 per annum, and increasing by £15 annually to £150, with board, apartments, and washing. Applications to James Diggens, Principal and Secretary, by August 16th washing. Al August 26th.
- MACCLESFIELD GENERAL INFIRMARY. Junior House-Surgeon, doubly qualified. Salary, \$70 per annum, with board and residence in the Justitution. Applications to the Chairman of the House Committee by August 16th.
- MANCHESTER CLINICAL HOSPITAL FOR WOMEN AND CHILDREN, Park Place, Cheetham Hill Road—House-Surgeon. Salary, £80 per annum, with apartments and board. Applications to Mr. Hubert Teague, Secretary, 30, Burton Arcade, Manchester by August 28th.

  MANCHESTER ROYAL INFIRMARY, DISPENSARY, AND LUNATIC HOSPITAL OR ASYLUM.—Honorary Dental Surgeon. Applications to the Chairman of the Board by August 31st.

- to the Chairman of the Board by August 31st.

  METROPOLITAN ASYLUMS BOARD.—Assistant Medical Officer at the North-Eastern Fever Hospital, St. Ann's koad, Tottenham, N.—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, unmarried, and not exceed 35 years of age. Applications on forms to be obtained at the Chief Office of the Board, Norfolk House, Norfolk Street, Strand, W.C., where they must be delivered by 10 A.M. on August 26th.
- NORTHAMPTONSHIRE.—Medical Officer for the County. Salary at the rate of £700, and allowance for travelling and other out-of-pocket expenses. Must reside at a place approved by the Sanitary Committee. Applications to H. P. Markham, Clerk to the Council, County Hall, Northampton, by September 8th.
- Northampton, by september 8th.

  PRESTWICH, MANCHESTER: COUNTY ASYLUM. Pathologist and Assistant Medical Officer. Salary, \$200 per annum, with board, residence, and washing. Applications to the Superintendent.

  ROTHERHAM HOSPITAL AND DISPENSARY.—House-Surgeon; doubly qualified. Salary \$105, with board, lodging, and washing. Appointment for three years. Applications to the Hon. Secretary by August
- ROYAL ALBERT HOSPITAL, Devonport. Assistant House-Surgeon for six months. Board, lodging, and washing provided. No salary. Applications to "Honorary Secretary of Medical Committee" by August 14th.
- ST. MARY'S HOSPITAL MEDICAL SCHOOL, Paddington, W.—Demonstrator of Anatomy. Applications to G. P. Field, Dean, by Sep-
- SOUTHPORT INFIRMARY.—Resident Junior House and Visiting Surgeon, doubly qualified. Appointment for six months, which is renewable. Honorarium at the rate of £30 per annum. Board and washing provided. Applications to Joseph Worrall, Infirmary Office, Arcade, Southport, by August 24th.
- SUSSEX COUNTY HOSPITAL, Brighton.—Fourth Resident Medical Officer, doubly qualified. Unmarried, and when elected under 30 years of age. Board, washing, and residence in the hospital, and salary not exceeding \$40 per annum. Applications to the Secretary, by September 1st.

TEIGNMOUTH HOSPITAL, South Devon.—House Surgeon. Salary, £60 per annum, with board, lodging, and washing. Applications to A. V. Chapman, Secretary, by August 23rd.

WESTMINSTER HOSPITAL, Broad Sanctuary, S.W.—Resident Obstetric Assistant. Appointment for six months. Applications to L. M. Quennell, Secretary, by August 18th.

#### MEDICAL APPOINTMENTS.

- BICKFORD, N. S., M.R.C.S.Eng., L.R.C.P.Lond., appointed House-Surgeon to the Hospital for Sick Children, Great Ormond Street.
- BOND, F. T., M.D., reappointed Medical Officer of Health to the Cirencester Urban District Council.
- BULLOCH, W., M.D., appointed Bacteriologist to the London Hospital and Lecturer on Bacteriology in the London Hospital Medical School.
- Ongwall, A., M.B., appointed Medical Officer of Health for the Kington Urban District, vice G. O. Jacobsen, L.R.C.P.Lond., M.R.C.S., deceased; and Medical Officer for the Pembridge District of the Kington Union.
- DOBBIN, Dr. Edward George, appointed Assistant Medical Officer at the St. John's Road Workhouse and Infirmary of the Islington Union.
- DRAFFIN, D. K., L.R.C.P., L.R.C.S.I., appointed Medical Officer for the Troedyrhiw District of the Merthyr Union.
- FOOT, Ernest Geo., M.R.C.S.Eng., L.S.A., reappointed Medical Officer for the Fittleworth District of the Petworth Union.
- GROSS, C. F., M.R.C.S., L.R.C.P.Lond., appointed Medical Officer for the Seventh District of the East Ashford Union, vice H. Wriggleworth, deceased.

- HEGGS, R. M., L.S.A.Lond., appointed Assistant House-Surgeon to the Wolverhampton and Staffordshire General Hospital, Wolverhampton.
- HONNYWILL, Alfred Oram, L.R.C.S., L.R.C.P.Edin., appointed Medical Officer to the Epsom (Rural), Sutton, Carshalton, and Leatherhead Joint Isolation Hospital.
- JAGO, C. S., M.R.C.S.Eng., L.S.A., appointed Medical Officer of Health for the St. Just Urban District.
- JONES, S. Cromwell, M.D.Lond., M.R.C.S.Eng., appointed Medical Officer for the Lower Town District of the Merthyr Union.
- IAYTON, Hy. Albert, L.R.C.P.Edin., M.R.C.S.Eng., appointed Medical Superintendent to the Bodmin Asylum, vice Richard Adams, L.R.C.P.Edin., M.R.C.S.Eng.
- Long, Dr., appointed Medical Officer for the Second Chesham District of the Amersham Union, vice A. E. Larking, M.D.Durh., resigned.
   MACDERMOTT, R. J., B.A.Dub., M.B., reappointed Medical Officer for the
- Northchapel District of the Petworth Union.
- MORCOM, A., L.R.C.S.Edin., L.S.A., reappointed Medical Officer of Health to the Luton Rural District Council.
- NEIL, James, M.D.Aberd., appointed Medical Superintendent and Secretary to the Warneford Asylum, Oxford, vice Dr. J. Bywater Ward, who retires at Michaelmas.
- PALMER, John, L.R.C.P.Lond., M.R.C.S.. appointed Medical Officer for the Snodland No. 5 District of the Malling Union.
- RAW, Nathan, M.D.Durh., B.S., appointed Medical Superintendent of the West Derby Union Infirmary, Mill Road, Liverpool, vice H. C. Chap-man, M.B.Lond., resigned.
- Scott, Alexander, M.D.Glasg., appointed Certifying Factory Surgeon for the Glasgow District, vice M. Charteris, M.D., deceased.
- STENHOUSE, Daniel, L.R.C.P., L.R.C.S. Edin., appointed Medical Officer for the Arnold District of the Basford Union, vice W. Lamb, M.D.,
- STEPHENS, Dr., appointed Medical Officer and Public Vaccinator of the West Auckland District of the Auckland Union, vice Robert Jas. Nevin, M.B., C.M.Glasg.
- STOKES, R. McClean, L.R.C.P., L.R.C.S.Edin., appointed Medical Officer for the Monmouth District of the Monmouth Union.
- SUTTON, Jas. Bryan, L.R.C.P.Lond., L.S.A. reappointed Medical Officer for the Hedgerley District of the Eton Union.
- WALKER, S. R., M.R.C.S., L.R.C.P., appointed House-Surgeon to the Westminster Hospital.
- WILSON, Francis Kenneth, M.B., B.S.Lond., M.R.C.S.Eng., L.R.C.P.Lond., appointed House-Surgeon to the Westminster Hospital.
- Worts, Edwin, L.R.C.P.Lond., M.R.C.S.Eng., reappointed Surgeon to the Essex and Colchester Hospital.

## BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 38 6d., which sum should be forwarded in post-office order and stamps with the notice not later than Wednesday morning in order to insure insertion in the current issue.

#### BIRTHS.

- CALEY. On the 5th instant, at Ealing, the wife of Guthrie Neville Caley, M.D., M.S., of a daughter.
- Hubbard.—On 31st July, 1897, at Hemel Hempstead, the wife of Arthur John Hubbard, M.D., of a son.
- SHAPLAND.—July 31st. at Southbrook. Budleigh Salterton, the wife of John Dee Shapland, M.A., M.B., B.S., of St. Andrews Road, Exmouth,

#### MARRIAGES.

- BURTON-SILVER.—August 4th, at All Saints, Kingsley, by the Rev. E. Silver, Highfield. Southampton, uncle of the bride, assisted by the Rev. A. P. Reynolds, Vicar of the Parish, William Edward Burton, M.R.C.S.. etc., of Frodsham, to Mary Elizabeth Harriet Silver, of Crofton Lodge, Kingsley.
- FULLER-GOSS -On August 5th, at St. Andrew's Church, Bath, by the Rev. J. Lunt. Alfred Leonard Fuller, M.R.C.S., L.R.C.P., to Ethel Margaret, eldest daughter of T. Biddulph Goss, Esq., M.R.C.S., L.S.A., r. Circus, Bath.
- HARVEY-TURNBULL.—On August 4th, at Congregational Church. St. Leonard's-on-Sea. by Rev. A. T. Saville, of Rye. Thomas Prickard Harvey, M.D., L.R.C.P Lond., M.R.C.S.Eng., etc. (late of Nottingham and Burma), to Louise Marion Turnbull, eldest daughter of the late Patrick Turnbull, Esq., of Sevenoaks and Edinburgh. N.B.—By licence.
- KNAGGS-PLAYNE. On August 10th, at the Parish Church, Minchinhampton, by the Rev. Christian Hartley, Francis Henry, son of Samuel Knaggs, of Huddersfield, to Martha Isabel, daughter of Charles Playne, J.P., Nailsworth, Glos.
- PHILLIPS—WAY.—On July 21st, at St. Jude's Church. Southsea, by the Rev. J. S. Blake, Vicar, and the Rev. J. W. Banks, uncle of the bride, and Vicar of Hatherleigh. North Devon, Surgeon John Elphinstone Hood Phillips, R.N., H M.S. Prince George, son of Captain John Phillips, R.N., to Kathleen Marian Esther, daughter of Frederick Walter Way, Surgeon Film Grave Southeas Surgeon, Elm Grove, Southsea

#### DEATHS.

- BARRS.—On August 4th, 1897, at Scarborough. Alice Bywater, aged 34 years, wife of Alfred G. Barrs, M.D., of Leeds, and youngest daughter of Henry Nelson, Esq.
- HARMAN.—In the Red Sea, on July 28th, from feb. rem., Rodolphe Harman, M.B., M.Ch. Trin. Coll. Dub., Army Medical Staff (by telegram). A martyr to his unselfish devotion to duty, and loving anxious care for all, save his own dear self.

P 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.

- POST-GRADUATE asks for information concerning the appointment of medical attendants to the British Ambassadors.
- T., who has been told that certain plants placed in the rooms of a house keep away flies, desires further information.
- asks how the appointments of divisional surgeon to the police in London are made
- . MEMBER asks for information as to the Practitioners' Examination (Five Years) of the R.C.P.I., with books to be read?
- M.R.C.S. desires to obtain a health chart of the southern counties, or particulars anywhere about the health of Fareham, Hants.
- M.D. asks to be recommended books on the physiological and therapeutical properties of alkaloids.
- M. J. G. asks what is the best book he can get on medical etiquette, or from what source can he obtain the most and best information on that subject?
- M.D. asks regarding the suitableness of St. Leonards and Hastings and Bournemouth as winter and spring quarters for cases of incipient phthisis in young and fairly vigorous subjects of either sex.
- B. writes: I do most of my visiting on a bicycle. Would any member of the London Medical Cycling Club kindly suggest a costume which, whilst suitable for cycling, yet would look quite professional?
- M.B. would be very grateful for information re clinical opportunities, fees, and cost of living in Lausanne, Switzerland, for a small family as compared with Great Britain.
- DUNELM asks what is the best form of mechanical exercise for a child aged 6 with weakness of the scapular muscles attached to the posterior border, causing the scapulæ alatæ and tendency to contracted chest. Would O'Dowd's or the Ranelagh be suitable?
- A MEDICAL MAN asks to be informed if he is correct in having at some time read, in a medical journal, that in one or more counties of Great Britain medical men are exclusively appointed to the post of coroner. If this is so, he wishes to know in what paper and the date such statement occurred.
- F.R.C.S. asks to be recommended a home where a young man of gentle takes the religious form. He is quite harmless and amenable when in the attack, and at other times is most agreeable and entertaining. He can pay  $\pounds_1$  a week, which must include everything. He is very musical.

#### OLD BOOKS.

- DELTA asks for information as to the value and the best mode of disposing of the three following books:

  1. P. Alpini de, Medicina Ægyptiorum et Jacobi Boutii de Medicina

  - Indorum (1644).

    2. Tabulæ Anatomicæ Bartholomæi Eustachii, Jo. Maria Lancisius (1714).

    3. The Medical Works of Richard Mead, M.D. With portrait. (1762).
- \* Mr. Bernard Quaritch, to whom we have referred the matter, informs us that "as far as I know the books mentioned in enclosed letter are of no value, and I am sorry to say I know of no one who would care to purchase them. The best thing to do is to put them into an auction

# X. Y. Z. asks whether it is customary for brother practitioners practising as dentists to charge their professional brethren more than out-of-pocket expenses for their services.

\*.\* We do not know whether where there is any absolute rule regulating this, but as a matter of fact many dentists charge medical men only out-of-pocket expenses.

#### ETHICS OF PURCHASE

- PURCHASER wishes for information as to the following ethical point: If a would-be purchaser have negotiations with a practitioner concerning the sale of his practice, but fails to come to terms, is he debarred from buying the practice or becoming the partner of a professional neighbour of the latter?
  - \*\* A would-be purchaser failing to come to terms with the vendor of a practice is not thereby debarred from buying the practice, or become the partner of a neighbouring practitioner in the same place. As a man of honour, however, he is bound to keep inviolate, and to take no advantage of, any confidence reposed in him during the negotiations which proved unsuccessful.

#### ATTENDANCE ON PROFESSIONAL BRETHREN.

- ETIQUETTE.—A correspondent who has been called in to attend professionally a young medical man, not in practice, who has come to reside in his district, wishes to know whether he ought to charge for the attendance or not.
  - \*\* It is torbidden by all rules of professional etiquette for one medical man to charge for attendance on another, unless at his particular desire. But it is generally held that if a wealthy member of the faculty seeks professional advice and courteously urges the acceptance of a fee it need not be declined, for no pecuniary obligation ought to be imposed on the debtor which the debtor himself would not wish to incur.