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## ILLUSTRATIONS.

PAGE	PAGE
Tumours and Enlargement of the Thyroid Gland treated Surgically, Mr. F. T. Paul (Twelve Figures) ...	3, 4
Multiple Cutaneous Gangrene of the Scalp in a Cachectic Child, Dr. A. D. Heath (Two Figures) ...	13, 14
Case of Lepra Leontina, Dr. Vawdrey Lush ...	16
An improved pattern of Giant Lithotrite, Brig.-Surg.-Lieut-Col. Keegan ...	24
New form of Hagedorn's Needles ...	24
Bronchial Breathing and Râles, Dr. S. West (Two Figures) ...	65, 66
A Method of Staining the Malaria Flagellated Organism, Dr. Patrick Manson (Nine Figures) ...	68, 69, 70
The Operation Theatre, Rotunda Hospital, Dr. W. J. Smyly ...	74
An Oxygen Warmer and Economiser, Mr. Herbert Robson ...	89
The Bacteriology of Alopecia Areata, Dr. G. Thin (Ten Figures) ...	128, 129, 130
Certain Points in the Causation and Treatment of Spinal Curvature, Mr. R. Barwell (Eight Figures) ...	132, 133, 134, 135
Ectropion: Complete Exposure of the Cornea for 10 Years without Destruction of the Eyeball, Dr. W. E. Thomson ...	135
Pump for Artificial Respiration, Mr. W. MacLennan ...	141
A Suspensory Girdle, Dr. T. Robinson ...	142
Suppurating Ovarian Cyst removed from an Infant, Mr. F. Eve ...	215
A Cycle Midwifery Bag, Dr. J. C. Clark ...	223
A Couch Table, Dr. R. Wise ...	223
Cirsoid Aneurysm of the Orbit, Forehead, and Scalp, Mr. W. M. Beaumont (Two Figures) ...	273, 274
Regrowth of Hair in Myxædema under Treatment with Thyroid Tabloids, Mr. T. F. Raven (Two Figures) ...	274
Spontaneous Expulsion of both Lenses in a Child, Mr. R. J. Hamilton ...	275
Seat Saddle for Cycles, Mr. W. S. Richmond (Two Figures) ...	279
Mitcham School ...	285
Changes in the Spinal Cord in Two Cases of Pernicious Anæmia, Dr. J. M. Clarke (Six Figures) ...	325, 326, 327
Four pieces of Wire removed from a Woman's Bladder, Mr. J. R. Lunn ...	342
An Apparatus for Administering Anæsthetics and other Volatile Vapours, Professor Hobday (Three Figures) ...	347
A Cleanable Bed Pan ...	348
A New Stethoscope: the Phonophone (Two Figures) ...	348
Final Report of a Case of a very large Innominate Aneurysm, Dr. D. Stewart (Two Figures) ...	388, 389
The Christy Anatomical Saddle ...	406
New Portable Eye Instrument Steriliser, Mr. S. Snell ...	406
Plan of the New Royal Portsmouth Hospital ...	409
Excision of Scapula for Sarcoma in the Infraspinatus Muscle occurring in a Girl aged 8 years: Recovery, with a Useful Limb, Dr. G. H. Edington ...	459
Meckel's Diverticulum, after Moderate Distension with Plaster, Dr. T. N. Kelynack ...	459
Successful Ceilomotomies for an Intrapertitoneal Rupture of a Tubal Gestation, and two other Uncommon Pelvic Tumours, Mr. J. L. Thomas (Two Figures) ...	461, 462
Description of the Conditions found in the Head and Neck two years and a-quarter after Ligation of all the Carotid Arteries, Jugular Vein, etc., of the Left Side, Mr. Thelwall Thomas ...	465
Punctured Wound of the Chest Wall penetrating the Sternum and wounding the Heart, Mr. R. J. Booth ...	470
Cortland Carriages ...	476
Axis Traction Forceps, Mr. F. M. Purchas ...	508
New Palpebral Forceps, Mr. H. Work Dodd ...	508
Portrait of Dr. John Braxton Hicks ...	518
Map of Ward Four of New York, showing Distribution of Cases of Tuberculosis, Dr. H. M. Biggs ...	632
Map of Ward Thirteen of New York, showing Distribution of Cases of Diphtheria, Dr. H. M. Biggs ...	633
Chronic Superficial Dissecting Glossitis, Dr. E. M. Sympson ...	651
Cradle for Hare Lip, Mr. P. C. Fenwick ...	657
An Improved Oesophageal Probang ...	657
A Hernia Corset, Mr. F. W. A. Stott ...	657
A Stricture Dilator, Mr. T. Jackson (Two Figures) ...	670
Operation for Abscess of the Lung due to Localised Necrosis, Dr. J. M. Clarke and Mr. C. A. Morton ...	681
A Pipe Stem impacted in one of the Bronchi for a period of Three Months, Mr. A. B. Francis ...	809
A Wrist Easel, Dr. Dundas Grant ...	815
A Surgical Lamp, Mr. H. R. B. Hickman ...	815
A New Anæsthetic Mask, Mr. W. E. Burton ...	815
Idiopathic Multiple Pigmented Sarcoma (Kaposi Type), Dr. G. T. Jackson (Two Figures) ...	867, 868
A Form of Pathological Pigmentation preceding Malignant Growth of the Skin, Dr. J. Galloway (Four Figures) ...	873, 874
Oophorectomy in the Treatment of Cancer, Mr. S. Boyd (Nine Figures) ...	892, 893, 894, 895
Friedreich's Ataxia, with notes of three Cases, Dr. H. Bramwell (Six Figures) ...	897, 898, 899
Removal of Adult Filariae in Cases of Lymphangitis, Surg.-Lieut-Col. Maitland ...	903
A Simple and Accurate Form of Sphygmometer or Arterial Pressure Gauge for Clinical Use, Dr. Leonard Hill and Mr. H. L. Barnard ...	904
Extrauterine Gestation*, Dr. J. S. D. MacCormac ...	905
The Revluc Pince-Nez (Two Figures) ...	909
Traumatic Aneurysm of Internal Maxillary, treated by Ligature of Common Carotid, Mr. H. L. Browne (Two Figures) ...	955
Accurate Measurement of Spinal Curvatures with Description of a New Instrument for the Purpose, Dr. R. T. McKenzie (Four Figures) ...	960
Gunshot Wound of the Spinal Cord, Mr. G. A. Peters ...	961
Two Cases of Meningocele successfully treated by Operation, Mr. W. D. Spanton (Four Figures) ...	963, 964
The Relationship of Movable Kidney to Renal Colic associated with Transitory Hydronephrosis and Intermittent Albuminuria: Treatment by Operation, Dr. D. Newman (Four Figures) ...	971, 972, 973
A Patent Pneumatic Medicator and Injector, Dr. D. Johnston ...	1003
New Aural and Throat Mirror, Mr. T. A. Goodchild ...	1004
Plan of Water Supply to Mill Cottages, Farleigh ...	1023
Retinitis Pigmentosa without the Characteristic Pigmentation, with Report of Two Cases, Dr. G. M. Gould (Two Figures) ...	1060, 1061
Trans-sacral Excision of the Rectum, Dr. C. B. Ball (Five Figures) ...	1067, 1068
The Roentgen Rays and the Fluoroscope as a Means of Detecting Small Deeply-Placed Stones in the Exposed Kidney, Mr. E. H. Fenwick (Five Figures) ...	1076, 1077
Malignant Tumour of the Brain originating in the Middle Ear, Dr. T. Barr and Mr. J. H. Nicoll (Four Figures) ...	1084
Perforate Septum Ventriculorum with Infective Endocarditis of the Pulmonary Valves, Dr. W. Gordon (Six Figures) ...	1175, 1176
Spontaneous Amputation of both Lower Extremities in a Newborn Infant, Surgeon-Captain C. Duer ...	1179
Removal of Spindle-Celled Sarcoma, weighing 4 lbs. 4 ozs., Mr. Storry (Two Figures) ...	1182
An Operation Table for the General Practitioner, Mr. R. B. Popham (Four Figures) ...	1188
Sketch of Transverse Section of the Valley of the River Medway, showing the Geological Formations and Water-Bearing Strata ...	1205
Obstruction of the Small Intestine by Gall Stones, Mr. W. J. Cant (Two Figures) ...	1258
A Bicycle Bag Carrier, Dr. J. W. Jones ...	1271
The Surgery of the Gall Bladder, Dr. A. H. Ferguson (Sixteen Figures) ...	1317, 1318, 1319, 1320, 1321, 1323
Congenital Dislocation of the Hip-joint, Mr. N. Smith (Five Figures) ...	1324, 1325, 1326
Bronchial and Vesicular Breathing, Dr. W. J. Harris ...	1419
Obstructive Cystic Tumour of the Bladder containing Two Calculi: Successful Removal by Suprapubic Cystotomy, Mr. P. J. Freyer ...	1421
Reversible Catheters and Tougies ...	1432
A Self-Retaining Uterine Tenaculum, Dr. A. Duke ...	1432
View of Bow River from Banff ...	1438
The Action of Anæsthetics upon Nerve: Ether and Chloroform, Dr. A. D. Waller (Twenty-three Figures) ...	1469, 1470, 1471, 1472
The Action of Anæsthetics upon Nerve, Surgeon-Colonel Lawrie (Six Figures) ...	1477, 1478, 1479
Spurious Abortion, with an Account of Three Cases, Dr. T. W. Eden (Three Figures) ...	1489
Chloroform and the Heart, Dr. L. Hill and Mr. H. L. Barnard (Two Figures) ...	1497
Angular Deformity of the Spine Treated by Immediate Reduction, Dr. Calot (Three Figures) ...	1502, 1503
Pyopneumothorax of Several Months' Duration Cured by Free Incision, with some Remarks on the Surgical Treatment of Pneumothorax, Dr. S. West (Two Figures) ...	1568
Improved Pistonless Hypodermic Syringe, Surgeon-Captain J. W. Cockerill ...	1583
The Treatment of some Deformities of the Nose, Professor T. Annandale (Four Figures) ...	1625, 1626
Forcible Straightening of the Spine in Pott's Disease, Mr. R. W. Murray (Three Figures) ...	1630, and full page facing
Rheumatoid Arthritis affecting Bones, 5,500 years old, Dr. W. P. May, full page facing ...	1631
Spontaneous Disappearance of a Congenital Cystic Lymphangioma, Mr. D'Arcy Power (Three Figures) ...	1633, 1634
Curative Effects of Milk Diet, Dr. G. Thin (Two Figures) ...	1635
Acromegaly, Mr. J. N. D'Esterre ...	1636
Volvulus of Meckel's Diverticulum, Mr. T. Carwardine ...	1637
Cervical Ribs, Dr. H. Alderson, full page facing ...	1638
Pathology of Genital Valgum, Mr. J. B. Footner, full page facing ...	1639
Chronic Eczema followed by Elephantiasis: Frambaesia or Syphilis? Lymphadenoma: Amputation of Thigh in a Young Child, Dr. O. Galgey (Five Figures) ...	1641, 1642
Angular Deformity of the Spine, treated by Immediate Reduction, Dr. P. Redard (Three Figures) ...	1643, 1644, 1645
An Invalid's Piano ...	1650
McEwan Hall and University Union, Edinburgh ...	1667
West Front of Edinburgh University Buildings with Meadow Walk ...	1668
Diagram illustrating the Outbreak of Typhoid Fever at Clifton ...	1670
The Correction of Certain Deformities by Operative Measures on Bones, Mr. A. Willett (Sixteen Figures) ...	1689, 1690, 1691, 1692, 1693, 1694, 1695, 1696
A Needle Holder, Dr. W. J. Branch ...	1735
Appliance for Spinal Caries and Torticollis (Two Figures) ...	1735
A New Cholecystotomy Spoon, Mr. M. Wardle ...	1735
The McEwan Hall, Edinburgh ...	1745
Pancreatic Cyst treated by Incision and Drainage. Mr. A. Doran (Eight Figures) ...	1780, 1782, 1783
Gunshot Injuries in the late Greco-Turkish War with Remarks upon Modern Projectiles, Mr. H. J. Davis (Sixteen Figures) ...	1789, 1790, 1791
Certain New Species of Nematode Hæmatozoa occurring in America, Dr. P. Manson ...	1838
Certain Changes in the Cells of the Ventral Horns and of the Nucleus Dorsalis (Clarkii) in Epidemic Cerebral Meningitis, Dr. L. F. Barker (Four Figures) ...	1839, 1840

## INDEX TO VOLUME II FOR 1897.

Aachen, specific method, combined with surgical treatment, non-typical syphilis cured by, 332; the treatment of syphilis at, 507, 685, 884, 1215

Abdomen, perforating wound of, 77, 1088; two cases of operation on in early childhood, 214; operations on in early childhood, 283; self-inflicted wound of, protrusion of viscera, recovery, 400; brief consideration on the diagnosis and treatment of penetrating wounds of the, 969

Abdominal sections, thirty-two consecutive, with thirty recoveries, 1490

Aberdare, adoption of the Infectious Disease (Notification) Act at, 1035

Aberdeen, report of medical officer of health of, 380

Abortion, normal and otherwise, 101; spurious, with an account of three cases, 1488; spurious, case of, 1639

Abraham, Dr. P. S., leprosy in the British Empire, 1409

Abrahams, Dr. B. L., hemiplegia in a young child, 1263

Abram, Dr. J. H., nitrogen excretion in sporadic cretinism, 1427; mouse favus, 1508

Abscess of left lung, operation, recovery, 342; of the temporo-sphenoidal lobe opened and drained through the osseous auditory meatus, 465; hepatic, seven consecutive cases of, treated by incision, 470; of the lung due to localised necrosis, operation for, 800; mediastinal, 1261; of ovary, 1728

Abstinence and life assurance, 603; total and longevity, 614, 1018

Academy, Royal of Medicine in Ireland, annual meeting and list of officers, 1342

— Royal of Medicine in Ireland, Section of Medicine, Charcot's disease, 18; a fatal case of alcoholism, *ibid.*; pneumonia a multiple infection, 1725; pityriasis rubra, *ibid.*

— Royal of Medicine in Ireland, Section of Obstetrics, specimens, 219, 1726; haemorrhage into the broad ligament complicating the puerperium, *ibid.*; double ovariotomy, with 18 months' interval between the operation, *ibid.*; some points of living interest to the teacher of gynaecology and obstetrics, 1726; ruptured tubal pregnancy, *ibid.*

— Royal of Medicine in Ireland, Section of Pathology, president's address, 1580; suppurating kidney, *ibid.*; osteo-arthropathy, *ibid.*

— Royal of Medicine in Ireland, Section of State Medicine, the recent failure of hospital accommodation in Dublin, 18

— Section of Surgery, operation in intestinal obstruction, 1799; middle-ear disease, *ibid.*

Acarus, a new, 1675

Accidents, trade, registration of, 80; workmen's and social assurance, 284

Accommodation, Tscherning's theory of, 83

Acheson, Dr. G., empyema of pneumonia, 1058; haemophilia, 1230; on cholelithiasis, 1245

Acland, Dr. T. D., the Cullingworth fund, 373

Acne, relapsing, treatment of, 797

Acromegaly, case of with an analysis of 34 recorded examples, 1337; notes on a case of, 1636

Act, Infant Life Protection, prosecution under, 623; and the London County Council, 624

— Infant Life Protection (Victoria) and its administration, 170

— Infectious Disease (Notification), the working of the, 1034; duties of medical officers of health under, 1219, 1619, 1831

— Medical, prosecution under, 621

— the Poor-law Officers' Superannuation, and the Pembrokeshire Board of Guardians, 1867, 1878

— the Workmen's Compensation, Reviewed, 1377

Mr. M. Roberts-Jones, *rev.*, 1001; the effects of, 1811

Acts, the Inebriates, books for statistics as to, 1687

— the Medical, and unqualified practice, 105

— Public Health, details of history of, 1547

Adam, Dr. J., the necropsy of Byron's brain, 1888

Adams, Mr. P. T., the prevention of enteric fever, 1795

— Dr. R., presentation to, 876

Adamson, Dr. R. O., the signs and symptoms of perforated gastric ulcer, with notes of two cases in one of which operation was successful, 453

Adcock, Dr. H., the late Sir Joseph Tholozan, 1760

Addison's disease. *See Disease*

Address, presidential, at the combined meeting of the Cambria and Hunts, East Anglian, and South Midland Branches, by Professor Allbutt, 197; presidential, at the annual meeting of the Lancashire and Cheshire Branch, by Dr. S. Woodcock, 201; at the annual meeting of the Yorkshire Branch, by Dr. A. S. Myrtle, 205; presidential, at the annual meeting of the British Medical Association, by Dr. T. G. Roddick, 569; in Medicine at the annual meeting of the British Medical Association, by Dr. W. Osler, 576; in Surgery at the annual meeting of the British Medical Association, by Mr. W. Mitchell Banks, 581, 1030; at the opening of the Section of Pathology at Montreal, by Mr. W. Watson Cheyne, 586; at the opening of the Section of Obstetrics and Gynaecology at Montreal, by Dr. W. Japp Sinclair, 589; in Public Medicine at Montreal, by Dr. H. M. Biggs, 622; at the opening of the Section of Medicine at Montreal, by Dr. S. Mackenzie, 628; at the opening of the Section of Surgery at Montreal, by Mr. C. Heath, 641; at the opening of the Section of Psychology at Montreal, by Dr. R. M. Bucke, 643; on the work of Pasteur and the modern conception of medicine, by Professor C. Richef, 603; at the opening of the Section of Dermatology at Montreal, by Mr. M. Morris, 697; at the opening of the Section of Pharmacology and Therapeutics at Montreal, by Dr. D. J. Leech, 702; at the opening of the Section of Medicine at Montreal, by Dr. E. P. Lachapelle, 757

Adeney, Mr. W. E., gets honorary degree of D.Sc., 1285

Adirondack cottage sanitaria, 1190

Adult, colitis in the, 460

Advertisement of dissolution of partnership, 195

Advertisements, the sanitary aspects of, 834; disguised, Dr. Kix on, 1525; quack, 1547; of quackery and unqualified practice, 1835, 1887

Advertising dodges, 1603

Affleck, Dr. J. O., the phonendoscope, 1723

Agencies of assurance companies, 1770

Agra, enteric fever at, 1683

Agreements for partnership, 1540

Ainsley, Dr. T. G., case of gangrenous intussusception, enterectomy by Maunsell's method, recovery, 83

Air, expired, the supposed poisonous organic matter in, 64, 323; sewer, the negative action of in raising the toxicity of lowly virulent diphtheria bacilli, 1721; Food, and Exercises, Dr. A. Rabagliati, *rev.*, 1803

— embolism from wound of the femoral vein, 274

Aird, Mr. T. W., medical book-keeping, 259

Aix-la-Chapelle. *See Aachen*

Albene, 1188

Alcock, Sir R., illness of, 118; obituary notice of, 1377

Alcohol, cancer of the breast treated by injections of, 808, 1854; in asylums, 922; and the death-rate, 923, 1606, 1808

Alcoholism and the penal law in Europe and the United States, 484; in France, 1121

Aldershot, infectious diseases at, 666; the water supply of, 1383; new military hospital at, 1462; an abomination at, 1526; the charge of soldiers' wives and children at, 1539, 1681, 1765; civil practitioners at, 1617

Alderson, Mr. H., a case of cervical ribs, 1638

Alexander, Dr. F. W., on the disinfection of rooms, 1018

— Dr. R. R., relations of pelvic disease to insanity, 774

Alexis, the secrets of, 90

Algiers, proposed introduction of scientific medicine and midwifery in, 274

Alkaline soap spirit, prescription for, 195

Allan, Dr. T. S., depressing effects of sodium salicylate, 1771

Allbutt, Professor T. C., on the wants of Cambridge University, 165; on theory and practice, 197; A System of Medicine by Many Writers, *rev.*, 343, 1450

Allen, Dr. C. W., non-surgical treatment of boils, etc., 870; pathological pigmentation of skin, 876; the treatment of syphilis, 1315

— Dr. F. J., the cause of the first sound of the heart, 184; bitten by a mad dog, 236

— Dr. H., death of, 1763

Almanack, Dr. Beck's Therapeutical, Dr. Schill, *rev.*, 508

Almshouses, district medical officers and attendance on inmates of, 752

Alopecia areata, bacteriology of, 127

Althaus, Dr. J., elastic tracheal in the sputum, 53; The Value of Electrical Treatment, *rev.*, 475; music and the Harveian oration, 1373

Altitudes, High, Treatment by, Dr. P. Regnard, *rev.*, 655, 744

Alveolar process of superior maxilla, acute necrosis of in a baby two days after birth, 1259

Ambulance lectures, books for, 1307

Ambulances for hill warfare, 165

Amphill, the water diviner's fees at, 420

Amputation, spontaneous, of both lower extremities in a newborn infant, 1179

Amyl nitrite in apparent death from chloroform, 352

Anæmia, pernicious, changes in the spinal cord in, 325, 1801

Anæsthesia, partial, with chloroform, 271; the discovery of, 1017, 1124

Anæsthetics, deaths under, 92, 160, 351, 410, 676, 1193, 1350, 1591, 1707; the safe administration of, 94, 160, 351, 499, 684, 1374; an apparatus for administering, 347; the early use of in America, 1388; discussion on at Montreal, 1469; various, the relative efficiency of, 1522; unregistered dentists and, 1547

Anatomy and Developmental History, Recent Progress in, Drs. Merkel and R. Bonnet, *rev.*, 221; the teaching of, 878; morbid, the study of, 1246

Anderson, Mr. R. B., the case of, 42, 374; on medical defence, 249, 1427; the defence of civil rights, 374; the election or appointment of representatives of corporations on the General Medical Council, 1827

— Mr. W., John Arderne and his time, 1001

Andover, the Berthon hut at, 830

Andrewes, Dr. F. W., nose and lung from a case of glanders, 1720

Andrews, Mrs. G. F., The Living Substance as Such and as Organism, *rev.*, 1803

Aneurysm, cirrös, of the orbit, forehead, and scalp, 273; very large innominate, final report

of a case of, 387; of the aorta communicating with the pulmonary artery, 392; spontaneous, of the ulnar artery in the palm, excision of the aneurysm, recovery, 66; traumatic, of internal maxillary treated by ligation of common carotid, 955; dissecting aortic, 1426; aortic, intraperitoneal rupture of, 1504; of the abdominal aorta, 1579; traumatic of the ulnar artery in the palm cured by tying the ulnar artery above the wrist, 1637; popliteal, followed by herpes in the area of distribution of the musculo-cutaneous branch of the external popliteal nerve, 1719; aortic, death after a few days' illness, necropsy, *ib.*; popliteal, case in which the sac of refilled five years after ligation of the femoral artery, 1855. Ankylosis, double hip, cross-legged progression the results of, 1823.

Anandale, Professor T., practical suggestions in connection with the treatment of some deformities of the nose, 1625.

Anodyne syrup, the sale of, 940.

Anthrax at St. Denis, 841.

Antikamnia, 1771.

Antipyrin and laudanum, attempted poisoning by, 1000.

Antitoxin, diphtheria, and sanitary authorities, 830; the employment of for non-diphtherial diseases, 1030; value of, 1267; distribution of in London, 1621; the preparation of, 1000. *ib.*

Tetanus, traumatic tetanus treated by, 467, 907; a case of tetanus treated with, 652, 1572.

Antrum, empyema of in a child aged 8 weeks, 808, 1337; non-operative treatment of chronic disease of, 1563; of Highmore, empyema of the, 1577.

Anus, imperforate, operated on in infancy, sequel to a case of, 1420.

Aorta, aneurysm of communicating with the pulmonary artery, 392; abdominal, aneurysm of, 1579; disease of with unusual symptoms, 1721.

Aphasia, the clinical examination of cases of, 789.

Apocynum cannabinum, a diuretic plant, 1714.

Apotri, Dr. F. endovenous injections of iron and arsenic, 1611.

Apostoli, Dr. G., the general therapeutic action of the alternating high frequency current, 1717.

Apothecaries' Hall, Ireland, regulation of as to diplomas, 525; examiners at, 1620.

Society of London and its licensees, 56; pass lists, 191, 316, 622, 847, 1130, 1302, 1620, 1883; regulations of as to five years' curriculum, 518; information as to, 943; the rights and privileges of a licentiate (1874) of, 1033.

Apparatus for administering anaesthetics and other volatile vapours, 347.

Appeal, an, 627, 691.

Appendicitis (On), Dr. T. Legueu, *rev.*, 404; discussion on at Montreal, 945; the comparative frequency of as a complication of pus tubes, with some remarks on the technique of removing the appendix, 1071; and its Surgical Treatment, Dr. H. Mynter, *rev.*, 1723.

Appendix vermiciformis, intussusception of the, 956, 1505, 1770; perforation of the and peritonitis, operation, recovery, 1165.

Appointments, public, 56; bartering of, 383; public sale of, *ib.*; Poor-law medical, sale of, 1016.

Archaeologica Medica, 90, 173, 403, 669, 1191, 1349, 1590, 1749.

Archer, Mr. L., hospital abuse, 842.

Arderne, John, and his time, 1091.

Argentine Republic, rules for British practitioners in, 56; doctors in the, 589.

Arlidge, Dr. J. T., awarded civil list pension, 98; testimonial to, 1443, 1460, 1520, 1609, 1672, 1749, 1820.

Arm, molluscum fibrosum and fibro-lipoma of, 1800.

Armitage, Mrs. C. L., the will of, 1804.

Armstrong, Dr. G. E., on appendicitis, 945.

Dr. H. E., a new method of disposing of typhoid dejecta, 1440; a sanitary ashbin, 1538.

Dr. W., gastro-intestinal toxins, their clinical significance and therapeutic indications, 269.

Dr. W. B., case of chloroform poisoning, recovery, 135.

Army, British, promotions and appointments in medical staff of, 56, 118, 252, 315, 376, 435, 502, 620, 686, 749, 846, 939, 1033, 1128, 1217, 1301, 1380, 1401, 1538, 1617, 1687, 1705, 1830; travelling allowance in, 57; increase in pay in, 57, 846; pay of surgeon-lieutenant-colonels in, 118; the health of, 163, 621; severe strain on the medical service of, 232; Jubilee honours, neglect of the medical service of, *ib.*; venereal disease in, 233; the A. M. S. secretary to the principal medical officer of, 251; reduction of pay in, 315; successful candidates for medical staff of, 435; Jubilee honours, *ib.*; regulations of the medical service of, 557; the "Times of India" on the medical service of, 686; dress regulations in, 687; new rates of pay in, *ib.*; leave and the medical staff of, 750, 1402; the "Madras Mail" on the pay of the medical service of, 750; the Indian press on the medical service of, 847; research in the medical service of, 847, 1287, 1301, 1540; the nursing of sick soldiers in, 847; Medical Boards in, 939; difficulties of mobilisation in, *ib.*; Surgeon-Captain Birdwood on the medical service of, 1017; abolition of surgeon-generalates, 1033; pay of surgeon-generals, Madras and Bombay, 1034; medical mobilisation in, 1034; administration in, 1125; thoughts in, 1129; the health of soldiers and their families, 1301; a frontier camp, *ib.*; pressure on medical staff of, 1524; the new cantonment rules, 1539; enteric fever in, 1880.

Arnold and Sons, Messrs., consulting-room weighing machine, 259.

Arrangements, defective sanitary, 315.

Arrows, poisoned, 1623.

Arterio-sclerosis, the heart failure of, 1715.

58; promotions and appointments in the medical reserve of, 118, 252, 315, 376, 620, 749, 939, 1128, 1301, 1617; the examination for the medical service of, 232, 251, 252, 374, 359; mixed boards, 235, 256, 435, 621, 729, 847, 1129, 1462, 1539, 1618, 1830; an "old soldier" on the medical services of, 235; recall to service, 252; the medical staff of in Parliament, 297; an army medical boycott, 419; mixed boards contrary to army orders, 422; successful candidates for medical staff of, 435; the health of the, *ib.*; undermanning, *ib.*; the depiction of the medical service of, 478; supply of Roentgen ray apparatus to the medical service of, 478; the popularity of the medical service of, 480; regulations for admission to the medical service of, 556; the medical examination for candidates for the medical service of, 604; candidates for the medical service of and the schools, 621; employment of civil practitioners in the medical service of *ib.*; the medical examination of candidates for the medical staff of, 744; "open fearlessness of mind" for medical officers of, *ib.*; the medical reserve of and contract rates, 750; ticketing, 750, 1034; officers and gentlemen, 750; foreign service tours, *ib.*; revised regulations for the service of, 846; combined examinations for first commissions, 846, 925, 129; closure of leave to medical officers, *ib.*; the rank question, 847; a new warrant, 924, 1217; the future of the medical service of, 1014, 1124; employment of retired medical officers, 1034; Dr. M. F. Cox on the medical service of, 1099, 1201, 1540; our army departments, 1128; medical army discontent, *ib.*; military reviewers and army medical writers, 1129; the employment of the medical reserve of, 1129, 1381, 139, 1617, 1881; the Army Sanitary Committee, 1129; titles, *ib.*; "how to remedy the wrongs of army doctors, 1201; the Birmingham and Midland Counties Branch of the British Medical Association on the medical service of, 1212; the medical service of and public opinion, 1281, 1450, 1523, 1580, 1817; contractors superseded by private tender, 1300; the medical service in war; a weak link in the chain, 1301; rank and titles, 1301, 1381, 1682; the physique of the Medical Staff Corps, 1301; Sir William Thomson on the medical service of, 1332; rumoured new warrants for, 1443; Surgeon-Major-General Davis on army rank and the medical service of, 1445, 1454; regimental entertaining, 1402; physical standard for candidates for, 1517; civil practitioners for work in, 1525; the condition of the, 1539; honorary rank, 1540; revised regulations for the medical staff of, 1604; the Royal Colleges and the medical staff of, 1605; the medical service of as a speculation, 1615; the increase of the, 1741; the position of surgeons in, 1750; sanitary lectures for quartermasters, 1765; study leave, 1830; honorary rank, *ib.*; a "Royal" medical corps, 1865, 1881; the ignoring of regulations, 1881; the P. M. O. with the army in the field, *ib.*; conditions of service in the staff of, *ib.* Army, Indian, promotions and appointments in medical staff of, 57, 118, 252, 315, 435, 620, 686, 749, 846, 939, 1033, 1128, 1217, 1301, 1380, 1401, 1539, 1617, 1687, 1705, 1830; travelling allowance in, 57; increase in pay in, 57, 846; pay of surgeon-lieutenant-colonels in, 118; the health of, 163, 621; severe strain on the medical service of, 232; Jubilee honours, neglect of the medical service of, *ib.*; venereal disease in, 233; the A. M. S. secretary to the principal medical officer of, 251; reduction of pay in, 315; successful candidates for medical staff of, 435; Jubilee honours, *ib.*; regulations of the medical service of, 557; the "Times of India" on the medical service of, 686; dress regulations in, 687; new rates of pay in, *ib.*; leave and the medical staff of, 750, 1402; the "Madras Mail" on the pay of the medical service of, 750; the Indian press on the medical service of, 847; research in the medical service of, 847, 1287, 1301, 1540; the nursing of sick soldiers in, 847; Medical Boards in, 939; difficulties of mobilisation in, *ib.*; Surgeon-Captain Birdwood on the medical service of, 1017; abolition of surgeon-generalates, 1033; pay of surgeon-generals, Madras and Bombay, 1034; medical mobilisation in, 1034; administration in, 1125; thoughts in, 1129; the health of soldiers and their families, 1301; a frontier camp, *ib.*; pressure on medical staff of, 1524; the new cantonment rules, 1539; enteric fever in, 1880.

Arteritis and Sclerosis, Dr. A. Brault, *rev.*, 656. Artery, pulmonary, aneurysm of aorta communicating with, 392; ulnar in the palm, spontaneous aneurysm of, 646; ulnar, traumatic aneurysm of, in the palm cured by tying the artery above the wrist, 1637. Arthritis, rheumatoid, relation of to diseases of the nervous system, tuberculosis, and rheumatism, 1225; rheumatoid, affecting bones 5,500 years old, 1631. Ascites, fetal, case of, 82. Ashbin, a sanitary, 1271, 1538, 1650. Ashhurst, Dr., on traumatic aneurysm, 956. — Dr. J., jun., on cancer of the rectum, 1069. Ashmead, Dr. A. S., The Suppression and Prevention of Leprosy, *rev.*, 813. Askin, Dr. T. C., dietary preparations, 1623. Asparagus, asthma from, 1112. Aspergillosis in Man and Animals, Dr. Rénon, *rev.*, 22. Assessors medical, Mr. Justice Williams and, 421. Assistants, unqualified, the employment of, 55, 608; and legal fees, 123; unqualified in charge of practice, 443; and principals, 754; medical, 755, 851, 943, 1039; and their salaries, 939; qualified, notice to determine engagements, 1302; unqualified and "covering," 1659, 1678, 1754, 1764, 1825, 1877; the qualifications of, 1881. Association After-Care, annual report of, 1542. — American Medical, discussion at on the serum diagnosis of typhoid fever, 492. — Belfast Medical Students, opening meeting of, 1820. — British for the Advancement of Science, the meeting of at Toronto, 361, 480; address by Prof. Michael Foster at, 445; address by Sir W. Turner at, 450; papers etc., at 610, 672. — British Dental, annual meeting of, 343, 494. — British Laryngological, Rhinological, and Otological, meeting of, 342; list of officers of, 1036; laryngological and rhinological cases, 1508; president's address, *ib.*; otological cases, 16. ASSOCIATION, BRITISH MEDICAL, the meeting of at Montreal, 38, 49, 114, 175, 428; programme of annual meeting 43, 106, 178, 242, 288, 368, 424, 429; annual museum 45, 109, 182, 246, 271, 372, 428, 909; and medical defence, 47, 116, 176, 187, 240, 248, 260, 312, 1614, 1663, 1679, 1755, 1807, 1826; notice of extraordinary general meeting, 178, 241; the extraordinary and general meetings of, 234; extraordinary general meeting of, 301; annual general meeting, retirement of president, 303; presentations of the Association, gold medal, *ib.*; presentation of the Stewart and Middlemore prizes, 304; report of council, 305; expulsion of two members of the Association, *ib.*; report of the Parliamentary Bills Committee, *ib.*; Obstetric Nurses' Bill, *ib.*; reports, 306; Inebriates Legislation Committee, *ib.*; the amendment of the Medical Acts, *ib.*; the case of Mr. R. B. Anderson, *ib.*; pensions, *ib.*; by-laws, *ib.*; new representatives, *ib.*; annual meeting, 1898, *ib.*; representation of unattached members, 307; the Reference Committee, *ib.*; the Committee of Constitution, 308; list of authors and others who have presented books to the library of, 354; meeting of in Edinburgh, 1898, 355, 1667; members present at annual meeting, 303, 911; medical defence at the annual general meeting, 423; the Colonial Branches and the Council of the, 443; expulsion of members from, and its bearing on hospital reform, 498; opening of annual meeting at Montreal, 667; reports of the annual meeting of, 665; address in public medicine and annual dinner at Montreal, 670; dinner at the St. James's Club, 711; opening of the annual museum, *ib.*; the Canadian Medical Association, *ib.*; smoking concert, 712; the pathological museum, *ib.*; dinner to Lord Lister, *ib.*; adjourned general meeting, 713; invitation to Winnipeg, 714; president's address, *ib.*; the address in medicine, 715; honorary degrees, *ib.*; proceedings of Sections at Montreal, 717, 821; American opinion of the annual meeting of, 720; garden party at the Victoria Hospital, 816; Ladies' Reception Committee, *ib.*; lunch upon the mountain, *ib.*; international golf match, 817; convalescence at McGill University, *ib.*; the address in surgery, 817; the address in public medicine, *ib.*; election of honorary members, *ib.*; organisation of district nursing in the Dominion, 818; invitation from American Public Health Association, *ib.*; vote of thanks to the pre-i-

dent, *ib.*; annual dinner, *ib.*; guests and visitors present at the annual meeting, 914; votes of thanks, 1005; the offertory at the Montreal meeting, 1093; excursions, 1101; proposal for Ethical Section at annual meeting, 1614, 1678, 1755, 1829; and the Journal in 1897, 1661; officers and addresses at annual meeting in Edinburgh, 1674.

ASSOCIATION, BRITISH MEDICAL, Council, report of, 143; proceedings of, 240, 364, 365, 367; and the Colonial Branches, 443

Committee, report of, 156

Committee on the Control of Railway Servants' and Mariners' Eyesight, report of, 156

General Practitioners and Ethical Committee, report of, 156

Inebriates' Legislation Committee, report of, 154

Medical Charities Committee, report of subcommittee of, 155

Committee on the Mental and Physical Condition of Children, report of, 155

Parliamentary Bills Committee, memorandum of on the Public Health (Scotland) Bill, 104; report of, 147, 224; the Obstetric Nurses Bill approved by, 158; meeting of, 224; Public Health (Scotland) Bill, *ib.*; the Army Medical Service, *ib.*; the amendment of the Lunacy Acts, 225; amendment of the Oaths Act, *ib.*; superannuation of public vaccinators, *ib.*; the Food and Drugs Bill, *ib.*; the Pharmacy Acts, *ib.*; members of, 1278; election of chairman, 1279; vote of thanks to Mr. Ernest Hart, *ib.*; amendment of the Pharmacy Acts, *ib.*; reappointment of subcommittees, *ib.*; medical officers of workhouses and the certification of lunatics, *ib.*; Royal College of Surgeons, the Army Medical Service, *ib.*

Scientific Grants Committee, report of, 149

Therapeutics Committee, report of, 156

Aberdeen, Banff, and Kincardine Branch, confirmation of minutes, 113, 1212, 1751; new members, 113; representatives on Council of Association, *ib.*; Public Health (Scotland) Bill, *ib.*; dinner, 113, 1212; installation of new president, 1212; report of Council, *ib.*; balance-sheet, *ib.*; election of officers, *ib.*; summer meeting, *ib.*; demonstration by president, *ib.*; changes of address, *ib.*; surgery of ureter, 1751; spinal caries, 1752; localisation of needle in foot, *ib.*; votes of thanks, *ib.*

Adelaide and South Australia Branch, annual meeting, 1673, 1674; notices, *ib.*; report of Council, *ib.*; election of officers, *ib.*; Sir T. N. Fitzgerald, *ib.*; resolutions, *ib.*; president's address, 1674; vote of thanks, *ib.*

Bath and Bristol Branch, annual meeting, 112; installation of new president, *ib.*; report of council, *ib.*; financial statement, *ib.*; election of officers, *ib.*; votes of thanks, *ib.*; annual dinner, *ib.*; cases, 1371; communications, 1371, 1673; new members, 1673; Constitution Committee, *ib.*; congratulations to the president of the Branch, *ib.*

Bermuda Branch, delegate and papers for Montreal, 615; papers, *ib.*

Birmingham and Midland Counties Branch, annual meeting, 47; election of officers, *ib.*; ethical committee, *ib.*; president's address, *ib.*; dinner, *ib.*; the army medical service, 1212; large parotid tumour, *ib.*; renal calculi, *ib.*; papers, *ib.*; papilloma of ovary, 1509; myoma uteri removed by hysterectomy, *ib.*; communications, *ib.*; family chorea, 1722; lead poisoning, *ib.*; death from faecal impaction in a child, *ib.*; suppurative pylephlebitis, 1728; fibrosis of lung, *ib.*; macerated fetus from extrauterine gestation, *ib.*; abscess of ovary, *ib.*; calcified myoma, 1857; removal of uterus and appendages in a case of myoma, *ib.*; tubercle of Fallopian tubes and ovaries, *ib.*; wiring fragments in fracture, 1858; papers, *ib.*

Border Counties Branch, annual meeting, 112; confirmation of minutes, 113, 1531; resolution of condolence with Dr. Menzies, 113; report of council, *ib.*; new members, 113, 1531; election of officers, 113; delegate to Montreal meeting, *ib.*; future meetings, *ib.*; communications, 113, 1532; dinner, 114; medical aid associations, 1531; fees to medical witnesses, 1532; army medical reform, *ib.*

ASSOCIATION, BRITISH MEDICAL, British Guiana Branch, confirmation of minutes, 615; appointment of auditors, *ib.*; letter from Lord Lister, *ib.*; communications, 615, 1752; office bearers, 1752

Cambs and Hunts Branch, confirmation of minutes, 176; installation of new president, *ib.*; election of officers, *ib.*; new members, *ib.*; conjoint meeting with East Anglian and South Midland Branches, *ib.*; address by president, 176, 197; discussions, 176; demonstrations, *ib.*; luncheon, *ib.*; garden party, *ib.*

Cork and South of Ireland Branch, the formation of, 52

Dorset and West Hants Branch, election of officers, 1212; new members, *ib.*; next meeting, *ib.*; deceased members, *ib.*; grants, *ib.*; reinfection in scarlet fever, *ib.*; communications, *ib.*; proposed home for nurses at Dorchester, *ib.*; dinner, *ib.*

Dublin Branch, Sir George Duffey, 1531

Dundee and District Branch, Scottish parochial medical office, 1673; report of Constitution Committee, *ib.*; disciplinary powers of universities, *ib.*

East Anglian Branch, conjoint meeting of with Cambs and Hunts, and South Midland Branches, 176; confirmation of minutes, 840; medical aid societies, 840, 1119; luncheon, 840; communications, *ib.*; new members, 841; spring meeting, *ib.*; afternoon tea, *ib.*; report of the Constitution Committee of the Central Council, 1823; the Association and the General Medical Council election, 1824

Glasgow and West of Scotland Branch, delegates to Montreal, 113; the Public Health (Scotland) Bill, *ib.*; medical aid associations, *ib.*; dinner, *ib.*

Griqualand West Branch, general meetings of, 177, 239, 1369; election of officers, 239; confirmation of minutes, 239, 428, 1369; medical defence, 239; proposed maternity hospital at Kimberley, *ib.*; specimens, 240; communications, 428, 1369

Halifax, Nova Scotia, Branch, new members, 48; communications, *ib.*

Lancashire and Cheshire Branch, annual meeting of, 110; confirmation of minutes, *ib.*; votes of thanks to retiring president and vice-president, *ib.*; installation of new president, *ib.*; report of council, *ib.*; financial statement, 111; election of officers and council for 1897-98, *ib.*; representatives on the Council of the Association, *ib.*; representatives on the Parliamentary Bills Committee, *ib.*; ordinary members of Council, *ib.*; place of next annual meeting, *ib.*; auditors, *ib.*; votes of thanks, *ib.*; Midwifery Nurses Bill, 111, 1822; notices of motion, 111; communications, 111, 1823; exhibitions, 112; luncheon, 112, 1823; dinner, 112, 1823; the Association and the General Medical Council election, 1821; the case of Mr. R. B. Anderson, *ib.*; hospital reform, 1822; report of the Constitution Committee of the Central Council, *ib.*; venereal disease, 1823

Londonderry and North-West of Ireland Branch, bacteriological laboratories, 1456

Malaya Branch, election of officers, 743; paper, *ib.*

Metropolitan Counties Branch, East London and South Essex District, confirmation of minutes, 1610; communications, *ib.*; vote of thanks, *ib.*

Metropolitan Counties Branch, North London District, new members, 1531; abdominal operations, *ib.*; cases, *ib.*

Metropolitan Counties Branch, West London District, confirmation of minutes, 47; election of officers, *ib.*; vote of thanks, *ib.*

North of England Branch, communications, 1120; dinner, 1121

North of Ireland Branch, annual meeting, 495; confirmation of minutes, *ib.*; annual report, *ib.*; election of office bearers, *ib.*; Ethical Committee, *ib.*; Journalistic Committee, *ib.*; medical men and law courts, *ib.*; new by-law, *ib.*; attendance of members of council, *ib.*; communications, 495, 1456; new members, 495, 1456; annual dinner, 495; address to Mr. John Fagan, *ib.*; vote of thanks to retiring president, 1456; presidential address, *ib.*

ASSOCIATION, BRITISH MEDICAL, North Wales Branch, annual meeting, 307; new members, *ib.*; report of district council, *ib.*; election of officers, *ib.*; places of meeting, *ib.*; vote of sympathy with Dr. Grey-Edwards, *ib.*; special committee, *ib.*; Epsom College, *ib.*; delegates to annual meeting at Montreal, *ib.*; annual address, *ib.*; communications, *ib.*; annual dinner, 1752

Northern Counties of Scotland Branch, annual meeting, 47; confirmation of minutes, *ib.*; new members, *ib.*; installation of the new president, *ib.*; election of office-bearers, *ib.*; medical defence, *ib.*; Public Health (Scotland) Bill, *ib.*; next annual meeting, *ib.*; dinner, *ib.*

Oxford and District Branch, annual meeting, 176; installation of new president, *ib.*; confirmation of minutes, 176, 1610; new members, 176, 1610; report of council and treasurer's report, 176; election of officers, *ib.*; president's address, *ib.*; votes of thanks, *ib.*; visit to places of interest, *ib.*; registration of midwives, 1610; army medical reform, *ib.*; medical aid associations, *ib.*; purpura hemorrhagica, *ib.*; spinal meningitis, *ib.*; intussusception, *ib.*; chorea complicating pregnancy, *ib.*; cases, *ib.*

Pertshire Branch, confirmation of minutes, 47; the late Dr. R. W. Irvine, *ib.*; new member, *ib.*; annual meeting, 47, 1454; representative member, 47; Public Health Bill, *ib.*; election of officers, 1454; reports, *ib.*; the army medical staff, 1455; reports of delegates to Montreal meeting, *ib.*; correspondence, *ib.*; clinical meeting, *ib.*; inebriates legislation, *ib.*; sale of drugs and poisons, *ib.*; dinner, *ib.*

Reading and Upper Thames Branch, paper and discussion, 1752

Shropshire and Mid-Wales Branch, minutes, 367, 1370; new members, *ib.*; Branch representatives, *ib.*; Ethical Committee, *ib.*; rectal disease, *ib.*; eye pain and eye strain, 1340; the treatment of sciatica, *ib.*; puerperal septicæmia, *ib.*; examination of drinking water, *ib.*; cases and specimens, *ib.*; annual meeting, 1370; new president, *ib.*; report, *ib.*; election of officers, *ib.*; new members, *ib.*; Ethical Committee of Branch, *ib.*; vote of condolence, *ib.*; vote of thanks, *ib.*; dinner, *ib.*

Southern Branch, annual meeting, 176; election of officers, *ib.*; communications, 177; financial statement, *ib.*; installation of new president, *ib.*; visits and entertainments, *ib.*

South-Eastern Branch, Isle of Wight District, confirmation of minutes, 310, 1455; notice of motion, 310; the next annual meeting, *ib.*; officers of Branch, *ib.*; club use and abuse, *ib.*; communications, *ib.*; next meeting, 310, 1455; medical aid associations, 1455; registration of midwifery and other nurses, *ib.*; modification of rules, *ib.*; clubs, *ib.*; complications of typhoid fever, *ib.*; dinner, *ib.*

South-Eastern Branch, South-East Hants District, elections, 310; clinical cases, 311; pathological specimens, *ib.*; classification of diseases, *ib.*; skigrams, *ib.*; president's address, 1454; communications, *ib.*

South-Eastern Branch, South Wilts District, new members, 1824; proposed alteration of by-laws, *ib.*; communications, *ib.*

South-Eastern Branch, Winchester District, vote of thanks, 1370; new members, *ib.*; venereal disease in the army in India, *ib.*; communications, *ib.*; cases, 1371; General Medical Council, *ib.*

South-Eastern Branch, East Kent District, confirmation of minutes, 1121; chairman of next meeting, *ib.*; cholecystotomy for obstructive jaundice, *ib.*; the cure of lateral curvature, *ib.*; radical cure of hernia, *ib.*; chairman of the meeting in March 1898, 1824; medical officers to medical aid societies, *ib.*; a study of reflexes, *ib.*; continuous current water bed, *ib.*; cases, *ib.*

South-Eastern Branch, East Surrey District, minutes, 1455; next meeting, *ib.*; communications, *ib.*; dinner, *ib.*

South-Eastern Branch, East Sussex District, communications, 1028, 1752; medical aid associations, 1752

**ASSOCIATION, BRITISH MEDICAL**, South-Eastern Branch, West Sussex District, communications, 1531

South Indian Branch, annual meeting, 1371; confirmation of minutes, *ib.*; financial statement, *ib.*; election of officers, *ib.*; case, *ib.*; further communications on the transformation of crescents, *ib.*; Dr. Bahadurjee's resolution, *ib.*; communications, 1372; president's address, *ib.*

South Midland Branch, annual meeting of, 173; report of committee of management, *ib.*; honorary treasurer's report, *ib.*; honorary secretary's report, *ib.*; new members, 176, 1120; medical defence, 176; vaccination, *ib.*; autumnal meeting, *ib.*; election of officers, *ib.*; subscriptions, *ib.*; representative to Montreal meeting, *ib.*; vote of thanks, 176, 1120; conjoint meeting of with East Anglian and Cambs and Hunts Branches, 176; luncheon, 1120; confirmation of minutes, *ib.*; president's address, *ib.*; proposal as to annual dinner, *ib.*; medical ethics, *ib.*; medical aid associations, *ib.*; communications, *ib.*; the Montreal meeting, *ib.*

South Wales and Monmouthshire Branch, annual meeting, 112; vote of thanks to retiring president, *ib.*; report of council and financial statement, *ib.*; autumn and spring meetings, 113; election of officers, *ib.*; president's address, *ib.*; publication of papers and reports, *ib.*; new members, 113, 1752; dinner, 113; communications, 1027, 1752; inebriates legislation, *ib.*; venereal disease among British troops in India, *ib.*

Staffordshire Branch, annual meeting, 1370; introduction of new president, *ib.*; new members, *ib.*; presidential address, *ib.*; reports of financial statement, *ib.*; next annual meeting, *ib.*; election of officers, *ib.*; confirmation of minutes, 1751; correspondence, *ib.*; Constitution Committee, *ib.*; army medical reform, *ib.*; exhibits, *ib.*; papers, *ib.*

Stirling, Kinross, and Clackmannan Branch, annual meeting, 46; confirmation of minutes, 46, 1370; honorary treasurer's report, 46; report of council, *ib.*; election of office-bearers, *ib.*; votes of thanks, *ib.*; Branch meetings, *ib.*; donations to British Medical Benevolent Fund, *ib.*; delegate to Montreal meeting, *ib.*; Public Health (Scotland) Bill, *ib.*; president's address, 47; annual dinner, *ib.*; new members, 1370; cases, *ib.*; army medical reform, *ib.*; friendly societies, *ib.*; East Anglian Branch, *ib.*; meeting of the Association in Edinburgh in 1888, *ib.*

Sydney and New South Wales Branch, confirmation of minutes, 47, 743, 1674, 1752; remarks by president, 47; new members, 48, 743, 1674, 1752; communications, 48, 743, 1752; the late Dr. E. M. G. Eddy, 743; resolution, *ib.*; the treatment of poor consumptive patients, *ib.*; letters, 1674; case, *ib.*; consumptive hospital, *ib.*; the new Medical Bill, *ib.*; papers, *ib.*

West Somerset Branch, annual meeting, 177; vote of thanks to past president, *ib.*; absence of the honorary secretary, *ib.*; confirmation of minutes, 177, 1370; report of council, 177; treasurer's accounts, *ib.*; election of officers, *ib.*; president-elect and next annual meeting, *ib.*; intermediate meetings, *ib.*; medical aid associations, *ib.*; president's address, *ib.*; vote of thanks, *ib.*; luncheon and excursions, *ib.*; new members, 1370; office of honorary secretary and treasurer, *ib.*; election of members of council, *ib.*; army medical reform, *ib.*; discussion, *ib.*; communication, *ib.*; dinner, *ib.*

Worcestershire and Herefordshire Branch, venereal disease in the army, 1295; medical aid associations, *ib.*; new members, *ib.*

Yorkshire Branch, medical aid societies, 1359; new members, *ib.*; communications, *ib.*; dinner, 1370

Association of British Postal Medical Officers, annual meeting of, 32

Brussels Medical Graduates' annual meeting of, 257

Bucklebury Diamond Jubilee Nursing, prospectus of, 177

Canadian Medical, annual meeting of, 711

District Nursing and the medical profession, 1865

Cork Medical and Surgical, opening of session of, 1464

Durham University Medical Graduates', annual meeting of, 192

Association, Eastbourne Provident Medical, annual report of, 1452

Fifeshire Medical, annual meeting and list of officers, 941

Forfarshire Medical, meeting of, 1093, 1511

French for the Advancement of Science, congress of, 431

of German Scientists, the coming annual meeting of, 476

Hospital Reform, the meeting of at Bristol, 124; annual dinner of, 283; and the College of Physicians, 356, 374, 497; donations to, 626; the coming meeting of, 680, 1115; meeting of at St. Martin's Hall, 1272; meeting of at Brighton, 1439; meeting of at Liverpool, 1534, 1508

Howard, annual report of, 1288

Incorporated Medical Practitioners' and Mr. G. Jackson's candidature for the General Medical Council, 740; and Sir Walter Foster's candidature for the General Medical Council, 932, 933

Irish Medical Schools' and Graduates' autumn dinner of, 1384

Irish Workhouse Reform, the *Pall Mall Gazette* on, 419

Manchester Medico-Ethical, meeting of, 1427; jubilee dinner of, 1865

Medico-Psychological of Great Britain and Ireland, the discussion of medical retinence at, 335, 403; annual meeting, 403; the insane in India, *ib.*; tuberculosis in the insane, *ib.*; some mental aspects of music, *ib.*; histology and pathology of the neuroglia, *ib.*; histological notes, *ib.*; the nursing examination of, 498, 606, 616, 745, 844

National, of Master Plumbers, annual dinner of, 236

National for Promoting the Welfare of the Feeble-minded, appeal for funds for, 1884

National for Supplying Female Medical Aid to the Women of India, annual report of, 504

New Medical Defence, Limited, meeting of directors of, 848

for the Oral Instruction of the Deaf and Dumb, annual meeting of, 26

of Registered Medical Women, meeting of, 230, 1428

Royal British Nurses, demonstration in invalid and convalescent cookery, 1384

St. Andrews' Graduates, annual meeting of, 380

St. John Ambulance, annual report of, 192

Sanitary, of Scotland, annual congress of, 589

Town and Gown of Edinburgh, annual report of, 360

United Kingdom Police Surgeons', annual meeting of, 492

Volunteer Medical, competition for challenge shield of, 315; instruction for proficiency certificate of, 1462

Workhouse Infirmary Nursing, proposed winding up of, 1604, 1739

Associations, medical aid, and the profession, 31; and the daily press, 1206; and the British Medical Association, 1679, 1745

Asthma from asparagus, 1112

Asylum for paying patient (lunatic), 1687

Claybury, distribution of nursing certificates at, 600; the pathological laboratory at, 849

Darent, the superintendence of, 1867

Earlswood, for Idiots, annual report of, 166

Eastern Counties for Idiots and Imbeciles, Colchester, annual meeting of, 61

Glasgow, District, Gartloch, description of, 61

Grahamstown, South Africa, annual report of, 1463

Richmond, Dublin, beri-beri at, 168, 233, 292, 358, 419, 423, 1270, 1585; annual report of, 1866

Royal Albert, Lancaster, annual meeting of, 1463

Royal, Morningside, instruction at, 543

West Riding, Wakefield, alleged blinding at, 844, 938

Wotton the outbreak of small-pox at, 673

Asylums, imbecile, 195; of the London County Council, 381, 1118; private, on their trial, 604, 680; alleged blundering of officials of, 844, 938; alcohol in, 922

Axatia, Friedreich's, with notes of 3 cases, 896

Atherton, Dr. A. B., case of strangulation of a loop of ileum through a hole in the mesentery with Meckel's diverticulum attached, 975

Athletes, are they healthy? 730

Athletics, the use and abuse of, 1834

Athlone, nursing in the workhouse infirmary of, 440

Atkinson, Dr. A., ichthyl and glycerine suppositories, 1307

Dr. G. A., the treatment of insomnia, 866; on diuretics, 1709

Dr. J. M., Prevalence of Bubonic Plague in the Colony of Hong Kong during the Years 1895 and 1896, *rev.*, 345

Atlas of Clinical Medicine, Dr. B. Bramwell, *rev.*, 404; Pictorial of Skin Diseases, etc., Dr. J. J. Pringle, *rev.*, 475; of the Normal and Pathological Nervous Systems, Dr. C. Jakob, *rev.*, 908; and Essentials of Gynaecology, Dr. O. Schaeffer, *rev.*, 1186; der gericht lichen Medizinen, Dr. E. R. V. Hofmann, *rev.*, 1187; der Syphilis and Syphilisähnlichen Hautkrankheiten, Dr. M. Chotzen, *rev.*, 1345

Atony of the rectum, 1467

Attendance, on professional brethren, 442; on the families of medical men, 1887

Attfield, Professor J., presentation to, 168

Augustus Caesar an invalid, 1868

Auricle, malformation of, 1578

Austin, Dr. J. J., private obstetric practice, 1858

Australasia, rules for British practitioners in, 560

Austria, rules for British practitioners in, 560

Auvray, Dr. M., Les Tumeurs Cérébrales, *rev.*, 1001

Aveling, Dr. C. T., a disclaimer, 626

Axilla, primary circinous carcinoma in the, 150

Aylesbury, the water supply of, 1453

Aymard's sterilising apparatus and the War Office, 1132

**B.**

Baby, newborn, menstruation in, 756; acute necrosis of alveolar process of superior maxilla in a, two days after birth, 1259; Our, for Mothers and Nurses, Mrs. L. Hewer, *rev.*, 1271

Bacilli, lowly virulent diphtheria, the negative action of sewer air in raising the toxicity of, 1721; typhoid, the vitality of, 1744; typhoid and coli, differentiation of, 1778

Bacillus, aërogenes capsulatus, cases of infection by, 1844

colon, pleomorphism of the, 1721

ictericus, a description of, 7, 96

Klebs-Loeffler, the action of Behring's serum in diseases not due to, 1709

of typhoid and cold weather, 1453

Bacon, Dr. G., operations on the mastoid, 1556

Bacteria of the Sputa and Cryptogamic Flora of the Mouth, Dr. F. Vicent, *rev.*, 87; the structure of, 16; the relation of to catarrhal conditions, 1762; relations between activity of in the intestine and indican in the urine, 1847

Bacteriology of alopecia areata, 127; and anti-toxic serum, 383; chemical, 484; in India, 54

Bad Gastein nach den neuesten Hilfssquellen, Dr. C. Gager, *rev.*, 474

Baden (Switzerland) as a health resort, 407

Bag, a cycle midwifery, 223

carrier for bicycle, 1271

Bahadurjee, Dr., presentation to, 1854

Bain, Dr. W., a case of haemorrhage, 455

Bakehouses of London, 504

Ball, Mr. C. B., on appendicitis, 948; trans-sacral excision of the rectum, 1066

"Ballantine" instantaneous water heater, 1271

Ballinasloe, the guardians of and pauper nursing, 1602

Banana, 223

Banbridge, alleged neglect of infant in the workhouse at, 1238

Bancroft, Sir S., proposed readings by, in Canada, 1544

Bandaging, Elementary and Surgical Dressing for the use of Dressers and Nurses, Mr. W. Pye, *rev.*, 1343

Bands of Hope, the founder of, 499

Banff, in the Canadian Rocky Mountains Park, as a health resort, 1438

Bankruptcy, proceedings in, 1130

Banks, Mr. W. M., rectal disease, 367; the surgeon of old in war, 58; the clamp and cautery operation for haemorrhoids, 1578

Bar, English, admission to, 323; the English, medical men and, 612, 943

Barbados as a health resort, 611

Barber, Mr. E., death of, 686

Barber-Surgeons, the hall of and the great fire 1603

Barbour, Dr. A. H. F., Manual of Gynaecology, *rev.*, 1904; Leopold's account of the origin of the placenta, 1857

Bark, Mr. J., thyrotomy for epithelioma of the larynx, 1577

Barker, Mr. A. E. J., a case of head injury

followed by complications affecting the cranial nerves, 40; angular deformity of the spine treated by immediate reduction, 1644; fifteen consecutive cases of intussusception, 1796

Barker, Dr. L. F., on certain changes in the cells of the ventral horns and of the nucleus dorsalis (Clarkii) in epidemic cerebro-spinal meningitis, 1839

Barling, Mr. H. G., death from faecal impaction in a child, 1727

Barnard, Mr. H. L., a simple and accurate form of sphygmometer or arterial pressure gauge contrived for clinical use, 904; chloroform and the heart, 1496

Barnato Brothers, charitable donations by, 1245

Barnes, Dr. H., the treatment of insomnia, 863

Barnett, Rev. Canon S. A., holiday homes for town children, 51

Barr, Dr. J., the Midwives Bill opposition, Dr. Rentoul and his £50, 51; on diuretics, 1697

— Dr. J. B., death of, 1217; proposed memorial to, 1740

— Dr. T., a case of malignant tumour of the brain, originating in the middle ear; symptoms simulating temporo-sphenoidal abscess; opening of mastoid antrum and cranium; partial removal of tumour: cessation of respiration under chloroform: tracheotomy: death two and a half months after operation, 1082

Barracks, Raglan, Devonport, sanitary state of, 829, 924

— Richmond, Dublin, enteric fever in, 847

Barracough, Mr. H., the nursing examination of the Medico-Psychological Association of Great Britain and Ireland, 745

Barrie, Dr. J., the administration of chloroform in private practice, 843

Barry, Dr. F. W., obituary notice of, 1127

Barry, proposed municipal hospital for, 1865

Bartering appointments, 383

Barwell, Mr. R., certain points in the causation and treatment of spinal curvature, 132, 335, 498; angular deformity of the spine treated by immediate reduction, 1644

Barwise, Dr. S., on county boundaries, 1447; cubic space in cowsheds, 1619

Bateman, Dr. A. G., on Mr. Horsley's candidature for the General Medical Council, 839; Sir W. Foster and the "Young Man," 1021, 1106

Bates, Dr. N. S., appointed Surgeon-General United States Navy, 1544; death of, 1764

Bath, the baths of, 1207; nursing, etc., at the workhouse infirmary of, 1588

Bathing in drinking water, 603

Baths of Bath, 1207; hot acid in scarlet fever, 1435; hot rigidity of the os uteri treated by, 1639

Battey, Dr. R. D., recurrent membranous conjunctivitis, 1799

Battle, Mr. W. H., multiple consolidated dislocations, 1293

Baumber, Dr. C., Der chronisch Gelenk-rheumatismus und seine Behandlung, rev., 813

Baumgarten, Dr. G., on cholectasis, 1244

Bays, Dr. J. T., dislocation of the inguinal phalanx, 1639

Bazin, Dr. A. T., the preparation of diphtheria antitoxin, 1711

Beale, Dr. E. C., creasote in consumption, 1266

— Dr. G. B., sea sickness, 628

Beamish, Mr. B., traumatic tetanus treated with antitoxin, recovery, 997

Beaney Institute. *See* Canterbury

Beard, Dr. R. O., studies in the metabolism of the body fluids, 1401

Beatson, Dr. G. T., extirpation of the ovaries as a cure for cancer, 54

Beaumont, Mr. W., cirsoid aneurysm of the orbit, forehead, and scalp, 273; continental and British vision tests for railway servants, 1085

Bed, continuous current water, 1824

Bedpan, a cleansable, 348

Beef, fluid, 909

Beer, novel adulteration of, 621

Belfast, opening of new hospital for consumption at, 1357; typhoid fever at, 1363

Belgium, rules for British practitioners in, 560

"Belgravia," the editor of on our wasted hospitals, 667

Bell, Dr. J., the operative treatment of high cancer of the rectum, 1064

— Dr. R., the mechanism of death under chloroform, 1750

Bengal, North-East, endemic goitre in, 650; new zenana hospital for, 1683

Benin, the wounded in the expedition to, 359

Benzoin, compound tincture of in enteric fever, 1572

Bequests, 42, 168, 321, 328, 724, 751, 753, 812, 834, 871, 903, 1204, 1362, 1684, 1804

Berdoe, Dr. E., on "experiments on lunatics," 728, 842, 1373

Beri-beri at the Richmond Asylum, 168, 233, 292, 358, 419, 423, 1270, 1585; can it be caused by food supplies from countries where it is endemic? 390, 415; the etiology of, 500, 680; a "place" not a food disease, 747, 843; and the Seamen's Hospital register, 1224; and food, 1459

Berkley, Dr. H. J., experiments on lunatics, 728, 1297

Berlin, correspondence from, 48, 114, 183, 247, 373, 841, 937, 1028, 1122, 1213, 1296, 1372, 1457; the Congress of International Medicine, 48; Vaccination and tuberculosis, 49; a conference on leprosy, 149, 247; general news, 49, 183, 247, 1028; Professor Roentgen on the rays, 2, 114; aseptic gloves for operators, 16; the sanitary government of, 16; the new tuberculin, 183; State Institute of Actinography, 16; Professor Koch in East Africa, 16; medical practitioners in the German empire, 16; ambulance service in, 16; the housing of the pathological specimens of the Berlin University, 247; women as apothecaries, 373; Prussian State medical officers' meeting, 16; hospital organisation in, 16; medical congresses, 841; German Red Cross societies, 16; the Berlin police and the "Volta cross," 842; formation of a Berlin Ambulance Society, 842, 937; sanatoria for tuberculosis, 16; the Congress of German Scientists and Physicians, 937; proposed deep-sea exploration expedition, 938; new hospital for, 16; medical courts of honour, 1028, 1296; new sanatoria, 1028; the new municipal slaughterhouses, 16; meeting of the Leprosy Conference, 1122, 1213; jubilee of the Bethanien Hospital, 16; sanatorium for dipsomaniacs, 1296; war ambulance classes, 16; the University Chemical Institute, 16; a question of priority, 1372; ophthalmia among school children, 16; models of leprosy, 16; prize essay, 16; Professor Virchow's jubilee as a university teacher, 1457; new pathological museum for, 16; overcrowding in hospitals, 16; quackery, 16

Berlioz, Dr., the general therapeutic action of the alternating high frequency current, 1717

Bermuda, as a winter resort, 1233

Berry, Mr. J., nose and lung from a case of glanders, 1720; The Statistical Tables of the Patients under Treatment at St. Bartholomew's Hospital during 1866, rev., 1862

— Mr. R. J. A., The Caecal Folds and Fossa and the Topographical Anatomy of the Vermiform Appendix, rev., 1734

— Mr. W., general tuberculosis, 1125

Bethnal Green, reported cholera in, 626

Beyts, Surgeon-Captain C. W., gallant conduct of, 1830

Bezold, Dr. F., Ueber die funktionelle Prüfung des menschlichen Gehörgangs, rev., 597

Bickerton, Mr. T. H., spontaneous dislocation of the lens into the anterior chamber, 83; dislocation of lens, couching, recovery, 1265

Bicycles, running, the slipping of, 1223; bag carrier for, 1271

Biden, Mr. J., poisoning from canned foods, 938

Biggs, Dr. H. M., preventive medicine in the City of New York, 629

Bile of serpents and other animals, the anti-venomous properties of, 125, 251, 595

— ducts, the surgery of the, 1315

Bilharzia, hatching ova of, 1338

Bill, proposed, concerning neglected children, 164

— Infant Life Protection, passes both Houses, 297

— Draft for the Registration of Midwifery, Medical, and Surgical Nurses, 117

— Lunacy Act Amendment, Dr. M. Craig on, 184; proposed new clause for, 217

— Midwives, opposition to, and Dr. Rentoul, 51, 187, 251

— Obstetric Nurses', prepared by Parliamentary Bills Committee, text of, 158, 250; Dr. E. J. Gilleran on, 324; Dr. G. H. Broadbent on, 358

— Public Health (Scotland), resolution of the Glasgow Eastern Medical Society as to, 30; resolutions of Branches of British Medical Association as to, 47, 48; memorandum of Parliamentary Bills Committee on, 104; opposition to clause as to equality of medical officer and sanitary inspectors in, 105, 234, 293; passes both Houses, 355

— proposed, to amend the Sale of Food and Drugs Acts, 358

— the University of London, 1897, summary of clauses of, 282, 1746; leading article on, 295; withdrawal of, 358

Bill, Workmen's Compensation, leading article on, 229

Billroth, Professor, memorial to, 1544

Biographies, illustrated, 1880

Biology and medicine, 1448

Birdwood, Surgeon-Captain, on the Indian Medical Service, 1017

Birkenhead, the coronership of, 1457

Birmingham, correspondence from, 51, 115, 1534; the diagnosis and treatment of diphtheria in, 51, 504; opening of New General Hospital at by H. R. H. Princess Christian, 115; commencement of work at New General Hospital at 1201; precautions against contamination of the water supply, 1534; annual students' dinner, 16; a new lunatic asylum, 16

Birthplace in relation to public vaccination, 440

Bishop Jayne on Sunday recreation, 1661, 1879

— of London, on the teaching of the physiology of the sexual function to boys, 1742

Bishop, Mr. E. S., cases of abdominal surgery, 99

Bismuth oxychloride, 1272

Blackmailing, alleged, 1764

Blackpool, alleged poisoning by shell fish at, 1602

Bladder, hernia of the, 54; foreign body in the, 136, 706; stone in the and operations for its removal, 329; woman's, four pieces of uric removed from, 342; partial resection of for ulcer caused by the distome haematurium, 964; double, 1181; obscure cystic tumour of the containing two calculi, 1421; villous tumour of the, 1508; injury to the after operation for inguinal hernia, 1796

Blake, Dr. C. J., operations on the mastoid, 1553, 1556; the nose and sexual apparatus of man, 1503

— Dr. J. F., cellular clothing, 944; treatment of hyperemesis gravidarum, 1375

Blaney, Mr. T., The Experience and Lessons of the Bombay Plague, rev., 1003

Bliss, Dr. F. H., obituary notice of, 375

Block, Dr. E. B., technique in serum diagnosis, 1777

Blood, A Guide to the Clinical Examination of the for Diagnostic Purposes, Dr. R. C. Cabot, rev., 85; human, the specific heat of, 1072; malarial, peculiar pigmented cells found in two mosquitoes fed on, 1786

— poisoning, case of, 1087

— pressure, effects of choline and neurine on, 672

Blushing, localised, on eating, 1263

Blyth, sewage-contaminated mussel beds at, 478

Board, proposed Central Hospital, 1739, 1813

— Local Government, on ophthalmia neonatorum, 120; report of on the preparation and storage of glycerinated calf lymph, 488; on pauper nursing, 493; letter from on the use of calf lymph, 502; and the Sutton schools, 925; annual report of the, 1107, 1348; the annual report of the medical officer of the, 1299, 1873

— Metropolitan Asylums, report of Statistical Committee of for 1866, 42; opening of New Park Hospital, 167; the growth of the, 260; instruction at the hospitals of, 54; the hospitals of, Mr. A. W. Blyth on, 623; new offices for, 724; the allocation of beds for infectious cases in the hospitals of, 1202; and the distribution of diphtheria antitoxic serum, 1621; the children of, 1621, 1743; form of returns of patients, 1743

Boarding out, report to BRITISH MEDICAL JOURNAL on, 674

Boards, school, and medical officers, 63; and public health authorities, co-operation between, 1766

— hospital, representation of the medical staff on, 1866

Bodington, Dr. G. F., travel in Canada, 250

Body, the means by which the temperature of is maintained in health and disease, 11

— fluids, studies in the metabolism of the, 1402

Bognor, laying foundation stone of convalescent home at, 1358

Boils, the non-surgical treatment of, 868

Bombay, the reorganisation of the health department at, 166; the plague in, 228, 246, 940, 1818; high mortality at, 479; the origin of the plague in, 504; reported outbreak of cholera in, 729; sequelae of plague in, 824; The Experience and Lessons of the Plague at, Mr. T. Blaney, rev., 1003; sanitation in, 1013; special plague officers for, 1301; the early history of the plague in, 1304

Bond, the usual, 436

Bond, Dr. F. T., compulsory vaccination, 833; the vaccination problem, 1215, 1827

Bonds or contracts not to practise, 1881

Bone, temporal, phosphorus, necrosis of the, 1557; sarcoma of, 1800  
grafting from the dog, 1875

Bones 5,500 years old, rheumatoid arthritis affecting, 1631; the correction of certain deformities by operative measures upon, 1680

Bonnet, Dr. R., *Ergebnisse der Anatomie und Entwickelungsgeschichte*, rev., 221

Book debts in the purchase of a practice, 688, 943

Bookkeeping, medical, 259

Books, old, value of, 442; various replies as to, 943; for the wounded in India, 1804

Booth, Dr. J., death of, 160  
Mr. R. J. a case of punctured wound of chest, wall penetrating the sternum and wounding heart, 469  
Dr. T. C., alcohol injections in cancer, 1854

Bootle, infantile diarrhoea in, 938

Boston, the water supply of, 1453

Bosworth, Dr. F. H., *A Textbook of Diseases of the Nose and Throat*, rev., 473

Bottini, Dr. E., *La Chirurgia del Collo*, rev., 278

Bougies and catheters, reversible, 1432

Boundaries, county, 1447

Bourne, Rev. W. St. H., *Hospital Sunday Fund and surgical appliances*, 260

Bousfield, Mr. E. C., the choice of a candidate for the General Medical Council, 932

Bovril stannoids, 279

Bowditch, Professor H. P., rhythmical contraction of smooth muscle fibres, 610

Bowels, loaded, and melancholia, 1500

Bowes, Dr. T. A., a case of acute pulmonary gangrene, 463

Boy, hysterical contraction of the knee-joint in a, 135

Boyce, Professor R., on the prevention of enteric fever, 1575

Boyd, Dr. M. A., the signification of dilatation or gastrectasia in functional and organic diseases of the stomach, 263, 601  
Mr. S., oophorectomy in the treatment of cancer, 890  
Mr. W., seven consecutive cases of hepatic abscess treated by incision, 470; notes of six cases of hysterectomy, 1261

Boyle, Miss A. H., treatment of painful chronic ulcer, 943

Boys, and the knowledge of the physiology of the sexual functions, 1742

Boyton, Dr. E. T. A., treatment of ringworm of the scalp, 507

Brabyn, Mr. G. W., wandering oedema, 944

Bradbury, Dr. J. B., two cases of obstruction of the small intestine by gall stones, 796

Bradford, Dr. E. R., observations made upon dogs to determine whether obstruction of the ureter would cause atrophy of the kidney, 1720

Bradycardia, with rapid remission and fatal recurrence, 1252

Brailey, Dr. W. A., perforating wound of eyeball, 1799

Brain, tumours of and their removal, 1047; malignant tumour of the originating in the middle ear, 1082; a new method of localising lesions of the, 1208

Braithwaite, Dr. J., a case of Caesarean section, 217

Braunwell, Dr. B., on chyluria, 261; *Atlas of Clinical Medicine*, rev., 404; elected honorary member of the Société des Médecins Russes de St. Pétersbourg, 642; the clinical examination of cases of aphasia, 789; teaching and learning medicine, 1626  
Dr. H., remarks on Friedreich's ataxia with notes of three cases, 896; salol in typhoid fever, 1214

Branch, Dr. W. J., needle holder, 1735

Brand, Dr. A. T., medical witness at inquest, 1618

Brandes, Dr. B., a case of non-typical syphilis (syphilis gravis) cured by the Aachen specific method combined with surgical treatment, 332

Brant, Dr. G. H., notes on health resorts, 91; *Royal Medical Guide*, rev., 657  
Dr. J. E., *Royal Medical Guide*, rev., 657

Brault, Dr. A., *Les Arterites et les Scleroses*, rev., 656

Brazil, rules for British practitioners in, 561

Bread, Homo, 141; wholemeal, 142; public waste of, 418; of the Soldier. Investigations on Drs. Plagge and Lebbin, rev., 1513; nutritious, 1532

Breast, cancer of, treated by injection of alcohol, 808, 1854; use of splint in the treatment of cancer of the, 1547; tumour of, 1857  
shield and nipple protector, 1735

Breath, phosphorescent odour of the, 626

Breathing, bronchial and rales, 65; bronchial and vesicular, 1418; bronchial, 1537

Brent, special report on the condition of, 490; the condition of the, 617, 916, 1282, 1367

Brierley, Dr. J. B., expulsion of members from the B.M.A., and its bearing on hospital reform, 498

Briggs, Mr. H., the diagnosis of cancer, of the uterus in its early stages, 1266

Brighton as a health resort, verses on, 444; appointment of dentist by the Board of Guardians, of, 1286; meeting of Hospital Reform Association at, 1439; sunshine at, 1770

Brisley, Kettle v., 1682

Brisley, Mr. C. W., coto in diarrhoea, alone or combined with creosote and bismuth, 1039

Bristol, correspondence from, 50, 842, 1124, 1534, 1825; memorial to the late Mr. Greig Smith, 50, 842; the pollution of the Avon, 50; the health of Bristol, ib.; ambulance prizes, 51; proposed convalescent home, 842, 1534; the sewage question, 1124; St. John Ambulance Association, ib.; the Royal Infirmary, ib.; typhoid fever at, 1363, 1453, 1530, 1825; extension of the lunatic asylum, 1534; the recent typhoid epidemic at, recognition of the services of Dr. Davies and Dr. Heaven, 1825

Britain, Early, Life in, Dr. B. C. A. Windle, rev., 474

"Britannia," cholera on board the, 624

British Columbia, registration in, 560, 845; practice in, 1887

"Broad Arrow," the, on the physique of the medical staff corps, 1301

Broadbent, Dr. G. H., on the Obstetric Nurses Bill, 358; and Mr. V. Horsley's candidature for the General Medical Council, 837, 931; an Ethical Section at the Edinburgh meeting, 1678, 1829  
Dr. J. F. H., Heart Disease, with Special Reference to Prognosis and Treatment, rev., 1268  
Dr. W., perforated gastric ulcer, 1254  
Sir W. H., Heart Disease, with Special Reference to Prognosis and Treatment, rev., 1268

Bromide poisoning, morphine habit of long-standing cured by, 76

Bromsgrove, increase of salary to medical officer of workhouse at, 1543

Bronchus, pipe stem impacted in for over three months, 899

Bronner, Dr. A., abscess of the temporo-sphenoidal lobe opened and drained through the osseous auditory meatus, 465

Brookhouse, Dr. J. O., the treatment of insomnia, 865

Brooks, Dr., on William Harvey as an embryologist, 1289

Brouardel, Dr. P., Death and Sudden Death, rev., 405; *La Pendaison, la Strangulation, la Suffocation, la Submersion*, rev., 1344

Brown, Dr. A. M., Molière and his Medical Associates: Glimpses of the Court and Stage; the Faculties and Physicians of the Grand Siècle, rev., 139  
Mr. H., Economics, Anæsthetics and Antiseptics in the Practice of Midwifery, rev., 1803  
Dr. J., closet accommodation for factories, 1135  
Dr. P., chronic arytenoid laryngitis, 1556, 1557  
Dr. W. C., wandering oedema, 803

Browne, Mr. H. L., traumatic aneurysm of internal maxillary treated by ligature of the common carotid, 955  
John, information as to, 624  
Mr. J. A., Mr. Adrian Hope's challenge, 1595  
Sir J. C., ethics and individualism in medicine, 990; on Thomas Carlyle, 1606  
Mr. L., an improved oesophageal probe, 1004; the employment of diphtheria antitoxin for non-diphtherial diseases, 1030; on turbinotomy, 1392; the relation of nasal disease to pulmonary tuberculosis, 1395; on laryngeal paralysis, 1396; the nose and the sexual apparatus of man, 1563

Brownless, Dr. A. C., obituary notice of, 1763

Bruce, D. W., and the Committee of Corporate and Medical Reform, 1211

Bruns, Dr. L., *Die Geschwülste des Nervensystems*, rev., 1002

Bruntton, Dr. T. L., Lectures on the Action of Medicines, rev., 404; the effect of resistance exercise upon the circulation in man, local and general, 1073

Brush, Dr. E. N., relation of pelvic disease to insanity; an analysis of 100 cases of acute melancholia, 777, 779

Bryan, Dr. J. H., a contribution to the study of the anatomy of the fronto-ethmoidal region, 1393

Bryce, Dr. P. H., how far mandatory measures are of value and practical in measles and whooping-cough, 759

Buchanan, Prof. A., the late, 1547  
Dr. P. S., perforation of oesophagus by fishbone; pyopneumothorax; subcutaneous emphysema, 1573  
Dr. R. J. M., growth in vas deferens, 1508

Buck, Dr. A. H., acute and chronic cases of mastoid disease, 1552, 1556; non-operative treatment of chronic suppurative disease of the antrum and vault of the tympanum, 1563

Bucke, Dr. R. M., mental evolution in man, 643; heredity a factor in the etiology of insanity, 777; the influence of physical upon mental diseases, 882; studies of inebriety, 783

Bucknill, Sir J., death of, 233; obituary notice of, 255; the will of, 1112

Bulkeley, Dr. L. D., the non-surgical treatment of boils, carbuncles, and felonies, 866, 871; general therapeutic measures in diseases of skin, 873; the treatment of syphilis, 1315

Bullar, Mr. J. F., clubs and hospital abuse, 1535

Buller, Dr. F., the ultimate results of operations on the mastoid, 1557

Bullet wound of chest, 907

Bullets, the detection of in the body, 1213

Bullock, Mr. T. W., death of, 433

Bulteel, Mr. C., death of, 118

Burdett, Sir H. C., Burdett's Hospitals and Charities, rev., 472; new scheme for obtaining funds for metropolitan hospitals, 1521; small subscribers to metropolitan hospitals, 1612

Burgess, Dr., relations of pelvic disease to insanity, 774; on melancholia, 779

Burglary and chloroform, 39

Burials, city and graveyards, 286

Burma (Picturesque) Past and Present, Mrs. E. Hart, rev., 21

Burns, picric acid in, 138

Burot, Dr. F., *Les Troupes Coloniales, Statistique de la Mortalité*, rev., 1002

Burton, Surgeon-Major E. F., death of, 1380  
Dr. R. G., the condition of the river Brent, 617  
Mr. W. E., a new anaesthetic mask, 815

Bushey, Dr. T., pneumothorax, 1859

Bushell, Dr. C. W., made C.M.G., 104

Butler, Wright v., 315

Butler-Hogan, Dr. J. F., locomotion after rupture of the liver, a medico-legal question, 443

Buxton, Dr. D. W., empiricism or science? 1585

Buzzard, Dr., paraplegia with multiple subcutaneous nodules, 1263

Byers, Dr. J. W., gets honorary degree of M.A.O., 1285

Bynnin amara, 407

Byron, the necropsy on, 1771, 1888

C.

Cabot, Dr. R. C., *A Guide to the Clinical Examination of the Blood for Diagnostic Purposes*, rev., 85

Cadell, Mr. N. P., typhoid fever treated by injection of pure ferments, 1259

Cadiot, Professor P. J., *Exercises in Equine Surgery*, rev., 1734

Caecal Folds and Fossa (The) and the Topographical Anatomy of the Vermiform Appendix, Dr. R. J. A. Berry, rev., 1734

Cæcum, intussusception of the, 956; cyst of the, 1721

Caesarean section, a case of, 217, 1088; for contracted pelvis, recovery of the mother and safety of the child, 1500

Cagney, Dr. J., death of, 1524; obituary notice of, 1616

Caine, Mr. Hall, and the nurses, 605  
Mr. N., self-inflicted wound of abdomen, protrusion of viscera, recovery, 400

Calcule, salol, 78; renal, 1212; phosphatic, lithotrity for, 1796

Calculus disease of salivary gland, 1338

Calder, Dr. J. A. L., ether or chloroform? 1194

Caledon, Cape Colony, as a health resort, 407

Calendar of the University of Sydney, rev., 222

Calf lymph, vaccination by, 100; provision of, 257; glycerinated, report of the Local Government Board on, 488; letter from Local Government Board on the use of, 502; glycerinated, 568, 1286, 1298, 1311; boards of guardians and the supply of, 1035, 1304; glycerinated and the Jenner Society, 1188

Callaghan, Dr. J. L., iehthylol and glycerine suppositories, 1188, 1357

Calot, Dr., angular deformity of the spine, treated by immediate reduction, 1501

Calvert, Dr. J., calcifying pericarditis, 1338; *The Statistical Tables of the Patients under Treatment at St. Bartholomew's Hospital during 1896*, *rev.*, 1862  
Camberwell and its guardians, 1741; the treatment of able-bodied paupers at the workhouse of, 1766  
Cameron, Sir C., the recent failure of hospital accommodation in Dublin, 18  
Dr. D., septic tank experiences at Exeter, 834  
Dr. J. antikamnia, 1711  
Dr. J. C., on hyperemesis gravidarum, 1138  
Dr. J. S., disinfection and disinfectants, 834  
Campbell, Dr. A. J., colitis in the adult, 460  
Dr. A. W., changes in the spinal cord in pernicious anaemia, 1801  
Mr. C., on Sir Walter Foster's candidature, 932; on Mr. Horsley's candidature, 933, 1106  
Dr. D., vesicating plants, 323  
Dr. H., the cerebral circulation, 1760  
Dr. H. J., the importance of rest in the treatment of acute phthisis, 1418; acute diffuse myelitis, 1578  
Dr. J., abdominal operations in early childhood, 383; labour complicated by abnormalities of the cervix uteri and vagina, 1139; hospital obstetric practice, 1858  
Dr. J. A., reflexes in psychiatry, 781; the relation of insanity to the State, 787; the treatment of insomnia, 865  
Dr. W. A., histological notes, 403  
Campeau, Dr. W. J., on cholelithiasis, 1245  
Canada, proposed Victorian order of nurses in 132; travel in, 259; rules for Bristol practitioners in, 560; in its medical aspects, 560; the progress of sanitation in, 757; the climatic health resorts of, 1442  
Canards, skiagraphic, 649  
Cancer, high rectal, the extirpation of, 16, 1064; extirpation of the ovaries as a cure for, 54, 177, 185, 250, 432, 684, 890, 1375; uterine cervical, escharotics in the treatment of, 219; the method of Dr. de Becker in the cure of, 802; of the breast treated by injection of alcohol, 808, 1854; *The Relation of to Life Assurance*, Mr. W. Thorburn, *rev.*, 908; of the pylorus, pylectomy for, 1264; of the uterus, the diagnosis of in its early stages, 1266; of the breast, use of splint in the treatment of, 1547; of the cervix pyometra complicating, 1722  
regions, 1532  
Candles, wax, for the complexion, 1040  
Canovas y Castillo, Señor, the necropsy on, 667  
Cant, Mr. W. J., obstruction of the small intestine by gall stones, 1258; Mules's operation for ptosis, 1708  
Canterbury, the Beaney Institute at, 849  
Canvassing, the Royal College of Surgeons in Ireland and, 1669  
Cape Town and the diamond jubilee, 505  
Cappie, Dr. J., the cerebral circulation, 117  
Capsules, true and false in ovariotomy, the management of, 1092  
Carbolic acid, poisoning by, 40; as a poison, 297; poisoning by treated with vinegar, recovery, 595; suicide by, 588; painless cure of hydrocoel by injection of, 906  
Carbonic oxide, the minimum fatal percentage of, 27  
Carbuncles, the non-surgical treatment of, 868  
Carcinoma, primary, excision of the kidney for, 1267; pulmonary, case of, 1337; primary scirrhous in the axilla, 1500; of pylorus, pylorotomy, 1632; of penis, 1841  
Cardiac. *See Heart*  
Cargill, Mr. L. V., pseudo-glioma due to choroido-retinitis secondary to meningitis, 1506  
Caries, spinal. *See Spine*  
Carlyle, T., Sir J. Crichton Browne on, 1606  
Carmichael, Dr. J., chronic basal meningitis, 138  
Carotid, common, the collateral circulation after ligation of the, 683  
Carr, Dr. T., value of mandatory measures in measles and whooping-cough, 764  
Mr. T. G., death under chloroform, 93  
Carrasquilla, Dr. J. de D., the serum treatment of leprosy, 417  
Carriages, railway, the sanitary conditions of, 441; Cortland, 116; excise duty on, 1186  
Carstairs, Mr. J. L., respiratory obstruction due to elongated uvula in chloroform administration, 1499  
Carter, Mr. A., McGill University, Montreal, 843  
Carter, Dr. W., authority in aid of medicine, 989; the typhoid serum reaction in doubtful cases of fever, 1267

Carvell, Mr. J. M., presentation to, 1543  
Carwardine, Mr. T., Fehling's test (quantitative), 601; volvulus of Meckel's diverticulum, 1637  
Case, a hypodermic, 24; a water analysis, 279; a cycle medicine, 1804  
Cassal, Mr. C. E., the limits of the value of water analysis, 1230  
Castlebar, the guardians of and the nursing order, 1809  
Cataract in microphthalmic eyes, 1181; extraction of, 1506  
Cataract, chronic dry, of the middle ear, 1722  
Catechism Series: Anatomy, *rev.*, 1345  
Catheters, silk elastic, 626; lubricant for, 851; and bougies, reversible, 1432  
"Catholic Times," the, on the art of healing, 1353  
Cells, peculiar pigmented found in two mosquitos fed on malarial blood, 1786  
Centaline clothing, 944  
Cemeteries, regulations as to, 259  
Cerebellum, The, Dr. A. Thomas, *rev.*, 169; tumour of the, 1340  
Certificate, false, of death, prosecution for issuing, 502; of nurse, 1467  
Certificates, of death, of illegitimate children, 48; of death and procurators fiscal, 621; of vaccination, prosecution as to, 73; notification, 75; lunacy, 84; poorhouse medical, 940; of death for insurance companies, 1222; of lunacy, blank forms for, 1467; school, payment for, 1547  
Certification of pauper lunatic for asylum, 1304  
Certifying pauper sickness, 320  
Ceylon, the climate of, 1688  
Champagne for workhouse patients ordered by a nurse, 1210, 1304  
Chance, the arbitrament of, 1245  
Chance, Dr. F., obituary notice of, 375  
Mr. W., Children under the Poor-law, their Education, Training, and After-care, *rev.*, 1861  
Chapman, Dr. C. W., the Schott treatment, 433  
Charcot, the method of treatment of neuralgia, 507  
Charcot's disease. *See Disease*  
Charges, recovery of, 1217, 1384  
Charity voting system, the, 51  
Charnsley, Dr. W., eye strain and eye pain, 1340  
Charterhouse Science and Technical Schools and Rogers Memorial Institute, opening of winter session at, 1132  
Charteris, Dr. M., obituary notice of, 31  
Charteris, the water supply of, 1365  
Chelidonium majus, information as to, 123  
Chemist, analytical qualification of, 943  
Chemistry of life, the, 1109; for photographers, Mr. C. F. Townsend, *rev.*, 1514  
Chemists, prescribing and uncertified deaths, 55; a strange conceit of, 852; lady dispensing, 1532  
Chest, punctured wound of wall of penetrating sternum and wound by heart, 469; bullet wounds of, 90; penetrating wound of, 1088  
Chesterfield, the water supply of, 1365  
Chewing gum, dangers of, 1112  
Cheyne, Mr. W. W. *The Treatment of Wounds, Ulcers, and Abscesses*, *rev.*, 222; the disinfection of hand instruments, 373; the progress and results of pathological work, 586; angular deformity of the spine treated by immediate reduction, 1645  
Chicago, correspondence from, 429; medical graduation and practice in the United States, 429; a Red Cross Cycle Corps, 429; Chicago Medical Society, *ib.*; the North Western University Women's Medical School, *ib.*; another diploma mill 430; general news, *ib.*  
Child, cachectic multiple cutaneous gangrene of scalp in a, 13; spontaneous expulsion of both lenses in a, 275; aged 8 weeks, empyema of the antrum in, 808, 1337; newborn, pudendal haemorrhage in, 944; aged 1 year and 9 months, myxomatous tumour of vagina in, 1085; young, hemiplegia in a, 1263; deaf, education of, 1307; amputation of thigh in a, 1642; death from faecal impaction in a, 1727  
Childhood, early, two cases of abdominal operation in, 214; early abdominal operations in, 383; hepatic cirrhosis of, 1086; and Youth, Notes on the Special Hygiene of, Dr. T. M. Madden, *rev.*, 1862  
Children, pauper, our position as to, 35; town, holiday homes for, 51, 479; neglected, proposed Bill concerning, 164; feeble minded and imbecile, 280; pauper, during the Queen's reign, 358; books on the bringing up of, 443; country holidays for, 479; illegitimate, death certificates for, 481; the Surgical Diseases of, Mr. E. Owen, *rev.*, 596; school, and infectious diseases, 623; Poor-law, the ophthalmic condition of, 1023; in the workhouses, 1095; feeble minded, education of, 1134; of drunkards, 1358; young, mesenteric cysts in, 1422; the eyesight of, 1753; under the Poor-Law, their Education, Training, and After-care, Mr. W. Chance, *rev.*, 1862  
Chilli, rules for British practitioners in, 561  
China, Imperial Maritime Customs; Medical Reports for the Half-year ended March 31st, 1896, *rev.*, 140; northern, typhus fever in, 167  
Chinosol, 80  
Chirurgie, de la Face, Dr. F. Terrier, *rev.*, 87; des Voies Urinaires, Dr. E. Loumeau, *rev.*, 84  
Chloride of sodium, treatment of tinea tonsurans and tinea circinata, 810, 1030  
Chloroform and burglary, 39; the treatment of cyanosis produced by, 94; and the heart, 131, 1496; case of poisoning by, recovery, 135; partial anaesthesia with, 271; ether or, 352; amyl nitrate in apparent death from, 352; the safe administration of, 507, 755, 1113, 1135; statistics of the administration of in private practice, 684, 746, 843, 1762; the administration of with CO<sub>2</sub>, 1470; poisoning by, in which nearly half a grain of strichnine was injected, recovery, 1498; respiratory obstruction due to elongated uvula in administration of, 1499; semicentenary of the introduction of as an anaesthetic, 158; the administration of on lint, 159; early experimental evidence concerning anaesthesia from, 1680; in labour, 1688; the mechanism of death from, 1750; in the removal of tonsils, 1858  
syncope, the causation of, 312, 612  
Chlorosis, leading article on, 230  
Cholecystotomy for obstructive jaundice, 1121  
Cholelithiasis, its causation, symptoms, diagnosis, and treatment, 1235  
Cholera, waterborne and the Dongola expedition, 28; Report on the Epidemic of in Egypt during the years 1895 and 1896, Dr. J. G. Rogers, *rev.*, 85; in India in 1895, the revised rules, 227; camping out for in India, 482; a scare about in London, 493; on board the "Britannia," 624; reported, in Bethnal Green, 626; in the Northamptonshire Regiment, 664, 750; reported outbreak of in Bombay, 729; at Sitapur, Oude, 1112  
Choline, effects of on blood pressure, 672  
Chorea, in relation to scarlet fever, 805; the localising factors in, 1264; complicating pregnancy, 1610; family, 1727  
Choroido-retinitis secondary to meningitis, pseudoglioma due to, 1506  
Chotzen, Dr. M., *Atlas der Syphilis und syphilisähnlichen Hautkrankheiten*, *rev.*, 1345  
Christison, Dr. J. S., *Crime and Criminals*, *rev.*, 81  
Christmas Books, 1649  
Cards, 1650  
Charlton, Mr. H., death of, 1807; obituary notice of, 1880  
Dr. T., the localising factors in chorea and rheumatism, 1264; tumour of the cerebellum, 1340  
Chyluria, a case of, 261  
Cigarettes, is smoking of a cause of death? 1444  
Cimiez, the Queen's visit to, 1807  
Circulars, drug store, 1770  
Circulation, the cerebral, 117, 1760; the collateral, after ligation of the common carotid, 683; in man, the effect of resistance exercise upon, 1073; the intracranial, some aspects of, 1414  
Cirrhosis, hepatic, of childhood, 1086; of liver and intemperance, 1284; of organs and salts of lime, 1680; syphilitic of kidney, 1800  
Claque, an epistolary, 1524  
Clark, Dr. C., *Manual of Mental Diseases*, *rev.*, 597  
Dr. D., relation of pelvic disease to insanity, 774; reflexes in psychiatry, 779; studies of inebriety, 783; the relation of insanity to the State, 787  
Clarke, Dr. C. K., the treatment of insomnia, 853  
Mr. E., some experiments on the union of corneal wounds, 1265; specimen of pseudo-glioma, 1799  
Dr. G. S., the health resorts of South Africa, 1307  
Mr. J. J., immediate reduction of the angular deformity of spinal caries, 433; the use of gloves in medical work, 692; *Surgical Pathology and Principles*, *rev.*, 1185; angular deformity of the spine treated by immediate reduction, 1644  
Dr. J. M., the changes in the spinal cord in two cases of pernicious anaemia, 325; operations for abscess of the lung due to localised necrosis, 800

Claude, Dr. H., *Essai sur les Lesions du Foie et des Reins determinées par certaines Toxines*, *rev.*, 86

Clay, Dr., v. the Devonport Corporation, 299, 362

Clayesmore School, 943, 1031

Clearing house, sanitary, wanted a, 1444

Cleghorn, Surgeon-Major-General J., the Government of India and the plague, 497

Cleveland, Dr. W. F., On Induction and its Association with the History and Progress of Medicine, *rev.*, 1581

Clifton, enteric fever at, 1564, 1553, 1530, 1669, 1875

Clinics, International, *rev.*, 141

Closet accommodation for factories, 1135

Closets, earth for wool, 606

Clothing, rainproof woollen, 88; summer, for the metropolitan police, 162; cellular, 944; of women and their stomachs, 1358

Clowes, William or Robert? 1036, 1135

Club, proposed new, 1222

— Cambridge, Medical Graduates, annual meeting and dinner of, 94; conversazione of, 1534

— Cambridge Graduates and St. Bartholomew's Hospital, annual dinner of, 1620

— Edinburgh University Graduates, annual dinner of, 380

— the Flannel Shirt, annual meeting of, 361

— Manchester Edinburgh University, annual dinner of, 1373

— rates, 31

Club foot, its causation, pathology, and treatment, 1509

Clubbe, Mr. C. P. B., diphtheria treated with serum, the first 300 cases of diphtheria treated with serum, compared with the last 300 cases treated without it, at the diphtheria branch of the Sydney Children's Hospital, 1177; notes on 15 cases of intussusception, 1335

Clubs, the battle of the, 31, 173, 233, 287, 675, 737, 918, 1026, 1119, 1206, 1305, 1452, 1609, 1672, 1820; the use and abuse of, 310; what is actually received from, 1366; the dependent position of medical officers of, 1609

Coca wines, the dangers of, 1666

Coal tar still, death in a, 1772

Cochrane, Dr. R., suspension of, 1132; removal of suspension of, 1258

Cockerill, Surgeon-Captain J. W., improved pistonless hypodermic syringe, 1583

Cockermouth, the guardians of on nursing, 1766

Cocoa, elect, 909; essence of, homœopathic, and soluble, 1003

Codd, Dr. J. A., suppurative pyelophlebitis, 1728

Cod-liver oil, an early prescription for, 52; the administration of, 85; "perfected," 1804

Celiotomies, successful for an intraperitoneal rupture of a tubal gestation and two other uncommon pelvic tumours, 451

Cohn, Professor L., *Praxis der Harnanalyse*, 1513

Coleman, Dr. J. B., pityriasis rubra, 1725

Coley, Dr. W. B., pathological pigmentation of skin, 876

Coley's fluid, use of, 1423

Colic, renal, associated with transitory hydro-nephrosis and intermittent albuminuria, the relationship of movable kidney to, 971

Colitis in the adult, 460; case of, 1647

College, Anderson's, Glasgow, the professorship of physiology at, 380; instruction, etc., at, 537; opening of winter session at, 555; instruction in dentistry at, 564

— de France, experimental medicine at, 416

— King's, London, the medical faculty of, 527; fees at, 539; opening of winter session at, 554; distribution of prizes and reception at, 1005, 1119; the anatomical department at, 1202; the chair of hygiene at, 1884

— the Livingstone, the difficulty of raising funds for, 1743

— Marischal, Aberdeen, extension of, 1865

— Mason University, the medical faculty of, 521; fees at, 539; opening of winter session at, 555; changes in staff, etc., at, 565; instruction in dentistry at, 564; introductory address at, 990, 1009; the professorship of medicine in, 1443

— Medical for Women, Edinburgh, instruction at, 536; opening of winter session at, 555; students at, 1682

— of Medicine, University of Durham, appointments and scholarships at, 533; fees at, 539; opening of winter session at, 555; lady bachelors of medicine at, 845; introductory remarks, etc., 1009

— New Veterinary, Edinburgh, and women veterinary surgeons, 105, 1279, 1764

— Owens, Manchester, the medical department of, 532; fees at, 539; opening of winter session at, 555; students at, 1682

— Royal of Physicians and Surgeons in Ireland. *See Conjoint Board.*

winter session at, 555, 1214; instruction in dentistry at, 564; munificent donation to, 1016; destiny of recent donations to, 1214; entrances at, 1214, 1373; the lectureship in public health, *ib.*; the principalship of, 1372

College of Physicians, Chicago, admission of women to, 624

— Queen Margaret, Glasgow, donations for equipment of, 257

— Queen's, Belfast, instruction at, 538; opening of winter session at, 555

— Queen's, Cork, instruction at, 538; opening of winter session at, 555

— Queen's, Galway, instruction at, 538; opening of winter session at, 555

— Royal Medical Benevolent, Epsom, celebration of founder's day at, 320

— Royal, of Physicians of Edinburgh, regulations of as to diplomas, 522

— Royal, of Physicians in Ireland, pass lists, 101, 1764; regulations of as to diplomas, 524; address to the Duke and Duchess of York, 614; list of officers, etc., 1218; admission to diplomas, etc., 1620

— Royal, of Physicians of London and the Prince of Wales, 233, 283; Comitia of, 349, 1360; officers, etc., of, 349; and hospital reform, 356, 374, 497; regulations of as to diplomas, 518; the Harveian oration, 1167, 1207; St. Luke's day, 1207; presentation of the Baly, Parkes-Weber and Moxon medals, *ib.*; and the army medical staff, 1605

— Royal, of Surgeons of Edinburgh and the diamond jubilee, 37; regulations of as to diplomas, 522; regulations of as to licence in dentistry, 562; pass lists, 1380, 1883; information as to the Fellowship diploma of, 1770, 1835

— Royal, of Surgeons of England, result of election to council of, 41, 116; pass lists, 59, 901, 501, 1218, 1619, 1683, 1882; elections at the, 98; "substitute" members of council of, 99; meeting of council of, 171, 350, 1193, 1518, 1819; regulations of as to diplomas, 518; regulations of as to licence in dentistry, 561; the Calendar of the, 1025; the library of, 1218; the examination for the Fellowship of, 1223; the army medical service, 1279, 1605; the Members and the council of the, 1446, 1451; annual meeting of Fellows and Members, 1518; arrangements for final examination, 1541; and medical aid associations, 1609

— Royal, of Surgeons in Ireland, address of to the Queen, 253; regulations as to diplomas, 525; regulations of as to licence in dentistry, 562; address of to Duke and Duchess of York, 614; vote of condolence to Sir G. Duffey, 1461; and canvassing, 1609; admission to Fellowship, 1620; the Barker anatomical prizes at, 1764

— Royal, Veterinary of London, election of officers, etc., 97; and women as veterinary surgeons, 105; opening address at, 998

— St. Mungo's, Glasgow, instruction, etc., at, 136; opening of winter session at, 555

— University, Bristol, the faculty of medicine at, 531; fees at, 539; opening of winter session at, 555

— University, Dundee and St. Andrews University, 169; duplicate periodical, 507; instruction at, 537; opening of winter session at, 555

— University, Liverpool, new professorship of public health at, 373; the medical faculty of, 532; fees at, 539; opening of winter session, 555; changes in staff and new laboratories, etc., at, 565; instruction in dentistry at, 564; report of council of, 1115

— University, London, conversations at, 40; apparatus for the course of experimental psychology at, 73; the medical faculty of, 529; fees at, 539; opening of winter session at, 555; introductory address at, 977; distribution of prizes, etc., at, 1008

— University, Sheffield, the department of medicine at, 533; fees at, 539; opening of winter session at, 555; changes in staff of, 566; introductory address at, 981; distribution of prizes at, 1009

— University, of South Wales and Monmouthshire, the medical school of, 533; opening of winter session, 1195

— Yorkshire, Leeds, the medical faculty of, 531; fees at, 539; opening of winter session at, 555; distribution of prizes at, 1009; dinner to Mr. Jessop in connection with, 1119; the lectureship in forensic medicine at, 1864; creation of professorship of public health at, 1884

Colleges, university, grants to, 37

— Royal of Physicians and Surgeons in Ireland. *See Conjoint Board.*

Colleges, Royal of London and Surgeons of England. *See Conjoint Board.*

Collier, Dr. W., chorea complicating pregnancy, 1610

Collingridge, Dr. W., ships' water, 350

Collingwood, Dr. F. W., lectures on ethics and law, 1547; the dependent position of medical officers of clubs, 1609

Collins, Mr. E. T., microphthalmos with cystic protrusion into the globe, 84

— Mr. H. B., on vaccination, 664

— Dr. W. J., on public health questions in London, 230; dinner to, 1866

Coleman, Dr. W. S., thyroid treatment, 1423

Colonies, medical appointments in the, 158

Colour Blindness and its Diagnosis, Dr. M. Ohlemann, *rev.*, 1094

Colville, Dr. E. G., cholecystotomy for obstructive jaundice, 1121

— Dr. J., the examination of 100 cases of typhoid fever by Widal's serum test, 1077

Comaltana wine, 141

Commission, Egyptian on the Bombay plague, report of, 405, 1934

— Royal on Tuberculosis, meetings of, 106, 192, 1762; visit of to Glasgow, Edinburgh, Belfast, etc., 1036

— Royal on Vaccination, Mr. Milnes on the report of, 25, 33, 161; Mr. A. Paul on the report of, 48; the delayed report of, 665

Commissioners in Lunacy for England and Wales, annual report of, 915

— in Lunacy for Scotland, annual report of, 1583

Committee, Corporate and Medical Reform, formation of, 1105; the General Medical Council election, *ib.*; Dr. J. G. Glover and, 1210, 1293, 1366, 1440; Dr. W. Bruce and, 1211; petition to General Medical Council on Medical reform, 1526, 1684

— Dangerous Trades, interim report of on electrical generating works, 489; visit of to Sheffield, 1766

Company of Plumbers, officers, etc., of, 1085

Compendium der speciellen Chirurgie, Dr. G. de Ruyter and E. Kirchoff, *rev.*, 97

Compensation, for loss of office, 504; a question of, 1035

Complexion, wax candles for the, 1040

Conduct, unprofessional, 690

Conductors, highly charged, effect of on muscle nerves near them, 610

Conference, International on Leprosy, the programme of, 482; English delegates to, etc., 1014; meeting of, 1122, 1195, 1197, 1213; the decision of, 1387; general conclusions of the, 1434; Transactions and Proceedings of, *rev.*, 1581

— International on Railway and Marine Hygiene, date, place of meeting, and sections at, 414, 418

Conferences, the International Sanitary in the Victorian era, 1646

Confidence, professional, 1623

Confinement, exsanguineous, 468

Congrès International des Accidents du Travail et des Assurances Sociales, meeting of, 284

Congress of French-speaking Alienists, meetings of, 496; future meetings of, 505

— French of Internal Medicine, date, place of meeting, and subjects of discussion at, 688

— on Hygiene and Medical Topography of Belgium, date and subjects of discussion at, 381

— of Internal Medicine, meeting of, 48; the Proceedings of, Dr. E. v. Leyden and E. Pfeiffer, *rev.*, 1861

— International against Abuse of Alcoholic Drinks, meeting of, 73

— International of Dermatology, the delay in publishing the proceedings of, 1771

— International of Legal Medicine, meeting of, 422

— International Medical, Moscow, free railway tickets, 119, 247, 297; clinical demonstrations, 50; the entertainments in St. Petersburg, *ib.*; the Ladies' Committee, *ib.*; monetary matters, 188, 236, 250; the reception of deputations by the Czar, 247, 480; an international prize, *ib.*; proposed international Jenner Society, *ib.*; the general meetings and orations, 248; other arrangements, *ib.*; number of members proposing to attend, 358; excursions to the Caucasus, the Crimea, and the Volga, 410; the prices of the tickets, 411; a local committee in Sevastopol, *ib.*; the medical societies of Russia, *ib.*; the university clinics in Moscow, *ib.*; arrest of members of, 480; notes from, 566; the "Standard" on, 605;

opening addresses at, 608; the section of surgery at; discussion on the surgery of the lung, *ib.*; intestinal surgery (Frank), 609; splenectomy (Jonnesco), *ib.*; malignant stricture of alimentary canal (Czerny), *ib.*; treatment of peritonitis (Senn), *ib.*; serumtherapy of malignant growths (Sémakovsky), *ib.*; lithotomy for large calculi (Milton), *ib.*; a new method of nephro-rhaphy (Jonnesco), *ib.*; other papers, *ib.*; the Moscow prize, 670; a blood test for diabetes (Bzemer), *ib.*; craniectomy for microcephalus (Doyen), *ib.*; chlorosis (Warffving), *ib.*; a new haemato-kait (Daland), *ib.*; drunkenness and the law (Sutherland), *ib.*; tabes dorsalis (Grasset), *ib.*; hypertrophic pulmonary osteo-arthropathy (Steven), 671; hereditary neuroses in children (Sutherland), *ib.*; notes from, *ib.*; entertainments, *ib.*; visit to Warsaw, 672; obstetrical and gynaecological section at, 730; notes from, 737; French feeling as to the, 743; proposed thanks to Czar, 832; address of thanks to Czar, 1620.

Congress, International of Zoology, the presidency of, 524

— of Sanitary Institute, date, place of meeting, and programme of, 297; meeting of, 826, 833

— the Trades Union and sanitary legislation, 729

— on Tuberculosis, date, place of meeting, and subjects of discussion at, 732, 742

— Veterinary, date and place of meeting at, 1166

Congresses, forthcoming, 602; and holidays, 921

Conjoint Board in England, pass lists, 100, 437, 837, 1218, 1541; regulations of as to medical and surgical diplomas, 517; institutions from which certificates are accepted by, 545; regulations as to diplomas in State medicine, 550

— Board in Ireland, pass lists, 120, 191, 253, 316, 1033, 1218, 1302, 1380, 1461; regulations of as to medical and surgical diplomas, 524; regulations as to diplomas in State medicine, 553

— Board in Scotland, pass lists, 430, 1380; regulations of as to medical and surgical diplomas, 521; regulations of as to diplomas in State medicine, 552

Conjunctiva, tuberculosis of the, 84; solid oedema of the, 1798

Conjunctivitis, recurrent membranous, 1799

Connemara, the climate of, 626

Constantinople, quarantine as to plague at, 97

Consultation with homeopaths, 1825

Consulting rooms, the warming of, 1546, 1888

Consumption, mouth breathing in, 63; amongst negroes in the United States, 668; the alleged heredity of, 831, 1223; creasote in, 1266

Contracts in restraint of practice, 1682

Convulsions, epileptiform, drainage of lateral ventricle in, 137; cyanosis in, how caused and how prevented, 1724

Cook, Surgeon-Major-General H., death of, 686

Cooke, Mr. T., the medical school of, 530

Cooking for Invalids, The Art of, Miss F. B. Jack, *rev.*, 475

Cooper, Mr. A., the Aachen treatment of syphilis, 685

— Dr. P. R., syphilitic cirrhosis of kidney, 1800

Coprinactetoxime, the muscarine-like physiological action of, 1713

Cord, spinal, changes in in pernicious anaemia, 325, 1801; microscopic appearances of in tetanus, 333; temperature of man and animals after section of the, 883; gunshot wound of the, 961 — umbilical, two cases of dystocia arising from relative shortening of, 466

Corfield, Professor, elected honorary member of the Public Health Society of Belgium, 476

Corlett, Dr. W. T., idiopathic multiple pigmented sarcoma, 868; on the importance of general therapeutic measures in the treatment of diseases of the skin, 871, 873

Corlette, Dr. C., the etiology of beri-beri, 680

Cornea, complete exposure of for ten years without destruction of the eyeball, 134; experiments on union of wounds of the, 1265

Cornish, Surgeon-General W. R., death of, 1200; obituary notice of, 1299

Corns, hard, treatment of, 1547

Cornwall, typhoid fever in, 848; report of the Sanitary Committee of County Council of, 1202

Coroners, the powers of, as to witnesses at inquests, etc., 1618, 1878; and inquests, 1881

Corpus cavernosum, external rupture of, 1260

Cortset, a hernia, 710

Cortland carriages, 476

Costello, Lieutenant E. W., gets Victoria Cross, 1443

Coto in diarrhoea, 1029

Cotterell, Mr. E., use of splint in the treatment of cancer of the breast, 1547; angular deformity of the spine treated by immediate reduction, 1645

Cotton, Mr. H. H. P., spasmodic torticollis treated with thyroid extract, 216

Couch table, 223

Couching for dislocation of lens, recovery, 1265

Cough, laryngeal, treatment of, 943

Council, Central Hospital for London, 1608

— General Medical. *See* Medical Councils of perfection, 101, 1126

County Council of London, annual address of chairman of, 280, 357; the asylums of, 381, 1118

Coupland, Dr. S. M., the dietetic treatment of diabetes, 1042; report of on the outbreak of small-pox at Leicester, 1208; report of on the outbreak of small-pox at Gloucester, 1436; report of on small-pox in certain large towns, 1500; report of small-pox in the Dewsbury Union, 1818

Cousins, Dr. J. W., on appendicitis, 947; operations on the mastoid, 1556

Coventry, the provident dispensary at, 737, 918, 1119, 1206; the duties of the medical officer of health at, 1035

“Covering” and unqualified assistants, 1659, 1678, 1754, 1764, 1825, 1877

Cowie, Mr. J., death of, 686

Cowsheds, cubic space in, 1619

Cox, Mr. R. H., a new method of localising brain lesions, 1298

— Dr. M. F., on the army medical service, 1009, 1099, 1201

Cozette, M. P., Vaccine et Vaccination, *rev.*, 1187

Cradle for hare-lip, 657

Craig, Dr. J., new mechanical treatment for phthisis, 1760

— Dr. M., the Lunacy Act Amendment Bill, 184

Crawford, Surgeon-Captain J. M., a case of foreign body in the bladder, 766

Creasote in consumption, 1266

Cremation at the hairdressers, 296; in Great Britain, 595

Creswell, Mr. A. H., presentation to, 1030

Cretinism, sporadic, nitrogen excretion in, 1427

Creus y Manso, Dr. J., death of, 501

Crewe, disposal of night soil at, 417; the working of the Infectious Disease (Notification) Act in, 1034

Crime and Criminals, Dr. J. S. Christison, *rev.*, 813

Criminal proceeding, inability to speak and defence to, 1671, 1761

Criminality, the prevention of, 1288

Critchley, Dr. H., admission to English bar, 323

Criticism resented, 1130

Crooke, Mr. W., The North-Western Provinces of India, their History, Ethnology, and Administration, *rev.*, 472

Cross, Mr. F. R., appointed high sheriff of Bristol, 1551

Cross-examination of medical witnesses, 621

Cross-legged progression the result of double hip ankylosis, 1829

Crothers, Dr. T. D., some new clinical studies of inebriety, 78

Croudace, Mr. J. H., fracture of ribs, puncture of lungs, spinal emphysema, 341; food poisoning, 1771

Croydon, proposed new “jubilee” wing for hospital at, 1540; vaccination prosecution at, 1664; the work of the bacteriological laboratory at the infectious disease hospital at, 1810

Cruciform Mark, The, Dr. R. Stephens, *rev.*, 709

Cuff, Mr. A., a case of strangulated hernia in an infant 5 months old, 811

Cuffe, Surgeon-Major-General C. M'D., gets jubilee medal, 1524

Cunningham, Dr. J., Charcot's treatment of neuralgia, 507

— Surgeon-Major J. A., on stone in the bladder and operations for its removal, 329

Cureton, Dr. E., the treatment of sciatica, 1340

Curnow, Dr. J., beri-beri and the Seamen's Hospital register, 1224

Current from the Main: the Medical Employment of Electric Lighting Currents, Dr. W. S. Hedley, *rev.*, 1513; alternating high frequency, the general therapeutic action of, 1717

Curetting, uterine, microscopic examination of, 1723

Curriculum, the five years', 1432, 1514

Curtis, Dr. B. F., partial resection of the bladder for ulcer caused by the distoma haemato-bium, 964

Curvature, lateral, cure of, 1121

— spinal. *See* Spine

Curvatures, Spinal, The Relief and Cure of, Dr. P. G. Lecois, *rev.*, 1186

Cushing, Professor A. R., effect of various substances on the heart, 610; treatment of insomnia, 863; on the heart beat, 880

Cushing Mr. F. H., on surgery among the Zucci Indians, 483

Cut throat. *See* Throat

Cutch Mandvi, the plague in, 419

Cutts, Dr. W. H., obituary notice of, 320; death of, 679

Cyanosis produced by chloroform, the treatment of, 94; in convulsions, how caused and how prevented, 1724

Cycles and motors, 1603

Cycling and haemoptysis, 283; records in, 832; questions and answers as to, 1834

Cyclists, shirts for, 755

Cycliste, l'Hygiène du, Dr. O. Laurent, *rev.*, 814

Cyclitis, traumatic, 1799

Cyprus, small-pox in, 832

Cyst of broad ligament, 1647; of the cæcum, 1721; pancreatic, treated by incision and drainage, 1779; peripancreatic, 1797; multilocular of the pancreas, complete removal of, *ib.*; traumatic of iris, 1858

Cystitis und Urinfection, etc., Dr. M. Malhior, *rev.*, 346

Cystoma, ovarian, associated with prolapsus uteri, treated by ovariectomy and hysteropexy, 399

Cystotomy for obscure cystic tumour of the bladder containing two calculi, 1421

Cysts, mesenteric, with two cases in young children, 1422

Cytocytes vaccine, 1356

Czar, address of thanks to from International Medical Congress, 1620

D.

Dalby, Sir W., a note as to when incision of the tympanic membrane should be performed in acute inflammation of the middle ear, 213; middle ear disease and meningitis, 374

Daly, Dr. W. H., on turbinotomy, 1393; the significance of laryngeal paralysis, 1395

Dalzel, Surgeon-Major W. F., death of, 57

Daniels, Dr. C., the Colonial Branches and the council of the Association, 443

Darenth, report on the Imbecile Asylum at, 280

Darwin and after Darwin, Mr. J. G. Romanes, *rev.*, 1648

Davies, Dr. D. S., on the prevention of enteric fever, 1575; the outbreak of enteric fever at Clifton, 1669, 1876

— Dr. E., death of, 1032

— Dr. T. H., reinsertion of a tooth, 906

Davis, Mr. H. J., gunshot injuries in the late Greco-Turkish war, with remarks upon modern projectiles, 1780

— Surgeon-Major-General J., on army rank and the medical staff, 1445, 1460

— Dr. N. S., jun., on terms to indicate myocardial changes, 1229

Davos, disinfection at, 63; celebration of Queen's jubilee at, 120

Dawson, Dr. R., non-surgical treatment of boils, etc., 371

Deaf, teaching of lip-reading to, 63

Deafness due to Blocking of the Tympanic Fenestra, Dr. R. Panzer, *rev.*, 406

Dean, Dr. G., farewell dinner to, 20

Death of, Dr. F. K. Webster, 32; Surgeon-Genl. H. T. Reade, 57; Surgeon-Major W. F. Dalzel, *ib.*; Dr. T. H. Foley, 118; Dr. J. A. Ethridge, *ib.*; Mr. C. Bulteau, *ib.*; Dr. M. Murphy, 189; Mr. H. Winterbottom, *ib.*; Surgeon-Genl. A. G. Young, 252; Brigade-Surgeon G. E. Whetton, *ib.*; Surgeon-Major G. Jameson, 315; Dr. H. Winchester, 375; Dr. H. Moss, *ib.*; Dr. W. Murray, 376; Surgeon A. J. Fyffe, *ib.*; Dr. W. H. Robertson, *ib.*; Surgeon-Lieutenant C. P. Tomlinson, *ib.*; Mr. T. W. Bullock, 413; Mr. W. W. Roberts, *ib.*; Dr. J. Gemmel, *ib.*; Surgeon-Lieutenant-Colonel G. B. Stuart, 435; Dr. Juan Creus y Manso, 501; Dr. D. H. Nelson, *ib.*; Surgeon-Major J. G. S. Lewis, 502; Surgeon-General W. H. Muschamp, 530, 620; Mr. C. F. du Pasquier, 566; Mr. J. H. Taylor, 619; Mr. G. W. Johnstone, *ib.*; Dr. W. H. Cutts, 679; Dr. J. C. Howden, 685; Dr. A. Hall, *ib.*; Mr. W. J. Pilcher, *ib.*; Mr. J. Cowie, 686; Dr. J. T. de Souza Martins, *ib.*; Mr. H. V. Garnaus, *ib.*; Mr. T. W. Harle, *ib.*; Mr. W. P. Ross, *ib.*; Mr. E. Barber, *ib.*; Mr. H. Hamilton, *ib.*; Mr. T. M. Hodgson, *ib.*; Surgeon-Major-General H. Cook, *ib.*; Dr. S. Smith, 749; Mr. A. B. Rye, *ib.*; Dr. A. Fletcher, *ib.*; Mr. R. J. Stephens, *ib.*; Mr. C. A. B. Laing, *ib.*; Mr. T. W. Gregson, 824; Dr. R. Youl, *ib.*; Mr. R. R. Reed, *ib.*; Mr. S. Meacham, *ib.*; Dr. E. Davies, 1032; Mr. E. P. France, *ib.*; Dr. H. M'Harry, *ib.*; Surgeon-General W. R. xi

Cornish, 1200; Dr. J. B. Barr, 1217; Mr. L. Dreschfeld, 1300; Mr. A. Hingston, 1b; Brigade-Surgeon J. Kinahan, 1301; Surgeon-Major T. A. Wethered, 1b; Surgeon-Captain Cassidy, 1302; Mr. C. C. Walter, 1309; Surgeon-General R. Gilborne, 1308; Brigade-Surgeon J. S. Duncan, 1b; Surgeon-Major E. J. Burton, 1b; Lieutenant G. Duffey, 1304; Dr. J. Booth, 1400; Deputy-Inspector-General J. Mullins, 1401; Brigade-Surgeon-Lieutenant-Colonel J. North, 1b; Dr. J. Cagney, 1524; Mr. T. Evans, 1538; Dr. C. Saglione, 1604; Professor Tarnier, 1605; Dr. M. F. Heddle, 1617; Mr. J. R. Meek, 1763; Dr. H. Allen, 1b; Mr. W. McDonald, 1b; Dr. N. S. Bates, 1764; Mr. H. Churton, 1807; Mr. F. J. Pound, 1829; Rev. W. C. Lake, 1832; Mr. W. A. Gavin, 1880.

Death from pyrogallic acid poisoning, 81; apparent committee for the study of, 135; The Chances of and other Studies in Evolution, Professor K. Pearson, rev., 345; and Sudden Death, Dr. D. Brouardel, rev., 405; of a wool-sorster, 614; from lightning stroke, 1178; in a coal tar still, 1772; returns, the classification of, 1741, 1759; vacancy succession to, 322.

Deaths in the profession abroad, 32, 118, 189, 255, 434, 501, 619, 1128, 1617, 1681, 1829; uncertified and prescribing chemists, 55; under anaesthetics, 92, 160, 351, 410, 676, 1193, 1350, 1591, 1750.

Death-rate, alcohol and the, 923, 1606, 1808.

De Backer, Dr., the method in the cure of tubercle and cancer, 802.

Deciduoma malignum, case of, 137.

Decorations for medical officers, 624.

Deglutition, closure of the glottis during the act of, 1483.

Dejecta. *See* Excreta.

De la Harpe, Dr. E., La Suisse Balnéaire et Climatique, rev., 1001.

Delavan, Dr., B., on turbinotomy, 1391; on laryngeal paralysis, 1397; surgical treatment of malignant disease of the larynx, 1549; chronic arytenoid laryngitis, 1557; the nose and the sexual apparatus of man, 1563.

Delépine, Prof., experiments on tuberculosis organisms, 834.

Delobel, M. J., Vaccine et Vaccination, rev., 1187.

Demography, comparative, 1525.

Denmark, rules for British practitioners in, 560.

Dentistry, the use of poisonous substances in, 624; conservative in schools, 1288, 1467; the study of, 1467.

Dentists, fees of, 442; unregistered and anaesthetists, 1547.

Denton, Mr. E. B., report on the condition of the River Brent, 1190.

Dermatology, An Introduction to a Course of, Prof. Polotkoff, rev., 475; the rise and progress of, 697, 727.

De Ruyter, Dr. G., Compendium der speciellen Chirurgie, rev., 87.

De Santi, Dr. P., hospital reform, 1612.

De Souza Martins, Dr. J. T., death of, 686.

D'Estre, Mr. J. H., notes on a case of acromegaly, 1636.

Devonport, diphtheria at, 166, 252; dual notification at, 299, 362.

Dewey, Dr. R., the relation of pelvic disease to insanity, 774; on melancholia, 779.

Dewsbury, report of Dr. Coupland on small-pox at, 1818.

Dextrose, the phenylhydrazin test for, 123.

Diabetes, the dietetic treatment of, 1041; mellitus, the treatment of by nitrate of uranium, 1044; the pathology and treatment of, 1494, 1565.

Diagnosis, a question of, 56; Practical, Dr. H. A. Hale, rev., 222; in 1890, Annual Report on the Advances in, Dr. E. Schill, rev., 657; Medical The Students' Guide to, Dr. S. Fenwick, rev., 1187.

Diaries, 1648.

Diarrhoea, the, of, 1897, 605; infantile, in Bootle, 638; coto in, 1039.

Diastol, 1188.

Diazo-reaction, the, 123.

Dibdin, Mr. W. J., scientific treatment of sewage, 833.

Dickson, Dr. E. D., the plague and the pilgrimage, 37; Dr. E. Winifred, double ovariotomy with 18 months' interval between the operations, 219.

"Died on the highway: who is to blame?" 1280.

Diet Chart and Alimentary Index, Mr. M. J. Kenny, rev., 475.

Dietetic preparations, 1623.

Diets for Infants and Children in Health and in Disease, Dr. L. Starr, rev. 475.

Diathermy, the significance of in functional and organic diseases of the stomach, 263; gastric, 508, 691.

Dilator, a stricture, 710.

Diphtheria, the diagnosis and treatment of in Birmingham, 51, 504; at Devonport, 166, 252; an epidemic of arrested by serum prophylaxis, 311; the diagnosis of, 440; treated with anti-diphtheria serum, 810; in the metropolitan area, 89; in London, 925, 1013, 1112, 1200, 1285, 1354, 1463, 1542, 1603, 1619, 1683, 1705, 1831, 1883; in the country, 1040; treated with serum, the first 300 cases of diphtheria treated with serum, compared with the last 300 cases treated without it, at the diphtheria branch of the Sydney Children's Hospital, 1177; value of antitoxin in the treatment of, 1267; death from on the highway, 1289.

Diplomas, medical, reciprocity in, 195.

Dipsomania, cures for, 1039.

Directorship of public companies, 507.

Disclaimer, a, 626.

Disease, notification of, 60; medical men and the transference of, 1211, 1547.

— Addison's, case of, 82.

— Charcot's, case of, 18.

— Hodgkin's, treated by bone marrow tableoids, 1421.

— infections, treatment of cases of in general hospitals, 1515; School Board teachers and, 1809.

— mental, the influence of physical disease upon, 781.

— Pott's, immediate correction of deformity in, 1427; forcible straightening of the spine in, 1630.

— Raynaud's, case of, 806.

— woolsorter's, the prevention of, 231.

Diseases, epidemic, the fluctuations of, 35; of the Liver, Gall Bladder, and Biliary Systems, Mr. H. J. Waring, rev., 277; of the Gall Bladder and Bile Ducts, Mr. A. W. M. Robson, rev., 654; tropical, the prevailing ignorance of, 985, 1012; tropical, book on, 1467.

Disinfection by vapour of phenols, 99; a practical experiment in, 298; of hands and instruments, 314, 373, 433; and disinfectants, 824; of rooms, 1018; and Disinfectants, Mr. J. Gay, rev., 1431; household, by formaldehyde, 1843.

Dislocations, multiple congenital, 1268.

Dispensaries, provident, 322; provident multiplicity of, 666.

Dispensers, army, and their grievances, 443.

Distin, Mr. H., presentation to, 408.

Distoma haematomium, partial resection of the bladder for ulcer caused by, 964.

Diuretics, discussion on at Montreal meeting, 1607.

Diver, Dr. E., address of as candidate for General Medical Council, 740; vote of thanks from, 1210.

Diverticulum, Meckel's. *See* Meckel's.

Dixon, Mr. J. H., a case of spurious abortion, 1639.

Docteur Tant Pour Cent, 1677.

Doctor, a coloured lady, 64; changing the, 626, 1623, 1834; a dispensary, for 10s. a week, 628, 68; Chinese lady, 756.

Doctors, sham, and their dupes, 687; Russian lady and Professor Virchow, 732; liability of in ordering nurses, 1299; Irish dispensary, leave for, 1304.

Document, an interesting, 300.

Dodd, Mr. H. W., new palpebral forceps, 598.

Dog, bone grafting from the, 1875.

Dogs, operations on to determine whether obstruction of the ureter would cause atrophy of the kidney, 1720.

Dolan, Dr. T. M., the candidature of for the General Medical Council, 839; on Poor-law economics, 1588.

Doman, Canon, on vivisection, 260.

Dominica as a health resort, 659.

Don, Dr. W. W., the action of thyroid extract on the skin as illustrated in cases of ichthyosis, 1334.

Donations, 84, 246, 372, 402, 738, 847, 1003, 1196, 1245, 1264, 1534, 1564, 1779.

Donegan, Surgeon-Captain J. F., surgical notes from the Indian frontier, 1587.

Dongola, the expedition to and waterborne cholera, 28.

Donkin, Dr. H. B., the Westminster University scheme, 1827.

Donnan, Dr. W. D., the examination of 100 cases of typhoid fever by Widal's serum test, 1077.

Donnet, Sir J., made K.C.B., 98.

Doran, Mr. A., the management of true and false capsules in ovariotomy, 1092; hernia of the abdominal cicatrix and operation for its

cure, 1576; a case of pancreatic cyst treated by incision and drainage, with comments, 1779.

Dorset, proposed home for county nurses in, 1587.

Dover cliff mystery, the, 665, 676, 1524.

Doyle, Dr. A. C., Uncle Bernac, rev., 708.

Drage, Dr. L., direct representation on the General Medical Council, 728, 740.

Drainage and exploratory excision versus paracentesis, 79.

— tubes, the fixing of, 1467.

Drains, landlords and, 829.

Drake-Brockman, Brigade-Surgeon-Lieutenant-Colonel, appointed member of the Medical Board of the India Office, 236.

Dreschel, Professor E., obituary notice of, 1126.

Dreschfeld, Dr. J., Henoch's purpura, 1800.

— Mr. L., death of, 1300.

Drinks, cold, 479.

Drug store circulars, 1770.

Druggists, wholesale, liability of, 1540.

Drugs, certain, action of on the gastric secretion, 1716.

Drunkards, children of, 1358.

Drunkenness, increase of amongst females, 478; apprehensions for in Glasgow, 669; is it increasing? 1662.

Drysdale, Dr. C. R., the New York experiment in the prevention of phthisis pulmonalis, 746; high and low death-rates in London districts in 1896, 843; the alleged heredity of consumption, 1223; the decision of the leprosy conference, 1387; the Montreal, debate on the treatment of syphilis, 1756.

Dublin, the recent failure of hospital accommodation in, 18; the medical history of in the Queen's reign, 52; enteric fever at the Island Bridge Barracks at, 621; typhoid fever at, 1530; entries at the medical schools in, 1764.

Duchenne, monument to at Boulogne, 114; monument to in the Salpêtrière, 1287.

Duchess of Teck, death of, 1290.

Duchaux, the structure of bacteria, 416.

Duffield, Dr. R., overcrowding in Board schools, 1444.

Dudley, Dr. A. P., intrapelvic tuberculosis, 1149.

Duer, Surgeon-Captain C., effusion into the knee-joint, 15; spontaneous amputation of both lower extremities in a newborn infant, 1179.

Duffey, Sir G., gets jubilee medal, 1285.

— Lieutenant G., death of, 1384.

Dufton, Dr. H. T., atony of the rectum, 1467.

Duke of Devonshire on nursing as a profession, 615; on a teaching university for London, 1665.

Duke and Duchess of York and the Irish College, 614.

Duke, Dr. A., treatment of pruritis, 443; a self-retaining tenaculum, 1432; treatment of dysmenorrhoea, 1623.

— Dr. D., the fixing of drainage tubing, 1467.

— Colonel O. T., appointed civil commissioner for Victoria, Mashonaland, 828.

Dulberg, Dr. J., the doctor's holiday, 259.

Dum-dum bullet, the, 1462.

Duncan, Dr. E., value of mandatory measures in measles and whooping cough, 764; the dietetic treatment of diabetes, 1042; the treatment of diabetes mellitus by nitrate of uranium, 10.

— Brigadier-Surgeon J. S., death of, 1380.

Dundee, notification of measles and whooping-cough in, 234, 1034; notification of measles at, 1219; the new charter for the Royal Infirmary at, 1447.

Dunn, Mr. L. A., pylorectomy for cancer of the pylorus, 1264.

Du Pasquier, Mr. C. F., death of, 566; obituary notice of, 619.

Dura mater, calcification of in a case of melancholia, 1261.

Durante, Professor, jubilee of, 1123.

Durno, Dr. L., case of puerperal septicæmia treated by anti-streptococcus serum, recovery, 1237.

Dust, typhoid fever and, 1114.

Dynamometer, a new, 610.

Dysmenorrhœa, treatment of, 1183, 1623.

Dystocia, due to congenital cystic disease of the kidneys, 275; arising from relative shortening of the umbilical cord, 466.

E.

Ear, middle, when incision of the tympanic membrane should be performed in inflammation of, 213; middle, acute suppurative disease of in infancy, 214; middle, disease of and meningitis, 314, 374; a (foreign body) tooth in the require-

ing reflection of the auricle, etc, for its removal, 810; malignant tumour of brain originating in the, 1082; middle, chronic dry catarrh of the, 1722; middle, disease of, 1790

Eastbourne, a new water supply for, 417; sunshine at, 1770

Eating, localised sweating and blushing on, 1263

Esau Bonnes as a health resort, 1180

Eccles, Mr. A. S., the mechanotherapy of movable kidney, 156, 1836

Economics, Anaesthetics and Antiseptics in Midwifery, Dr. H. Brown, *rev.*, 1803

Eclampsia, puerperal, injection of pilocarpin in, 706

Ectopia testis, 193

Ectropion, complete exposure of the cornea for ten years without destruction of the eyeball, 134

Eczema, chronic, followed by elephantiasis, 164; palmar and plantare, 1724

Eddowes, Dr. A., a correction, 1835

— Mr. W. D., superfetation in a case of twins, premature, 506

Eden, Dr. T. W., spurious abortion, with an account of three cases, 1488

Edenderry, the workhouse at, 623, 848

Edes, Dr. R. T., the treatment of insomnia, 860 (This paper was in error attributed to Professor R. Ferguson)

Edinburgh, the School of Medicine of the Royal Colleges of, 259; post-graduate classes in, 296; meeting of British Medical Association in 1898, 355, 1667; military hospital at, 502; opening of winter session at, 1110, 1194; scarlet fever in, 1332; ventilation, etc., of new city hospital at, 1683

Edington, Dr. A., preventive inoculation for rinderpest, 1015, 1758

— Dr. G. H., excision of scapula for sarcoma in the infraspinatus muscle occurring in a girl aged 8 years, recovery with useful limb, 457

Education and hysteria, 496; preliminary [and the General Medical Council, 1653, 1664

“Egg service” at St. John’s, Streatham, 239

Egypt, the plague in, 163; sanitary reforms in, 228

Elbow-joint, excision of for tuberculous disease, 1647

Elder, Dr. G., some aspects of the intracranial circulation, 1414

— Dr. J. M., the teaching of anatomy, 879

Electrical Treatment, The Value of, Dr. J. Althus, *rev.*, 475

Electricity, its Medical Applications, etc., Mr. G. R. Peers, *rev.*, 222; report of the Dangerous Trades Committee on the storage of, 489

Electrography, wanted a name, 52

Electrolysis for redundant hairs, 1307

Electrotropic currents, action of certain reagents upon, 672

Elephantiasis following chronic eczema, 164

Elliot-Blake, Mr. H., medical defence, 312

Elsworth, Mr. R. C., a case of hydatids simulating typhilitis, operation, recovery, 811

Elvy, Mr. F., insomnia, 1125

Elze, Dr. K., Das Wesen der Rhachitis und Skrophulose und deren Bekämpfung, *rev.*, 709

Embolism, functional hemiplegia following, 706

Emergencies, Surgical, etc., Mr. P. Swain, *rev.*, 86

Emergency, acting for a brother practitioner in a, 63

Emollients, Poor-law officers', 1035

Emphysema, surgical, after fracture of ribs and puncture of lungs, 341; cellular, complicating oesophagotomy, 1190

Empyema of the antrum in a child aged 8 weeks, 808, 1337; of pneumonia with four cases, 1057; of the antrum of Highmore, 1577

Endocarditis, its Pathological Anatomy and Etiology, Dr. F. Harbitz, *rev.*, 86; infective of the pulmonary valves, 1174; acute, ulcerative, with diffused suppurative foci, 1640

Endometritis, haemorrhagic, 1798

Engstrom, Dr. D., Mittheilungen aus der gynaecologischen Klinik der, *rev.*, 277

Ensor, Mr. H. C., and the directors of the Newport Infirmary, 1808, 1826

Enterectomy by Maunsell's method for gangrenous intussusception, 83

Enteritis (fowl), prevalence of in Ireland, 1224

Epilepsy, removal of uterus and appendages in a case of, 1857

Epilobium hirsutum. *See* Hairy willowherb

Epithelioma of the larynx, thyroectomy for, 1577

Erlenmeyer, Dr. A., Unser Irrenwesen: Studien und Vorschläge zu seinem Reorganisation, *rev.*, 709

Erskine, Mr. G. M., presentation to, 1732

Eruption, a peculiar, in sportsmen, 691

Erysipelas, facial, a severe case of treated by antistreptococcus serum, 1718

Erythrol tetranitrate, tabloids of, 710

Excharotics in the treatment of uterine cervical cancer, 219

Escott, Mr. T. H. S., how to remedy the wrongs of army doctors, 1201

Eserin on sea voyages, 324

Essay upon Hepatic and Renal Lesions due to certain Toxins, Dr. H. Claude, *rev.*, 86

Ether v. chloroform, 684, 1762

Ethics, of purchase, 442; lectures on, 1547

Ethridge, Dr. J. A., death of, 118

Etiquette, medical. *See* Medical

Eucaine as a local anaesthetic in the surgery of the throat, nose, and ear, 1560

Euquinine, 1734

Europe, alcoholism and the penal law in, 484

Evans, Dr. T., death of, 1538

Eve, Mr. F., two cases of abdominal operation in early childhood, 214; on mesenteric cysts with two cases in young children, operation, 1422

Evershed, Dr. A. R. F., South of England winter resorts, 1547

Ewart, Dr. J. H., a study of reflexes, 1824

— Dr. W., favourable results in obstruction of the trachea by diphtherial membrane from the introduction of creosoted oil, through the tracheotomy tube, 1564

Exalgine, bad effects of, 1223

Excise duty on carriages, 1886

Excreta, the disposal of and typhoid fever, 831; of typhoid fever, the disposal of, 1440, 1530, 1601

Excretory Irritation and the Action of Certain Internal Remedies on the Skin, Dr. D. Walsh, *rev.*, 597

Excursions at the Montreal meeting, 1101

Exercises in Equine Surgery, Prof. P. J. Cadiot, *rev.*, 1734

Exeter, septic tank experiences at, 834

Exhibition, the medical, surgical, and hygienic, 281

Extremities, lower, spontaneous amputation of both in a new-born infant, 1170

Eye, cases of foreign body in the, 136; A System of Diseases of the, Drs. W. A. Norris and C. A. Oliver, *rev.*, 220; some congenital abnormalities of the, 1249; leaden pellet lodged in the, 1798

— strain and eye pain, 1340

Eyeball, perforating wound of the, 1799

Eyelid, pig's, transplantation of to a man, 1602

Eyre, Dr. J., tuberculosis of the conjunctiva, 84; Dr. Mendini's Hygienic Guide to Rome, *rev.*, 1093

F.

Face, herpes zoster of with paralysis, 466

Factories, pregnancy and women's labour in, 1017; closet accommodation for, 1135, 1223

Factory, school on, 1526

Faculty of Physicians and Surgeons of Glasgow, regulations of as to diplomas, 522; regulations of as to licence in dentistry, 562; annual meeting of, 1380

Fagan, Mr., addresses to, 192

Faeces, death from impaction of in a child, 1727

Falona, 1272

Farnborough, the drainage of, 1016

Farnham, contamination of water supply of, 1210

Farquhar, Dr. J., swallowing foreign bodies, 1388

Farquharson, Dr. R., presidential address to the Sanitary Congress, 731, 741

Fasting, The Medical Aspect of, *rev.*, 1269

Fat, estimation of in milk, 1223

Fecundity, extraordinary, 628

Fauva of dead bodies with special reference to diptera, 1853

Fee, a special, a locum tenens and, 63; for certification of lunatic, 1130, 1543, 1616; for certifying as to fitness of patients to remain in workhouse, 1304

Feeble-minded, homes for, 1884

Fees, medical, guardians and, 39, 189; to medical witnesses, 56, 443, 690, 1033, 1541; legal, and assistants, 123; provident medical, for ministers, 105; consultation, in club practice, 287; the water diviner's at Ampthill, 420; dentists', 442; inadequate, to witnesses, 605; for certification of pauper lunatics, 623; a nurse's, 626; at inquests, 687; police, and the medical profession, 751; a question of, 754; inquest and “locum tenentes,” 940; dual notification, 7b; for inspection and evidence, 1219; notification in Huddersfield, 7b; of medical witnesses in criminal cases, 138; to district medical officers for school attendance certificates, 1463; medical, particulars of, 1540; to officers of the Indian medical service, 1617; to witnesses, subpoena from both sides, 1682; to witnesses in County Court actions, 1764; under the Notification Act, 1766; at small hospitals, 1886; assurance, 1887

Fehling's test (quantitative), 601

Felons, the non-surgical treatment of, 868

Femur, fractured, from a case of fragilitas ossium, 1855

Fens, the plague in the in 1636, 167

Fenwick, Mr. E. H., the Roentgen rays and the fluoroscope as a means of detecting small deeply-placed stones in the exposed kidney, 1075

— Mr. P. C., cradle for harelip, 657

— Dr. S., The Student's Guide to Medical Diagnosis, *rev.*, 1187

Ferguson, Dr. A. H., personal observations on the surgery of the gall bladder and bile duct, 1315

— Dr. R. See Edes, Dr. R. T.

Fergusson, Dr. A. H., on appendicitis, 949

Ferments, pure, typhoid fever treated by injection of, 1250

Ferratin, intestinal absorption of, 672

Fever, the typhoid serum reaction in doubtful cases of, 1267

— enteric, serum diagnosis and serum treatment, recovery, 81; in India, 98; Widal's sero-diagnosis of, 266; supposed immunity of natives in India to, 329, 359, 499, 1214, 1762; tetanus complicated by symptoms of, 400; serum diagnosis of, 431, 1118, 1665, 1723, 1773, 1774, 1775, 1777, 1778; and midden privies, 440; discussion at the meeting of the American Medical Association on, 492; and sewer ventilators, 732; and the disposal of excreta, 831; in Cornwall, 848; at Maidstone, 924, 935, 1011, 1022, 1029, 1113, 1117, 1126, 1205, 1297, 1362, 1452, 1529; vaccination against, 1015, 1553; the examination of 100 cases of by Widal's serum test, 1077; intercurrent with hepatic cirrhosis of childhood, 1086; and dust, 1114; at University College Hospital, 1116, 1202, 1286, 1357; salol in, 1214, 1373; treated by injection of pure ferments, 1259; epidemic at King's Lynn, 1294, 1363, 1452, 1529; at Belfast, 1363; at Bristol and Clifton, 1304, 1453, 1530, 1669, 1875; a new method of disposing of the dejecta of, 1440; and sewage-fed oysters, 1526; and the fetus, 1528; at Ligoniel, 1529; at Dublin, 1530; in the West of England, 168; the safe disposal of excreta of, 168; the infectivity of, 1543; compound tincture of benzoin in, 1572; special discussion at the Royal Medical and Chirurgical Society on the prevention of, 1574, 1793; and ice cream, 1578; and shellfish, 1602; at Agra, 1683; and notification, 1834, 1887; the Elmer and allied methods in the diagnosis of, 1842; the occurrence of without characteristic lesions of the small intestine, 1850

— malarial, proposed inquiry into, 94; on the Indian frontier, 1129; pernicious, recovery, 1720

— puerperal, antistreptococcal serum in the treatment of, 14; caused by fright, 691

— scarlet, in the Channel Squadron, 75; duration of the period of infectiousness in, 765; chorea in relation to, 805; hyperpyrexia in, 1000; hot acid baths in, 1435; the diagnosis of, 1886

— typhus, at Inniskes, 104; in Northern China, 167; in Skye, 1684

— yellow, Professor Sanarelli on, 7, 96; the bacteriology of, 294; the microbe of, rewards for Professor Sanarelli, 479; in the United States, 665, 730, 832, 1200, 1358, 1585, 1688; proving of the bacillus of in the human subject, 730; a curative serum for, 1116; the serumtherapy of, 1101; in Jamaica, 1290, 1357, 1447, 1605; in the Soudan, 1532

Fever, pernicious malarial of Sierra Leone, 1262

Fibro-cyst of the uterus, abdominal hysterectomy, recovery, 708

Fibro-lipoma of arm, 1800

Fibrosis of lungs, 1728

Field, Mr. G. P., middle ear disease and meningitis, 314

Figueiredo, Dr. A., Contribution à l'Etude de l'Emboîtrage Traumatique, *rev.*, 1003

Fiji, rules for British practitioners, in 560

Filaria, adult, removal of in cases of lymphangitis, 903

Filtering water supplies, a new method of, 1543, 1687

Filtration of milk, 1809

Fincham, Mr. W. S., case of spina bifida, ulceration, escape of cerebro spinal fluid and recovery, 1130

Fingers, some rare affections of the, 1069  
Finland (Through) in Carts, Mrs. A. Tweedie, rev., 1431  
Fire, the great, and the Barbers' Hall, 1603  
— engines, the loaning of, 1447  
Firth, Surgeon-Major R. H., Practical Domestic Hygiene, rev., 812  
Fischer, Mr. G., a new method of filtering water supplies, 1543  
Fish, two examples of malformation of, 1504  
Fishbone, perforation of oesophagus by, 1573  
Fisher, Mr. T., complete inversion of the uterus with complete procidentia of the organ, 1178  
Fison, Dr. E. T., Widal's sero-diagnosis of enteric fever, 266  
Fistula, bronchial, 126  
Fitzgerald, Sir T. N., proposed public dinner to, 437; public dinner to, 678  
Fleet, opening of cottage hospital at, 1354  
Fleming, Dr. W. J., appliances for spinal caries, 1804  
Flemming, Mr. C. E. S., medical aid associations, 1679  
Flesh, surgical, 1467  
Fletcher, Dr. A., death of, 749  
— Dr. T. B. E., obituary notice of, 1300  
Floor of operating theatre, material for, 851  
Floors of hospital wards, 123  
Florence, correspondence from, 1611  
Flower, Major L., on river pollution, 741  
Flowers, artificial, lead poisoning from, 1532  
Fludd, Robert, the mystical physician, 408  
Fluoroscope, the, as a means of detecting small, deeply-placed stones in the kidney, 1075  
Flushings following the menopause, ovarian palatinoids in, 1000  
Fucus, the, and typhoid fever, 1528; malformation of, 1623; macerated from extrauterine gestation, 1728  
Foley, Dr. T. H., death of, 118  
Folkestone, the water supply of, 1342, 1365  
Food, beri-beri and, 390, 415, 1459; waste of in workhouses, 418, 566; in Health and Disease, Dr. I. B. Yeo, rev., 596; poisoning by, 1771  
Food-fishes, British, the Life-Histories of the, Dr. W. C. McIntosh and Mr. A. T. Masterman, rev., 1344  
Foods, canned, poisoning from, 938  
Foot, anterior dislocation of, 1639  
Football in America, 1534  
Footner, Mr. J. B., the pathology of genu valgum, 1638  
Foramen, the pterygo-spinous, from a surgical standpoint, 1173  
Forceps, axis-traction, 598; new palpebral, *ibid.* the use of in midwifery, 682, 746, 1125, 1509  
Foreman, Surgeon-Major, the medical service in India, a weak link in the chain, 1301  
Foresters, juvenile and female lodgers of, 173  
Formaldehyde, household disinfection by, 1843  
Formic aldehyde vapour as a disinfectant, 626  
Formol, disinfection of dwellings by, 183  
Fosbery, W. H., ovarian palatinoids in flushings following the menopause, 1000  
Foster, Dr. B., the Montreal Address in Surgery, 1030  
— Professor M., the progress physiology during the last 13 years, 445; the teaching of anatomy, 880; A Textbook of Physiology, rev., 1732  
Sir W., and the eight hours working day for miners, 39; and the General Medical Council, 828; and the "Young Man," 926, 1021, 1106, 1116; address of as candidate for General Medical Council, 927; meeting in London in support of candidature of, 927, 1019; Dr. R. R. Rentoul on the candidature of, 931; Mr. C. G. Wheelhouse on the candidature of, *ibid.*; and the Incorporated Medical Practitioners Association, 932; and Mr. J. A. Rigby, 934; meeting at Birmingham in aid of candidature of, 1019; reply of to "interrogatories," 1019; letter of thanks from, 1220  
Fothergill, Dr. W. E., deciduoma malignum (so-called), 1579; Walcher's position in obstetrics, 1630  
Foulis, Dr. E., cyanosis in convulsions, how caused and how prevented, 1724  
Foundling and foundling hospitals in Italy, 1024  
Fowl enteritis, prevalence of in Ireland, 1224  
Fowler, Dr. J. K., a local university for London, 1815  
— Mr. T., case of diphtheria treated with antidiaphtheria serum, 810  
Fox, Dr. G. H., therapeutic measures in diseases of skin, 873  
— Dr. T. C., the biology of ringworm, 876  
Foxwell, Dr. A., the Spas of Mid-Wales, rev., 814; colitis, 1647 fibrosis of lungs, 1728

Foy, Mr. G., hernia of the bladder, 54; ether or chloroform, 355; Dr. Long and the discovery of anaesthetics, 1124; medicinal plants of the United States, 1298; the administration of safe anaesthetics, 1374; the early use of anaesthetics in America, 1383; the history of forcible extension of the spine, 1538; the administration of chloroform on lint, 1501  
Fracture, multiple spontaneous, 1183; simple, suppuration occurring in, 1579; wiring fragments in, 1858  
Fragilitas ossium, fractured femur from a case of, 1855  
Framboesia or syphilis, 1641  
France, notification of infectious disease in, 496; rules for British practitioners in, 560, 1039  
Death Statistics of the Colonial Troops of Drs. F. Burot and M. A. Legrand, rev., 1002; proposed abolition of medical schools in, 1121; alcoholism in, *ibid.*; municipal schools for nurses in, 1122  
France, Dr. E., tuberculosis in the insane, 403  
— Mr. E. P., death of, 1032  
Francis, Mr. A. B., pipe stem impacted in one of the bronchi for a period of three months, 809  
Franzensbad as a health resort, 1190  
Fraser, Dr. T. R., the antivenomous properties of the bile of serpents and other animals, and an explanation of the insusceptibility of animals to the poisonous action of venom introduced into the stomach, 125, 595; and the "Nineteenth Century" on snake venoms, 496  
Freeborn, Mr. J. C. R., purpura haemorrhagica, 1610  
Freeland, Dr. E. H., ectopia testis, 195  
Freeman, Mr. H. W., obituary notice of, 1681  
Frère, Jacques, rupture curer and lateral lithotomist, 1349  
Frere, Mr. A. H., general practice, 1373; medical men and the transference of disease, 1547  
Freshford, cottage hospital for, 1666  
Freyberger, Dr. L., malformation of the heart, 1504; intrapericardial rupture of an aortic aneurysm, *ibid.*  
Freyer, Mr. P. J., obscure cystic tumour of the bladder containing two calculi, successful removal by suprapubic cystotomy, 1421  
— Surgeon-Major S. F., on the supposed immunity of natives of India to enteric fever, 329, 359  
Friedreich's ataxia. *See Ataxia*  
Fright, puerperal fever caused by, 601  
Fripp, Mr. A. D., appointed surgeon in ordinary to the Prince of Wales, 232  
Frobisher, Mr. W. M., hysterical contraction of the knee-joint in a boy, 135  
Fronto-ethmoidal region, the anatomy of the, 1302  
Fruits and Farinaceæ the Proper Food of Man, Mr. J. Smith, rev., 405  
Fry, Dr. F. M., on the muscarine-like physiological action of coprinacetoxime, 1713  
Fuchs, Dr. E., Manuel d'Ophtalmologie, rev., 907  
Fund, American Victoria Jubilee, closing of lists of, 421  
— British Medical Benevolent, bequest to and appeal for funds for, 1200  
— Children's Country Holiday, the work of, 479  
— the Cullingworth, particulars of, 373  
— "Daily Chronicle" for the Greek wounded, report as to, 604  
— Hospital Saturday, system of distribution of, 1347  
— the Hospital Sunday and surgical appliances, 260; report of Distribution Committee of, 411; resolution of council of as to the outpatient system, 1290; system of distribution of, 1347; annual general meeting of, 1821  
— Prince of Wales's Hospital, contributions to, 604, 752, 1464, 1658, 1767; the report of, 1863  
— Queen's Commemoration for Jubilee Nurses, amount of, 1493  
— Royal National Pensions for Nurses, the chairmanship of, 1825  
— Winchester. *See Winchester*  
Fundulus magellanus, action of certain chemical salts on the heart beat of the embryo of, 1484  
Furnivall, Mr. F., case of acromegaly with an analysis of 34 recorded examples, 1337  
Fussell, Dr. M. H., two cases of haemophilia, 1230  
Fyfe, Surgeon C. J., memorial to at Haslar, 1207  
Fyffe, Surgeon R. J., death of, 376

G. Gabbi, Dr. U., Semeiotica, rev., 88  
Gabe, Dr. J., on medical defence, 248

Gager, Dr. C., Bad Gastein nach den neuesten Hilfsquellen, rev., 474  
Gaillard, Dr., on chemical bacteriology, 484  
Gairdner, Professor W. T., the chair of surgery in Glasgow and the Western Infirmary, 1449; on the prevention of enteric fever, 1575  
Galgey, Mr. O., chronic eczema followed by elephantiasis, 1641; framboesia or syphilis, *ibid.*; lymphadenoma, *ibid.*; amputation of thigh in a child, 1642  
Gall bladder, ulceration and rupture of, operation, recovery, 341; and bile ducts, the surgery of the, 1315; spontaneous fracture of gall stone in, 1504  
Gall stone, impacted, acute haemorrhagic pancreatitis, death, 468; spontaneous fracture of in gall bladder, 1504  
Gall stones, obstruction of the small intestine by, 796, 1258; experiments on the solubility of in oils, 798  
Galloway, Dr. J., idiopathic multiple pigmented sarcoma, 868; a form of pathological pigmentation preceding malignant transformation of the skin, 873  
Galt, Dr. H., absence of one kidney, 1260  
Gamble, Dr. L. G., melæna neonatorum, 216  
Ganglia, sympathetic, of vertebrates, observations on, 88, 1398  
Gangrene, multiple cutaneous of the scalp in a cachectic child, 13; acute pulmonary, case of, 463; acute septic, case of, 470; symmetrical, associated with peripheral neuritis, 648  
Gardner, Mr. H. B., the administration of safe anaesthetics, 166, 499  
— Dr. J., gastric dilatation, 508  
— Dr. W., on hyperemesis gravidarum, 1138; a case of procidentia uteri with numerous vesical calculi, 1141; the diagnosis and treatment of intrapelvic tuberculous diseases, 1151; uterine flexions and displacements, 1156  
Garman, Mr. H. V., death of, 686  
Garner, Mr. W. L., deaths under anaesthetics, 677  
Garrad, Dr. A. E., ventral and umbilical hernia in the same patient, 950; The Statistical Tables of the Patients under Treatment at St. Bartholomew's Hospital in 1896, rev., 1862  
Garstang, the duties of medical officer of health at, 1543  
Garstang, Mr. T. W. H., the classification of death returns, 1759  
Gasfired and stoves, 1835  
Gaskell, Dr. W. H., on the heart beat, 880, 881; the sympathetic vertebrates, 881  
Gastrectasia. *See Dilatation*  
Gastric. *See Stomach*  
Gauze packing of the pelvis in gynaecological operations, 1164  
Gavin, Mr. W. A., death of, 1880  
Gay, Dr. J., Disinfection and Disinfectants, rev., 1431  
Gemmell, Dr. J., death of, 433  
Geneva mineral water, 348  
Genital tract. *See Tract*  
Genito-Urinary Surgery and Venereal Diseases, Drs. J. W. White and E. Martin, rev., 473  
Genu valgum, the pathology of, 53, 1638  
Gardiner (Vosges), as a health resort, 407  
Germano, Dr. E., the vitality of typhoid bacilli, 1744  
Germany, new law on inebriety in, 381; smallpox and vaccination in, 443; rules for British practitioners in, 561; medical practitioners in, 624  
Gestation, tubal, unusual cases of, 136; tubal celiotomy for intraperitoneal rupture of, 461; extrauterine case of, 905; extrauterine, macerated fetus from, 1728  
Ghadially, Dr., the micrococci of, 438  
Gilbert, Dr., on the "shepherd-killer," 1824  
Gibney, Dr., on spinal curvature, 961; on rheumatoid arthritis, 1228  
Gibraltar, rules for British practitioners in, 560  
Gibson, Dr. C., Harrogate as a health resort, 735  
— Mr. T., deaths under anaesthetics, 410  
Gilborne, Surgeon-General R., death of, 1380  
Giles, Dr. A. E., unusual cases of tubal gestation, 136; in hyperemesis gravidarum, 1137; intrapelvic tuberclosis, 1150; The Diseases of Women: A Handbook for Students and Practitioners, rev., 1185  
— Mr. P., Walcher's position in obstetrics, 1756  
Gilleran, Dr. E. J., the Obstetric Nurses' Bill, 324  
Gimlette, Mr. J. G., the etiology, symptoms, and treatment of latah, with a report of two cases, 455  
Gimson, Mr. T. S., on medical defence, 248

"Girdle," a suspensory, 142  
 Girl, partly imbecile, home for, 1770  
 Given, Dr. J. C. M., fertility of twin sisters, 259; hystero-epilepsy with rapidly fatal issue, 1572  
 Gladiators or soldiers? 235  
 Gladstone, Mr., the health of, 1606  
 Glaister, Dr. J., A Manual of Hygiene for Students and Nurses, *rev.*, 1511  
 Glamorganshire, a county laboratory for, 728  
 Gland, salivary, calculous disease of the, 1358  
 Glanders, nose and lung from a case of, 1720; specimens of in the horse, 1721  
 Glans, tracheal, calcareous metamorphosis of, 1261  
 Glantenay, Dr. L., Chirurgie des Centres Nerveux, *rev.*, 656  
 Glasgow, apprehensions for drunkenness in, 669; the control of ice cream vendors in, 728; small-pox in, 848; fund for Diamond Jubilee at, 1013; opening of winter session at, 1194; hospital administration in, 1604  
 Glenn, Dr. J. H., haemorrhage in the broad ligament complicating the puerperium, 219  
 Glinn, Mr. C. F., deaths from lightning stroke, 1778  
 Glosissis, chronic superficial dissecting, a case of, 651  
 Glottis, closure of the during the act of deglutition, 1483  
 Gloucester, a memorable incident in the epidemic of small-pox at, 673; Dr. Coupland's report on the epidemic of small-pox at, 1436  
 Glover, Dr. J. G., and the Corporate and Medical Reform Committee, 1210, 1293, 1366, 1440  
 Gloves, aseptic for operators, 114; the use of for medical work, 692  
 Glycogenesis, hepatic, 1433  
 Glycosuria in the insane, 1250  
 Glynn, Dr. T. R., dissecting aortic aneurysm, 1428  
 Godding, Dr. W. W., active treatment in general paralysis of the insane, 1467  
 Goffe, Dr. J. R., uterine flexions and displacements, 1155  
 Goitre, exophthalmic, treatment of, 372; endemic in North-East Bengal, 650; endemic, 845  
 Gold Coast Colony, rules for British practitioners in, 560  
 Goldsmith, Dr. G. H., cases of foreign body in the eye, 136  
 — Dr. G. P., a case of traumatic tetanus treated by antitoxin and morphine, recovery, 467  
 Goodchild, Mr. T. A., new aural and throat mirror, 1004  
 Goodwin, Surgeon-Captain T. H. J. C., recommended for Victoria Cross, 1634  
 Goodwyn, Mr. A. H., Sidmouth new sewerage works, 1827  
 Goody, Mr. E., new mechanical treatment for phthisis, 1760  
 Gordon, Dr., on appendicitis, 949; intrapelvic tuberculosis, 1150  
 — Mr. R., Sidmouth new sewerage works, 1827  
 — Dr. W., perforate septum ventriculus with infective endocarditis of the pulmonary valve, 1174  
 Gossage, Dr. A. M., the serum diagnosis of enteric fever, 430  
 Gosse, Mr. W., on medical defence, 1755  
 Gould, Mr. A. P., acute intestinal obstruction relieved by operation, death on the ninth day from intestinal toxæmia, 1795  
 — Dr. G. M., retinitis pigmentosa without the usual pigmentation, a report of two cases, 1060  
 Gowers, Sir W. R., dinner to, 1327; the neuron and its relation to disease, 1359; and the Society of Medical Phonographers, 1637  
 Grace, Mr. E. M., unqualified assistants, 1825  
 Graham, "Madame," trial of, 1881  
 — Dr. J. E., on rheumatoid arthritis, 1228; the symptoms and diagnosis of cholelithiasis, 1240  
 Grand Canary and Las Palmas as a health resort, 1189  
 Grant, Sir J., the bacteriology of pertussis, 1053  
 — Dr. J. D., chronic dry catarrh of the middle ear, 1722  
 — Dr. R. G., a "wrist easel," 814  
 — Dr. W. F., malformation of fetus, 263  
 Great Britain, cremation in, 595  
 — Yarmouth, the battle of the clubs at, 737  
 Greece, ancient, hospitals in, 173; rules for British practitioners in, 561  
 Greene, Dr. C. L., the feasibility of controlling pernicious vomiting by means of intubation of the larynx with a specially adapted tube, with a reference to the possible relief of otherwise intractable hiccough and pertussis, 1058  
 Greenwood, Mr. G., case of pulmonary carcinoma, 1337  
 Greer, Dr. W. J., oleum jecoris aselli, 124  
 Gregory, Dr. W. H., attempted poisoning by laudanum and antipyrin, 1090  
 Gregson, Mr. T. W., death of, 824  
 Grenada as a health resort, 658  
 Grosswell, Mr. G., a case of blood poisoning, 1087  
 Grey-Edwards, Dr. C., cases of follicular tonsillitis due to milk infection, 339  
 Griffin, Mr. W. W., hyperphoria and ocular headaches, 976  
 Griffith, Dr. A., hyperesthesia of nasal mucous membrane, 601  
 — Mr. P. G., foreign body in the orbit, 341  
 Griffiths, Dr. J., spontaneous aneurysm of the ulnar artery in the palm, excision of the aneurysm, recovery, 646  
 — Fleet-Surgeon R. S. P., acute yellow atrophy of the liver, 217  
 Grimley, Mr. S. S., the condition of the river Brent, 916  
 Grünbaum, Dr. A. S., some practical points in serum diagnosis, 1852  
 Grünbaum, Dr. F., Erklärung des Stotterns dessen Heilung und Verhütung, *rev.*, 655  
 "Guide" proposed to a health resort, 3225  
 Guild, Catholic medical in Rome, 1744  
 — of St. Luke and the training of medical missionaries, 381; and the State medical service at St. Paul's, 976, 1206  
 Gumma of the pituitary body, 1855  
 Gunshot injuries in the late Greco-Turkish war, 1789  
 — wound of the spinal cord, 961  
 Guthrie, Dr. L., a fractured femur from a case of fragilitas ossium, 1855  
 Gynaecology, surgical, in insanity, 769; Clinical and Operative, Dr. Schmelz, *rev.*, 1270; and obstetrics, some points of living interest to the teacher of, 1726  
 H.  
 Hackney, appointment of lady sanitary inspector for, 1684  
 Hadden, Dr. W. E., hyperpyrexia in scarlet fever, 1000  
 Haddon, Dr. J., hospital reform, 1458; an ethical section for the annual meeting at Edinburgh, 1755  
 Hæmatorrachis, a case of, 455  
 Hæmoglobin, intestinal absorption of, 672  
 Hæmophilus, two cases of, 1320  
 Hæmoptysis and cycling, 383  
 Hæmorrhage into the broad ligament complicating the puerperium, 219; pudendal in a newborn child, 944; anæst. partum, 1724  
 Hæmorrhages, medical, 1506  
 Hæmorrhoids, the clamp and cautery operation for, 1578  
 Hæmothorax, Traumatic, Contribution to the Study of, Dr. A. Figueiredo, *rev.*, 1003  
 Haffkine, M., instruction in the system of, 252; results of the inoculations of against plague, 384  
 Haines, Surgeon-Major H. A., "mental evolution," 1030  
 Hains, Dr. H., acquittal of, 1384; defence fund for, 1874  
 Hair, regrowth of in myxedema under treatment with thyroid tabloids, 274; treatment for loss of, 1134, 1222  
 Hair combs explosive, 1740  
 Hairdressers, cremation at the, 296  
 Hairs redundant, electrolysis for, 1307  
 Hairwashes, petroleum, 296, 360, 380  
 Hairy willow herb, poisoning caused by eating the, 707  
 Hales, Stephen, a pioneer in modern physiology, 1101  
 Halfpenny in the slot hot water, 832  
 — postage rate, the, 1135  
 Halifax, laying of foundation stone of new union hospital at, 1203  
 Hall, Dr. A., death of, 685  
 — Mr. B., presentation to, 1832  
 — Dr. H., on Mr. Horsley's candidature, 933  
 — Mr. J. S., death under chloroform, 1591  
 Halliburton, Professor, effects of chlorine and ureine on blood pressure, 672, 755  
 Halliday, Dr. A., action of certain drugs on the gastric secretion, 1716  
 Hallucinations and Illusions, Mr. E. Parish, *rev.*, 812  
 Hamburg, the sanitary condition of, 41  
 Hamilton, Mr. H., death of, 686  
 — Dr. J., menstruation in newborn baby, 756  
 Surgeon-Major General J. B., gets jubilee medal, 1353  
 — Mr. R. J., spontaneous expulsion of oth lenses in a child, 275  
 Hampstead Heath, the extension of, 926; the chalybeate spring on, 1493  
 Handbook of Medical Climatology, Dr. S. E. Solly, *rev.*, 654; of Anatomy for Art Students, Mr. A. Thomson, *rev.*, 708; of Diseases of the Eye, Dr. H. R. Swanzy, *rev.*, 1271; of Human Anatomy, the Skeleton, Skull, Dr. F. v. Spaë, 1345; the Sanitary Inspector's, Mr. A. Taylor, *rev.*, 1513  
 Handbooks, domestic, 322  
 Handford, Dr. H., value of mandatory measures in measles and whooping-cough, 765; on cholelithiasis, 1244  
 Hands and instruments, the disinfection of, 314, 373, 433  
 Hanging, Strangulation, Suffocation, Submersion, Dr. P. Brouardel, *rev.*, 1344  
 Hanks, Dr. H. T., on hyperemesis gravidarum, 1138  
 Harbitz, Dr. F., Om Endokardit dens pathologiske Anatomii og Aetiologi, *rev.*, 86  
 Harding, Mr. A. W., the pterygo-spinous foramen from a surgical standpoint, 1173  
 — Dr. W., the nursing examination of the Medico-Psychological Association, 617  
 Hardiman, Dr. R. S., medical book-keeping, 259  
 — Dr. W., an eight hours' working day for miners, 196; a strange conceit of chemists, 832  
 Hardy, Mr. H. N., the College of Physicians and hospital reform, 427; the choice of a direct representative on the General Medical Council, 740  
 Hardymon, Mr. G., localisation of puncture in a bicycle tyre, 851  
 Hardwär, the plague at 502, 752, 824; plague amongst the monkeys at, 1683  
 Hare, Dr. H. A., Practical Diagnosis: The Use of Symptoms in the Diagnosis of Disease, *rev.*, 222  
 Harelip, the treatment of with silver wire and Aveling's shot and coil, 654; cradle for, 657; operations for, 1859  
 Harle, Mr. T. W., death of, 686  
 Harris, Dr. W. J., bronchial and vesicular breathing, 1418  
 Harrogate, new baths at, 298; munificent offer for funds of Rawson Convalescent Home at, 320; as a health resort, 735; the water supply of, 1744  
 Hart, Dr. D. B., the morphology of the vaginal segment of the genital tract, 18; Manual of Gynaecology, *rev.*, 1094; intrapelvic tuberculosis, 1150  
 — Mr. E., the health of, 828, 922, 1112; vote of thanks to from Irish Medical Association, 1875  
 — Mrs. E., Picturesque Burma: Past and Present, *rev.*, 21  
 Hartley Wintney, the guardians of and their medical officer, 440  
 Hartridge, Mr. G., leaden pellet lodged in the eye, 1798  
 Harvey, Mr. E. H., notes on Bermuda as a winter resort, 1233  
 — William, as an embryologist, 1289; and his contemporaries, 1308  
 Haslam, Mr. H. C., pleomorphism of the colon bacillus, 1721  
 Haslar, new works at, 1462  
 Haslett, Dr. W. J. H., on melancholia, 779; the influence of physical upon mental disease, 781  
 Hastings, rabies at, 752; the water supply of, 1223; new isolation hospital for, 1446; sunshine at, 1770  
 Hatching bilharzia ova, 1338  
 Haughton, Rev. Dr. S., obituary notice of, 1376  
 Haultain, Dr. F. W. N., the culture diagnosis and serum treatment of puerperal fever, 17  
 Havelburg, Dr., on the bacteriology of yellow fever, 294  
 Havre, municipal school for nurses at, 1532  
 Hawkes, Dr. A. M., presentation to, 903  
 Hawkins-Ambler, Mr. G. A., the doctor's holiday, 186  
 Haworth, Dr. F. G., co-operation between School Boards and public health authorities, 1766  
 Hawthorne, Dr. C. O., complimentary dinner to, 1544  
 Haydon, Dr. E. W., the remuneration of the general practitioner, 681  
 Hayle, the sanitary condition of, 940  
 Hayman, Mr. S. A., spinal meningitis, 1610  
 Head, a case of injury to, affecting the cranial nerves, 401; description of conditions found in, 2 years after ligation of all the carotid arteries, jugular veins, etc., on the left side, 465  
 Headaches, ocular, and hyperphoria, 976  
 Health resorts, notes on, 90, 362, 407, 611, 658, 659, 735, 1095, 1189, 1438, 1591; books on, 443; climatic, of Canada, 1442; choice of hotels at, 1467

Heard, Dr. R. L., depressing effects of sodium salicylate, 1771  
Hearder, Dr. F. P., alleged blundering of asylum officials, 844  
Hearing, Functional Testing of the Human Organ of, Dr. F. Bezold, *rev.*, 597  
Heart, a new theory of the cause of the first sound of the, 95, 184; the, chloroform and, 131, 1496; Schott's treatment of disease of, 216; Disease of and the Nauheim Treatment, Dr. J. Kidd, *rev.*, 278; wound of, 469; output of the, 610; the mammalian, 610, 882; effect of various substances on the, 610; the investigation of some of the disorders of the, 1090; prognosis in disease of the, 1327; malformation of the, 1502; failure of in arterio-sclerotic, 1715; books on affections of the, 1886  
— beat, discussion on, 880; of the embryo of fundulus magellanus, action of certain chemical salts on, 1484  
Heath, Dr. A. D., multiple cutaneous gangrene of the scalp in a cachectic child, 13  
— Mr. C., the teaching of surgery, 641; on traumatic aneurysm, 950; on spinal curvature, 961; on cancer of the rectum, 1069  
— Dr. T. H., presentation to, 1862  
Heaton, Mr. G., two cases of strangulated hernia with continuance of symptoms after apparent reduction by taxis, herniotomy, cure, 799; excision of elbow joint for tuberculous disease, 164  
Hebb, Dr. R. G., The Westminster Hospital Reports, *rev.*, 140  
Heddle, Dr. M. F., death of, 1617  
Hedley, Dr. W. S., Practical Muscle Testing and the Treatment of Muscular Atrophies, *rev.*, 1271; Current from the Main: the Medical Employment of Electric Lighting Currents, *rev.*, 1513  
Heidenhain, Professor R., obituary notice of, 1215  
Height estimation of in assurance examinations, 1835  
Hely, Mrs. A. A., gets Royal Red Cross, 1018  
Hemiplegia, functional, following embolism, 706; in a young child, 1263  
Hemp, Indian, properties of, 691  
Henderson, Dr. T. R., pudendal haemorrhage in a newborn child, 944  
Hendley, Surgeon-Major H., typhoid fever amongst the natives of India, 1762  
— Brigade Surgeon-Lieutenant-Colonel T. H., treatment of meningocele, hydrocele, etc., 1259  
Henoch's purpura, 1800  
Henrotin, Dr. F., the operation of choice in septic pelvic disease, with especial reference to the early vaginal incision, 1159  
Henry III of France, the death of, 1204  
Hepatic. *See Liver.*  
Herbert, Surgeon-Captain, cataract extraction, 1506  
Heredity, a factor in the etiology of insanity, 774; alleged of, consumption, 831; and the development of myopia, 1505  
Herman, Dr. G. E., pruritis vulvae, 1507  
Herne Bay, proposed convalescent home at, 1204; laying of foundation stone of convalescent home at, 1634  
Hernia, of the bladder, 54; inguinal, the figure of eight, stricture in the radical cure of, 215; strangulated, herniotomy of, 799; strangulated, in an infant 5 months old, 811; ventral, and umbilical in the same patient, 950; strangulated, a sequel to stricture of the intestine, *ib.*; some unusual forms of, 668; radical cure of, 1101; of abdominal cicatrix and operations for its cure, 1576; radical cure of, injury to the bladder, formation of phosphatic calculi, lithotomy, recovery, 1796  
Herniotomy for strangulated hernia, 799  
Heroes, non-combatant, 1810  
Herpes following popliteal aneurysm, 1719  
— zoster of the face with paralysis, 466  
Herringham, Dr. W. P., hospital reform, 1458, 1535, 1827  
Herter, Dr. C. A., certain relations between bacterial activity in the intestine and indican in the urine, 1847  
Hervieux, Dr. H., the treatment of syphilis, 1314  
Heubner, Dr. O., Ueber chronische Nephritis und Albuminurie in Kindesalter, *rev.*, 1345  
Hewer, Mr. L., Our Baby, for Mothers and Nurses, *rev.*, 1271  
Hewetson, Mr. H. B., Localisation of Headache and Sick Headache, *rev.*, 1512  
Hewitt, Dr. F. W., The Administration of Nitrous Oxide and Oxygen for Dental Operations, *rev.*, 141  
Hey, Mr. C. E. M., gets diploma of honour, etc., of the Société Nationale de Sauvetage de France, 346

Hickman, Mr. H. R. B., a surgical lamp, 815  
Hicks, Dr. J. Braxton, obituary notice of, 618  
Hill, Dr. L., the causation of chloroform syncope, 312; a simple and accurate form of sphygmometer or arterial pressure gauge contrived for clinical use, 904; chloroform of the heart, 1496  
Hillier, Dr. A. P., notes on the climate, hygiene, diseases, and medical life in Johannesburg, 353  
Hills, Mr. W., pharmacy thirty years ago and now, 1280; gets Jubilee medal, 1305  
Hinchcliffe, Dr. M., the will of, 358  
Hingston, Mr. A., death of, 1300  
— Sir W., on appendicitis, 948  
Hip-joint, treatment of tuberculous disease of in its early stages, 395; congenital dislocation of the, 1324  
Hippocrates in the light of recent researches, 1749  
Hillock, Mr. R. W., rigidity of the os uteri treated by hot baths, 1639  
Hobbs, Dr. A. T., surgical gynaecology in insanity, 769, 774  
Hobday, Professor F., extirpation of the ovaries as a cure for cancer, 185; an apparatus for administering anaesthetics and ether volatile vapours, 347; the administration of chloroform, 1113  
Hobhouse, Dr. E., functional hemiplegia simulating embolism, 706  
Hodenpyle, Dr. E., occurrence of typhoid fever without characteristic lesions of the small intestine, 1850  
Hodgkin's disease. *See Disease.*  
Hodgson, Dr. R. H., pneumatic vaginal speculum, 1183  
— Mr. T. M., death of, 686  
Hoffmeister, Messrs., appointed surgeons-apothecary to the Queen, 505  
Hofman, Dr. E. R. v., Atlas der gerichtlichen Medizin, *rev.*, 1187  
Hogarth, Mr. R. G., remarks on the treatment of cut throat, 462  
Holiday, the doctor's, 186, 259  
— homes for town children, 51  
Holidays and congresses, 921  
Holland, rules for British practitioners in, 561  
Holland, Mr. C. T., radiographs of shot in orbit, 1577  
Hollis, Mr. H., a case of tetanus treated with antitoxin, 652  
Holmgren, Professor A. F., obituary notice of, 748  
Hollowell, Mr. E. B., two cases of tuberculous disease of the knee-joint treated by iodoform injections, recovery, 397  
Homo bread, 141  
Homeopaths, consultation with, 1825  
Hong Kong, Prevalence of Bubonic Plague in the Colony during the Years 1895 and 1896, Dr. J. M. Atkinson, *rev.*, 345; correspondence from, 430; bubonic plague in, *ib.*; the Victoria Hospital for Women and Children, *ib.*; new principal civil medical officer, *ib.*; free from plague this year, *ib.*; sanitarium for, 817; and the Venice plague convention, 1447  
Honours, jubilee, 37  
Hoole, Mr. E. T., and the Nottingham Victoria Hospital, 414, 1884  
Hope, Mr. A., the challenge of, 1277, 1535, 1614  
— Mr. E. W., ice cream and typhoid fever, 1578  
Hopeine, 1687  
Hop-pickers and water supplies, 1529  
Horder, Mr. T. G., medical defence, 187, 240; Hospital Reform Association, 374, 1536; proposed conference on hospital reform, 498, 680; on Mr. Horsley's candidature for the General Medical Council, 839; proposal for Ethical Section at annual meeting of British Medical Association, 1614; on hospital reform, 1754, 1878  
Horne, Dr. W. J., eucaine as a local anaesthetic in the surgery of the throat, nose, and ear, 1566  
Horrocks, Mr. W. H., on club foot, 1509  
Horse, specimens of glands from the, 1721  
Horsley, Mr. V., address of as candidate for General Medical Council, 835; meeting at Manchester in aid of candidature of, *ib.*; the candidature of for the General Medical Council, 933, 1021; nomination of, 938; meetings at Norwich, etc., 1020; letter of thanks from, 1210; appointed Crown member of the Senate of the University of London, 1443; the Medical Acts of Parliament—as they are and as they ought to be, 1748  
Horwich, Mr. D., rupture of genital canal, pro-lapse of intestines, exhaustion, death, 15  
Hospital, proposed, for South London, 299  
Hospital, Addenbrooke's, Cambridge, changes in staff, etc., at, 1009; the assistant surgeoncy at, 1217, 1541  
— Birmingham New General, commencement of work at, 1201  
— Boston City, Medical and Surgical Reports of the, 657  
— Charing Cross, founding of Augustus Harris bed at, 467; the medical school of, 546; fees at, 539; opening of winter session at, 554; opening address at, 989; entrance scholarships at, 1005; annual dinner, 1272; subscription to special appeal fund of, 1544; the medical school of and the proposed teaching university for London, 1871  
— for Children, East London, instruction at, 540  
— for Children, North-Eastern, instruction at, 541  
— City of Dublin, appointments at, 538  
— City of London for Diseases of the Chest, instruction at, 542  
— for Consumption and Diseases of the Chest, Brompton, instruction at, 541  
— for Consumption and Diseases of the Chest, Edinburgh, instruction at, 543  
— Dental, Edinburgh, instruction at, 564  
— Dental of London, conversazione and distribution of prizes at, 273; instruction at, 563; annual dinner of, 1767  
— Devon and Exeter, instruction at, 543; instruction in dentistry at, 565  
— Edinburgh City for Infectious Disease, instruction at, 543  
— Eye, Ear, and Throat, Cork, opening of new buildings of, 1832  
— Eye, Ear, and Throat, Ulster, new wing for, 1542  
— French Field in the Turco-Greek war, 1617  
— Great Northern Central, instruction at, 540  
— Grosvenor for Women and Children, opening of new buildings of, 413  
— Guy's, the medical school of, 527; fees at, 539, 692; opening of winter session at, 554; instruction in dentistry at, 564; munificent gift to, 1003; entrance scholarships at, 1005; the medical school of and the proposed teaching university for London, 1871  
— Herbert, registrar at the, 502  
— Huntingdon County, renovation of, 1735  
— Huntly Cottage, the managing committee and medical staff of, 666  
— Jervis Street, Dublin, appointments at, 538  
— Jessop, for Diseases of Women, Sheffield, instruction at, 543  
— Kent and Canterbury, instruction at, 543  
— Lincoln County, instruction at, 544  
— London, distribution of prizes at medical school of, 380; the medical school of, 528; fees at, 539; opening of winter session at, 554; annual report of governors of, 688  
— London Temperance, instruction at, 540  
— Lying-in, Burnside, notes on methods and results in, 1156  
— Lying-in, Queen Charlotte's, instruction at, 541  
— Mater Misericordiae, Dublin, appointments at, 538  
— Meath, Dublin, introductory address at, 1115  
— Mercer's, Dublin, the governors and the medical staff of, 54, 98, 478  
— Middlesex, laying foundation stone of new wing of, 218; the medical school of, 528; fees at, 539, 1623; opening of winter session at, 555; new buildings at, 565, 688; opening address at, 1005; amalgamation of hospital and school at, 1005; the medical school of and the proposed teaching university for London, 1871  
— National Dental, instruction at, 563  
— National for the Paralysed and Epileptic, instruction at, 542; lectures at, 1036  
— New Park, opening of, 167  
— New for Women, surgery at in 1896, 338  
— Norfolk and Norwich, instruction at, 544  
— Northern Liverpool, instruction at, 542; dinner at, 1884  
— North-West London, instruction at, 540  
— Nottingham General, instruction at, 544  
— for the Paralysed and Epileptic, opening address at, 1359  
— See Hospitals, abuse of

Hospital, Reigate and Redhill College, annual report of, 1464  
 — Rotunda, Dublin, the operating theatre at, 74; instruction, etc., at, 540  
 — Royal Albert, Devonport, instruction at, 543  
 — Royal, Belfast, opening of winter session at, 1293  
 — Royal, Bethlehem, instruction at, 541  
 — Royal Ear, Frith Street, instruction at, 542  
 — Royal Edinburgh for Sick Children, the resident physicianships at, 1035, 1040  
 — Royal Eye, Manchester, instruction at, 542  
 — Royal Eye, Southwark, instruction at, 541  
 — Royal Hants County, instruction at, 544  
 — Royal London Ophthalmic, instruction at, 541  
 — Royal Maternity and Simpson Memorial, Edinburgh, instruction at, 540  
 — Royal Portsmouth, instruction at, 544  
 — Royal, Salford, annual meeting of governors of, 1542  
 — Royal, for Sick Children, Edinburgh, instruction at, 543  
 — Royal Southern, Liverpool, instruction at, 542  
 — Royal United, Bath, instruction at, 543  
 — Royal Victoria, Belfast, funds and site for, 504  
 — Royal Westminster Ophthalmic, instruction at, 541  
 — St. Bartholomew's, the medical school of, 526; fees at, 539; opening of winter session at, 554; annual dinner of, 1005; Statistical Tables of the Patients under Treatment at in 1896, *rev.* 1862  
 — St. George's, the medical school of, 527; fees at, 539; opening of winter session at, 554; changes in medical staff at, 565; introductory address at, 585; entrance scholarships at, 1204; distribution of prizes, etc., at, 1360; the out-patient department at, 1528; the medical school of and the proposed teaching university for London, 1817  
 — St. John's for Diseases of the Skin, introduction at, 542; introductory address at, 1006; entrance scholarships, *ib.*; annual dinner, *ib.*  
 — St. Mary's, the medical school of, 521; fees at, 539; opening of winter session at, 554; new buildings at, 565; reopening of, 1013; formation of Freemasons' Lodge in connection with, 1544; and the Willemeden Board of Guardians, 1666; the medical school of and the proposed teaching university for London, 1817  
 — St. Mary's for Diseases of Women, Manchester, instruction at, 542  
 — St. Peter's for Stone, etc., instruction at, 542  
 — St. Thomas's, the medical school of, 520; fees at, 539; opening of winter session at, 554; changes in staff of, 565; entrance scholarships at, 1008; annual dinner, *ib.*; the medical school of and the proposed teaching university for London, 1817  
 — St. Vincent's, Dublin, instruction at, 539; introductory address at, 1009, 1009  
 — Seamen's, titles of visiting physicians, etc., at, 1835  
 — Seamen's, Cardiff, the proposed re-building of, 1036  
 — Seamen's, Greenwich, instruction at, 540; beri-beri and the register of, 1224  
 — for Sick Children, Belfast, changes in staff at, 1544  
 — for Sick Children, Great Ormond Street, instruction at, 540  
 — for Sick Children, Newcastle, instruction at, 543  
 — for Sick Children, Pendlebury, instruction at, 542  
 — Sir Patrick Dun's, appointments at, 538  
 — for Skin and Urinary Diseases, Birmingham and Midland instruction at, 543  
 — Stanley, Liverpool, opening of new beds at, 373, 380  
 — Steevens's, Dublin, instruction at, 538  
 — Sussex County, Brighton, instruction at, 543  
 — Swansea, instruction at, 544  
 — Throat, Golden Square, the building fund of, 918  
 — Throat and Ear, Central London, instruction at, 54  
 — University College, appeal for funds for, 752; typhoid fever at, 1116, 1202, 1286, 1357; the closure of beds at, 1767; the medical school of and the proposed teaching university for London, 1817  
 — Hospital, West London, Hammersmith, instruction at, 540; collection for, 1620  
 — Westminster, the Reports of Dr. R. G. Hebb, *rev.*, 140; the medical school of, 530; fees at, 539; opening of winter session at, 555; entrance scholarships, etc., at, 1008; endowment of new bed at, 1305; the medical school of and the proposed teaching university for London, 1817  
 — Wolverhampton and Staffordshire General, instruction at, 544  
 — for Women, Soho Square, instruction at, 541  
 — for Women and Children, Manchester clinical instruction at, 543  
 — York County, laying of foundation stone of, 918  
 — and Dispensary, Scarborough, installation of electric light at, 1305  
 Hospitals, workhouse, assistance at operations in, 101; in ancient Greece, 173; ventilation in, 328  
 — State-aided, 415; our wasted, the editor of "Belgravian" on, 667; the abuse of, 745, 842, 939, 1125, 1458, 1467, 1535, 1613, 1754, 1805, 1827, 1878; portable, 830; meeting at St. Martin's Hall for reform of, 1272; general, treatment of cases of infectious disease in, 1515, 1812; metropolitan, and workmen, 1521; attendances of members of honorary staff of, 1542; metropolitan, small subscribers to, 1612, 1677; resident medical officers of, male and female, 1770; embarrassments of, 1805; isolation, remuneration for medical attendance at, 1883  
 — Adelaide, medical and surgical, instruction at, 538  
 — of the Metropolitan Asylums Board, instruction at, 541  
 — Richmond, Whitworth, and Hardwicke, instruction at, 538  
 Hostel, the Nurses' objects etc., of, 1385  
 Hotels at health resorts, choice of, 1467  
 Hough, Dr. G. de N., the fauna of dead bodies with special reference to diptera, 1853  
 Houses, ventilation in, 328; dwelling, the warming of, 1886  
 Howden, Dr. J. C., death of, 685  
 Howell, Dr. W. H., on the heart beat, 880  
 Howlett, Mr. E. H., a case of typhoid fever, serum diagnosis and serum treatment, recovery, 81  
 Hoyton, Mr. W. J., use of the forceps in midwifery, 1125  
 Huber, Dr. G. C., on the heart beat, 881; on the sympathetic ganglia of vertebrates, 881, 1398  
 Hubert, Mr. W. A., favourable results in obstruction of the trachea by diphtherial membrane from the introduction of creased oil through the tracheotomy tube, 1504  
 Huddersfield, notification of cases in, 1219  
 Hürthle, Professor K., resistance of vascular channels of organs, 610  
 Hughes, Professor A., banquet to at Cardiff, 1005  
 — Mr. John, obituary notice of, 1378  
 Hugo, Surgeon-Lieutenant J. H., gallant conduct of, 728, 829  
 Hull, proposed enlargement of sanatorium at, 1012; abolishing of charges at isolation hospital at, 1868  
 Humphreys, Mr. N. A., vaccination statistics, 679  
 Hunter, John, clinical records of paper of on intussusception, 300  
 — John and William, proposed memorial to, 165  
 — Dr. W., on the causation of cholelithiasis, 1235; gumma of the pituitary body, 1855  
 — Dr. W. K., microscopic appearances of the spinal cord in tetanus, 333  
 Huntly, the notification of infectious diseases at, 504  
 Hutchinson, Mr. J., founds museum at Selby, 1620  
 Huxley, Professor, the memorial to, 1036  
 Hydatids, of liver, four cases of, 398; case of simulating typhilitis, operation, recovery, 811  
 Hyde, Dr. J. N., idiopathic multiple pigmented sarcoma, 866; non-surgical treatment of boils, etc., 870; the treatment of syphilis, 1314  
 Hyderabad, the health officer at, 621  
 Hydroceles, painless cure of by carbolic acid injection, 906; treatment of, 1259  
 Hygiene. Practical Domestic, Surgeon-Colonel J. L. Notter and Surgeon-Major R. H. Firth, *rev.*, 812; and Public Health, Dr. L. C. Parkes, *rev.*, 1269; School, 1812  
 Hyoscine, acute incipient mania arrested by, 652; the employment of hypodermically, 852  
 Hyperaesthesia of nasal mucous membrane, 601  
 Hyperemesis gravidarum, discussion on at Montreal, 1137; treatment of, 1375  
 Hyperphoria and ocular headaches, 976  
 Hysterectomy, abdominal, for fibro-cyst of uterus, recovery, 708; notes of six cases of, 1261; abdominal, for myoma of the uterus, 1423, 1441, 1509  
 Hysteria and education, 496  
 Hysteria-epilepsy, simulating "status epilepticus," 464; with rapidly fatal issue, 1572  
 Hysteropexy. *See* Ventrifixation

Ice cream and enteric fever 1578; poisoning by, 1684  
 — creams, the control of vendors of, 728  
 Ices, poisonous, 236  
 Ichthyosis, thyroid extract in, 1334  
 Ideas, "selection" of, 1126  
 Idiot, home for, 754, 943  
 Ignorance, culpable, 374  
 Illeum, strangulation of a loop through a hole in the mesentery, with a Meckel's diverticulum attached, 975; strangulated through a congenital mesenteric hole, 1267; chronic intestinal obstruction due to a tumour of the, 1578  
 Ilfracombe as a health resort, 1189  
 Imbache, home for, 443  
 Imbach, Dr. F., registration of trade accidents, 80  
 Immunity, acquired, 1630; artificial in tuberculosis, 1849  
 Imprisonment and insanity, 675  
 Ince, Dr. J., on Mr. Horsley's candidature for the General Medical Council, 839  
 Incision, exploratory and drainage versus paracentesis, 79  
 Income-tax, refund of 627, 691; and Poor-law salary, 1684; assessment to, 1888  
 Incubators, infant, 348  
 India, enteric fever in, 98; bacteriological research laboratory for 172, 384; the cholera in 1895, revised rules, 227; supposed immunity of natives of to enteric fever, 329, 359, 499, 1214, 1762; the insane in, 403; the North-Western Provinces of, their History, Ethnology, and Administration, Mr. W. Crooke, *rev.*, 472; Remarks on the Uses of Some of the Bazaar Medicines and Common Medical Plants of, Dr. E. J. Waring, *rev.*, 475; camping out for cholera in, 482; the government of and the plague, 497; fighting on the frontier of, 502; North-Western and Central, poisoning in, 504; bacteriology in, *ib.*; nursing homes for officers in, *ib.*; Pasteur Institute for, 605, 830; the frontier operations in, 687; why are general practitioners deprived of Government appointments in? 601; medical arrangements for the expedition to the frontier of, 750, 1461; medical registration in, 752; hospital assistants in, 824; the casualties at the front in, 847, 1301; plague in, 918, 1015, 1116, 1200, 1283, 1383, 1451; surgery on the frontier of, 1287; decrease of liquor shops in, 1363; sanitary reports in, *ib.*; the health of the troops on the frontier of, 1443; bacteriologist and sanitary officer in, 1444; the frontier rising in, 1461; the wounded and transport on the frontier of, 1462; enteric fever on the frontier of, *ib.*; discipline in military hospitals in, 1539; surgical notes from the frontier of, 1587; casualties at the frontier of, 1620, 1880; special plague service in, 1672; books for the wounded in, 1804  
 Indican in the urine and bacterial activity in the intestine, relations between, 1847  
 Induction and Its Association with the History and Progress of Medicine, Dr. W. F. Cleveland, *rev.*, 1581  
 — Coil (The) in Practical Work, including Roentgen Rays, Mr. L. Wright, *rev.*, 278  
 Inebriates, restraint of, 123; rate-aided retreats for, 924  
 Inebriety, new German law on, 381; in Roumania, 508; some new clinical studies of, 782  
 Infancy, acute suppurative middle-ear disease in, 214  
 Infant, newborn, menstruation in an, 654, 655, 1039, 1307; 5 months old, strangulated hernia in an, 811; newborn, spontaneous amputation of both lower extremities in an, 1179  
 Infants, bacteriology of simple posterior basic meningitis in, 1183; and railway travelling, 1532  
 Infirmary for Children, Liverpool, instruction at, 542

Infirmary, Eye, Glasgow, instruction at, 544, 755; the surgical staff at, 1036  
 — Eye, West of England, instruction at, 544  
 — Eye and Ear, Myrtle Street, Liverpool, instruction at, 542  
 — Eye, Ear, and Throat, Edinburgh, instruction at, 543  
 — Glasgow, Western. See Infirmary, Western  
 — Gloucester General, etc., instruction at, 544  
 — Northampton General, instruction at, 544  
 — North Staffordshire, etc., instruction at, 544  
 — Royal, Aberdeen, changes in staff of, 724; opening of new block of buildings at, 1355  
 — Royal Derbyshire, instruction at, 543  
 — Royal Dundee, the new charter for, 1447  
 — Royal, Edinburgh, the surgeoncy of, 61; changes in staff at, 232, 1739; fees, etc., at, 535; changes in staff of, 1036; new outdoor surgical department for, 1524  
 — Royal, Glasgow, instruction in dentistry at, 564  
 — Royal, Isle of Wight, laying of foundation stone of, 602  
 — Royal, Newcastle-on-Tyne, history, etc., of, 613; new site for, 1357, 1740, 1865  
 — Royal, Sheffield General, a Brief Sketch of a Century's Work, Mr. J. D. Leader, rev., 1343; the centenary of, 1361  
 — Royal, South Hants, instruction at, 544  
 — Staffordshire General, instruction at, 544  
 — Western Glasgow, instruction at, 544; the managers of and Dr. Macewen, 1208, 1291, 1366, 1449, 1608, 1818; changes of staff at, 1285 and Dispensary, Bradford, instruction at, 543  
 Influenza and jaundice, 81; at Merv, 752  
 Ingalls, Dr. E. F., the relation of nasal disease to pulmonary tuberculosis, 1394  
 Injections, subcutaneous, intramuscular and endovenous, 1611  
 Inmekins, typhus fever at, 104  
 Inquests, medical evidence at, 105; a year's in London, 624; powers of coroners as to witnesses at, 1618, 1878; medical witness at, 105; coroners and, 1881  
 Insane, the, in India, 403; tuberculosis in the, 105; in Private Dwellings and Licensed Houses, Dr. J. F. Sutherland, rev., 709; the Care of Dr. A. Erlenmeyer, rev., 709; glycouria in the, 1259; active treatment in general paralysis of, 1407; aid for after discharge from asylums, 1611  
 Insanity and the test of criminal responsibility, 40; among negroes in the United States, 668; and imprisonment, 675; the etiological relation of pelvic disease in women to, 766; surgical gynaecology in, 769; the after-effects of surgical procedure on the generative organs of females for the relief of, 770; heredity a factor in the etiology of, 774; the relation of to the State, 783; the pathological study of, 109  
 Insomnia, the treatment of, 853; cause of, 1125  
 Inspector, a sanitary, admonished, 1219  
 Inspectors, sanitary, the powers of, 829, 1018; and vital statistics, 926  
 Institute, Army Veterinary Vaccine, statistics as to, 1830  
 — British, of Preventive Medicine, laboratory instruction at, 553; the Transactions of, 1871  
 — of Dental Technology, description of, 627  
 — Pasteur, for India, 605  
 — Queen Victoria Jubilee for Nurses, annual report of Scottish branch of, 1779  
 — Sanitary, celebration of anniversary of, 102; the approaching congress of, 665; the president's address at, 731, 741; river pollution, 744; sanitation in the Victorian era, 742; poisoning from canned foods, 105; ventilation of workshops, 105; the health work of women, 105; lectures at, 752; pollution of water supplies by encampments of hop-pickers, casual workers, tramps, etc., 1529; results of examinations of, 1832  
 Institution, Medical, Liverpool, meeting of, 1113; ileum strangulated through a congenital mesenteric hole, 1267; excision of the kidney for primary carcinoma, 105; the typhoid serum reaction in doubtful cases of fever, 105; the value of antitoxin in the treatment of diphtheria, 105; dissecting aortic aneurysm, 1426; fatal case of thyroidectomy, 1427; nitrogen secretion in sporadic cretinism, 105; immediate correction of deformity in Pott's disease, 105; mouse favus, 1508; villous tumours of the bladder, 105; growth in the vas deferens, 105; sensory organs of voluntary muscles, 105; specimens, 1500; radiographs of shot in orbit, 1577; thyrotomy for epithelioma of larynx, 105; nine operations on the liver, 105; ice cream and typhoid fever, 1578; the clamp and cautery operation for haemorrhoids, 105; changes in the spinal cord in pernicious anaemia, 1801; specimens, etc., 105; traumatic cyst of iris, 1858; note on chloroform for the removal of tonsils, 105; operations for cleft palate and hare-lip, 1859; pneumothorax, 105  
 Institution, Royal, the Fullerian professorship of physiology at, 180  
 Intemperance, cirrhosis of liver and, 1284  
 Intestine, absorption of isotonic fluids from the, 610; small, obstruction of by gall stones, 796, 1258; stricture of the, a sequel of strangulated hernia, 950; removal of nearly 8 feet of, 966; bacterial activity in the and indican in the urine, relations between, 1847; small, occurrence of typhoid fever without characteristic lesions of the, 1850  
 Intubation of the larynx in pernicious vomiting, 1038; in acute syphilitic stenosis of the larynx, 1559  
 Intussusception, gangrenous, enterectomy by Maunsell's method for, 83; notes on 15 cases of, 1335; case of, 1610; fifteen consecutive cases of, 1796  
 Iodide of potassium, prolonged administration of, 906  
 Iodoform, tuberculous disease of the knee-joint treated by, 397; substitutes for, 734; in surgical tuberculosis, 1339  
 Ireland, pauper nurses in, 104, 164, 1602; abolition of pauper nursing in, 924; prevalence of fowl enteritis in, 1224; nursing in the work-houses of, 1863, 1872  
 Iris, traumatic cyst of, 1858  
 Isaac, Dr. W. A., tetanus complicated by typhoid symptoms and mania, recovery, 400  
 Isleworth, laying of foundation stone for new hospital at, 300  
 Islington, school children and infectious diseases in, 623  
 Italy, foreign practice in, 100, 311; founding hospitals in, 311; rules for British practitioners in, 561; foundlings and founding hospitals in, 1004; founding hospitals and syphilis in, 1123; English doctors in, 1446; the General Medical Council and British medical practitioners in, 1748

J.  
 Jack, Miss F. B., The Art of Cooking for Invalids, rev., 475  
 Jackson, Mr. A., puerperal septicæmia, 1340  
 — Mr. G., address of as candidate for General Medical Council, 739; retirement of, 931; letter of to Dr. Glover, 1440; the Royal College of Surgeons of England and medical aid associations, 1609  
 — Dr. G. T., a case of idiopathic multiple pigmented sarcoma (Kaposi type), 866  
 — Mr. T., a stricture dilator, 710  
 — Mr. T. V., large parotid tumour, 1212; renal calculi, 105  
 Jacobi, Dr. A., the dietetic treatment of diabetes, 1043; on rheumatoid arthritis, 1228  
 Jakob, Dr. C., An Atlas of the Normal and Pathological Nervous Systems, rev., 908  
 Jallard, Mr. W. H., appointed deputy lieutenant, 1493  
 Jamaica as a health resort, 1097; yellow fever in, 1200, 1357, 1447, 1605, 1688; health matters in, 1809; quarantine for yellow fever at, 1884  
 James, Dr. A., a case of very acute ulcerative endocarditis with diffused suppurative foci, 1640  
 — Mr. J. B., Rheumatism and its Treatment by the Use of the Percusso-Punctator, rev., 814  
 Jamieson, Surgeon-General, the prevention of enteric fever, 1793  
 — Surgeon-Major D., death of, 315  
 — Surgeon-Major-General J., appointed honorary surgeon to the Queen, 1864  
 Jamieson, Dr. W. A., eczema palmarum and plantare, 1724  
 Japan, the study of natural science in, 421; vaccination in, 1006, 1374  
 Jar, automatic disinfectant, 348  
 Jardine, Dr. R., menstruation in a newborn infant, 652, 1507; superfection (?) 745; antepartum haemorrhage, 1724  
 Jarrott, Mr. A. K., measles, rash appearing on the first day, 1087  
 Jars for pathological specimens, 942  
 Jaundice, and influenza, 81; obstructive, cholecystotomy for, 1121  
 Jeddah, the cessation of plague at, 419  
 Jellett, Dr. H., A Short Practice of Midwifery, embodying the Treatment adopted at the Rotunda Hospital, Dublin, rev., 21; the use of the forceps in midwifery, 746  
 Jelloids, red bone marrow, 407  
 Jennings, Dr. C. E., the safe administration of anaesthetics, 94; professional confidence, 1688  
 Jersey, adoption of the provisions of the Pharmacy Act in, 417  
 Jervis, Surgeon-Major P., thyroid gland substance in obesity, 904  
 Jessop, Dr. C. M., the supposed organic poisonous matter in expired air, 64, 323; the treatment of pruritus, 443; waste of meat, 566; treatment of hard corns, 1547  
 — Dr. E., small subscribers to metropolitan hospitals, 1677  
 — Mr. T. R., dinner to, 1110; carcinoma of pylorus, pylorectomy, 1632; consultation with homeopaths, 1825  
 Jewett, Dr. C., on hyperemesis gravidarum, 1138  
 Johannesburg, notes on the climate, hygiene, and medical life of, 352  
 Johnson, Mr. R., the medical student, his work and its object, 977  
 Johnson-Alloway, Dr. T., gauze packing of the pelvis in gynaecological operations, 1104  
 Johnston, Dr. A., value of mandatory measures in measles in whooping-cough, 764  
 — Dr. D., a patent pneumatic medicator and injector, 1003  
 — Dr. J. M., disinfection by vapour of phenols, 99  
 — Dr. W., the serum diagnosis of typhoid fever, 1665; notes on household disinfection by formaldehyde, 1843  
 Johnstone, Mr. G. W., death of, 619  
 Jones, Dr. A. J., on haemophilia, 1230  
 — Dr. B., guardians and medical fees, 189  
 — Dr. E. L., cancer houses, 1760  
 — Mr. H. E., combined stethoscope, mirror, and ear speculum, 1272; risks and complications in operations in mastoid disease, 1553  
 — Dr. H. M., the Cork and South of Ireland Branch, 52  
 — Dr. J. E., appointed deputy lieutenant for Merionethshire, 320, 363  
 — Dr. J. W., a tricycle bag carrier, 1271  
 — Mr. R., on the immediate reduction of the angular deformity in spinal caries, 336; immediate correction of deformity in Pott's disease, 1427; angular deformity of the spine treated by immediate reduction, 1501, 1645  
 — Mr. T., teaching of infectious disease in Manchester, 1030  
 — Mr. T. W. C., the after-effects of turbinotomy (spokeshaving), 1390  
 JOURNAL, BRITISH MEDICAL, the demands of and the barrack schools, 166; the Queen and the Commemoration Number of the, 287; and the British Medical Association in 1897, 1661  
 Jubilee, the, and Scotland, 40; at Cape Town, 505 — celebrations, 257  
 — honours, 37  
 Judge, Mr. M., on the powers of sanitary inspectors, 1018

K.  
 Kanthack, Dr. A. A., appointed professor of pathology at Cambridge, 1446; on the prevention of enteric fever, 1794  
 Kauffmann, Dr. O. J., syphilitic lesions, 1647  
 Keegan, Brigade-Surgeon-Lieutenant-Colonel, an improved pattern of "giant" lithotrile, 23  
 Keen, Dr. W. W., strangulation of a loop of the ileum through a hole in the mesentery, 976; on cancer of the rectum, 1060  
 Keith, Mr. S., dysmenorrhœa, 1183  
 Kelloo, Dr. J. N., a new dynamometer, 610  
 Kelsch, Mr., the pathogenicity of dust, 1114  
 Kelynack, Dr. T. N., on Meckel's diverticulum, 450; syphilitic cirrhosis of kidney, 1800; renal growths, 183  
 Kemp, Dr. G. T., nitrous oxide anaesthesia, 1480  
 Kennedy, Dr. D. S., the case of, 233  
 Kenny, Mr. M. J., Diet Chart and Alimentary Index, rev., 475  
 Ker, Dr. C. B., the serum diagnosis of typhoid fever, 1723  
 Kerr, Mr. Commissioner, on the powers of sanitary inspectors, 829, 1018  
 — Dr. J., on school hygiene, 1812  
 Kershaw, Mr. R., the attendances of members of the honorary staff, 1542  
 Ketch, Dr., on spinal curvature, 961  
 Kettering, opening of new general hospital at, 1356  
 Kettle v. Brisbane, 162

Khudaganji, the action at in 1858, 48  
Khushgarh, transport arrangements and medical aid at, 130  
Kidd, Dr. J., Heart Disease and the Nauheim Treatment, *rev.*, 278  
— Dr. J. W., some points of living interest to the teacher of gynaecology and obstetrics, 1726  
Kidney, dislocation of the, 965; movable, the relationship of to renal colic associated with transitory hydronephrosis and intermittent albuminuria, 971; exposed, the Roentgen rays and fluoroscope as a means of detecting small, deeply placed stones in, 1075; absence of one, 1260; excision of the for primary carcinoma, 1267; movable, the mechano-therapy of, 1576, 1836; suppurating, 1580; experiments on dogs to determine whether obstruction of the ureter would cause atrophy of, 1720; syphilitic cirrhosis of, 1800; growths in, 1801; congenital cystic disease of, 1855  
Kidneys, dystocia due to congenital cystic disease of the, 275  
Kimberley, South Africa, as a health resort, 1591  
Kinahan, Brigade-Surgeon J., death of, 1301  
King, Dr. E. E., superfetation (?), 756  
King of Sweden, the, and the abatement of tuberculosis, 1211  
King's Lynn, typhoid fever at, 1294, 1363, 1452, 1529  
Kingston, Canada, description of, 175  
Kingston-on-Thames, proposed jubilee hospital at, 1272; laying foundation stone of jubilee hospital at, 1437  
Kirchhoff, Dr. B., Compendium der speciellen Chirurgie, *rev.*, 89  
Kirk, Dr. R., the treatment of cyanosis produced by chloroform, 94  
Kirkdale, abandonment of the barrack school at, 1664  
"Kismet," 1884  
Klein, Dr. E., a coccus pathogenic to man and animals, staphylococcus haemorrhagicus, 385  
Knauer, Dr. O., Ueber puerale Psychosen, *rev.*, 813  
Knee-joint, effusion into the, 15; hysterical contraction of in a boy, 135; tuberculous disease of treated by iodoform injections, recovery, 397  
Knight, Professor, the action of certain chemical salts on the heart beat of the embryo of fundulus magellanus, 1484  
— Dr. C. H., a case of foreign body (metallic shoe hook) removed from the larynx by thyrotomy, 155  
Knowling, Dr. E. M., incomplete examination of the tonsils, 444; the relation of bacteria to catarrhal conditions, 1762  
Koch, Professor, the rinderpest inoculation method of, 98, 347, 682; in East Africa, 183; on the plague, 234  
Kocher, Dr. T., Chirurgische Operationslehre, *rev.*, 87  
Kölliker, Professor, awarded Comenius gold medal, 468  
Kolle, Dr., the review of Dr. Nakawaga's article on "Professor Kitasato's Anticholera Serum," 337  
Köplik, Dr. H., the bacteriology of pertussis, 1051  
Krohne, Mr. C. W., the safe administration of chloroform, 755, 1153  
— and Sessemann, Messrs., the safe administration of anaesthetics, 351  
Kryofine, 814  
Kutner, Dr. R., Technik und praktische Bedeutung der Asepsis bei der Behandlung der Harnleiden, *rev.*, 23

**L.**  
Laboratory of the Scottish asylums, 1528  
— classes and instruction, 553  
Labour, Walcher's position in, 15; complicated by abnormalities of the cervix uteri and vagina, 1139; obstruction of by ovarian tumours in the pelvis, 1722; premature, the induction of, 1856  
Lachapelle, Dr. E. P., the progress of sanitation in Canada, 757  
Laffan, Dr. T., medical defence, 260  
Laing, Mr. C. A. B., death of, 749  
Lake, Rev. W. C., death of, 1832  
Lamb, Dr. D. S., some anatomical and pathological specimens, 1487  
Lambeth, the guardians of and the managers of the Hanwell Ophthalmic Hospital, 421  
Lambkin, Surgeon-Major F. J., the Aachen treatment of syphilis, 844  
Lamp, a surgical, 815  
Lamplough, Mr. C., cases of aneurysm of the aorta communicating with the pulmonary artery, 392  
Lamps, dangerous oil, 419  
Lancashire, new infectious diseases hospital for, 1543  
Lancashire, lunacy in, 1676  
Landlords and drains, 829  
Landry's paralysis, 15  
Lane, Mr. J. E., the Aachen treatment of syphilis, 1215  
Langmaid, Dr. S. W., the anatomy of the fronto-ethmoidal region, 1394  
Langton, Mr. J., structure of the pylorus, Loretta's operation, 1089; angular deformity of the spine treated by immediate reduction, 1501  
Laparotomy, when is it indicated in penetrating wounds of the abdomen? 669  
Laporte, the sentence on, 1295  
Larking, Dr. A. E., Dr. Rentoul's resignation, 1750  
Larnaca, small-pox at, 1031  
Larynx, intubation of in pernicious vomiting, 1058; surgical treatment of malignant disease of, 1549; metallic shoe hook removed from by thyrotomy, 1558; acute syphilitic stenosis of, intubation, recovery, 1559; thyrotomy for epithelioma of, 1577  
Latah, the etiology, symptoms, and treatment of, 455; remarks on, 1771  
Latham, Dr. P. W., On the Synthesis and Molecular Constitution of Dead and Living Proteins, *rev.*, 472  
Laudanum and antipyrin, attempted poisoning by, 1000  
Laurent, Dr. O., L'Hygiène du Cycliste, *rev.*, 814  
Lavage du Sang, Dr. F. Sejars, *rev.*, 1187  
Lavoisier, statue to, 1753  
Law, lectures on, 1547  
Lawrence, Dr. A. B., consulting-room weighing machine, 259  
Lawrie, Surgeon-Lieutenant-Colonel E., chloroform and the heart, 131; partial anaesthesia with chloroform, 271; the causation of chloroform syncope, 617; on anaesthetics, 1476, 1477  
— Dr. J. M., thirty-two consecutive abdominal sections, with thirty recoveries, performed within seventeen months, 1490  
Laws, Mr. W. G., chip of steel in the vitreous 18 months, 1799  
Lawson, Dr. A., case of albuminuric retinitis, 1506  
Lead poisoning from artificial flowers, 1532; case of, 1727; industrial, 1867  
Leader, Mr. J. D., The Sheffield General Infirmary, a Brief Sketch of a Century's Work, *rev.*, 1343  
LEADING ARTICLES.—The Royal Statistical Society and vaccination, 33; our position to child pauperism, 35; the seasonal fluctuation of epidemic diseases, *ib.*; a new theory of the cause of the first sound of the heart, 95; the bacillus of yellow fever, 96; the unpopularity of the "saaiwallah," 97; small-pox and vaccination statistics, 161; town and country milk, 162; the health of the army in India, *ib.*; Workmen's Compensation Bill, 229; chlorosis, 230; the prevention of woolsorters' disease, 231; the Public Health (Scotland) Bill, 293, 355; the bacteriology of yellow fever, 294; the new University of London Bill, 295; meeting of the British Medical Association in Edinburgh, 1898, 355; the College of Physicians and hospital reform, 356; health progress in London, 357; State-aided hospitals, 415; beri-beri and iodid, *ib.*; the structure of bacteria, 416; serum treatment of leprosy, 417; the progress of physiology during the last thirteen years, 477; the depletion of the army medical service, 478; the training for the medical profession, 509; the cost of a medical education, *ib.*; the annual meeting at Montreal: the President's address, 599; the address in medicine, 600; the address in surgery, 601; the address in public medicine, 601; influences that have determined the progress of medicine, 602; the teaching of surgery, 663; the British Medical Association and its work, *ib.*; the Address in the Section of Pharmacology and Therapeutics, 725; the address in the Section of Obstetrics and Gynaecology, 726; the rise and progress of dermatology, 727; the Montreal meeting, 825; the sanitary congress at Leeds, 826; mental evolution in man, 827; the forthcoming election to the General Medical Council, 919; general practice, its financial aspects, 920; congresses and holidays, 921; the General Medical Council election, 1011; counsels of perfection, *ib.*; the prevailing ignorance of tropical diseases, 1012; the pathological study of insanity, 1109; the chemistry of life, *ib.*; the vaccination problem, 1110; the International Leprosy conference, Berlin, 1197; the sanitary control of water supplies, *ib.*; ventilation of underground railways, 1198; the Harveyan oration, 1199; the safeguarding of water supplies, 1283; plague prospects in India, *ib.*; cirrhosis of liver and intemperance, 1284; the present position of the out-patient question, 1351; dangers to stored waters, 1352; cur frustra? 1353; the sale of poisons, 1441; the treatment of uterine fibroids, *ib.*; the climatic health resorts of Canada, 1442; metropolitan hospitals and workmen, 1521; the relative efficiency of various anaesthetics, 1522; the public press and the army medical service, 1523; the case for vaccination, 1599; the opprobrium of sanitary sciences, 1601; unqualified assistants and "covering," 1659; reservoirs and sedimentation tanks, 1660; the British Medical Association and the Journal in 1897, 1661; London or Westminster? 1737; the marriage rate and the price of food, *ib.*; quid doceat doctor de doctrina? 1738; hospital embarrassments and hospital abuse, 1805; a malarial problem, *ib.*; recent experiences of military surgery, 1865; the Prince of Wales's Fund, 1863; nursing in Irish workhouses, *ib.*; results of Haffkine's inoculation against plague, 1864  
League, the Antivaccination, the finances of, 1304  
Learned, Dr. J. B., the treatment of insomnia, 864  
Lebbin, Dr., Untersuchungen über das Soldatenbrod, *rev.*, 1513  
Lecture, the Cavendish, by Sir J. Williams, 102; the Bradshaw on prognosis in heart disease, by Dr. E. M. Skerritt, 1327; supplementary, Croonian, by Dr. F. W. Pavy, on the pathology and treatment of diabetes, 1494, 1505; the Bradshaw on the correction of certain deformities by operative measures upon bones, by Mr. A. Willett, 1689  
Lectures, the Croonian, on the means by which the temperature of the body is maintained in health and disease, by Dr. W. H. White, 11, 70; on the Treatment of Fibroid Tumours of the Uterus, Medical, Electrical, and Surgical, Dr. F. H. Martin, *rev.*, 22; the Harben, by Dr. G. S. Woodhead, 26, 91, 172, 226; on the Action of Medicines, Dr. T. L. Brunton, *rev.*, 104; the Morison, on the anatomy and physiology of the nervous mechanism of the viscera, 1354; on ethics and law, 1547; on Angina Pectoris and Allied States, Dr. W. Osler, *rev.*, 1648; on Physiology, Dr. A. D. Waller, *rev.*, 1802  
Lee, the pollution of, 1203  
Lee, Dr. B., value of mandatory measures in measles and whooping-cough, 764; on spinal curvature, 661  
Leech, Dr. D. J., the mode of action of medicines, 702; the treatment of insomnia, 866; the treatment of syphilis, 1315; on diuretics, 1709  
Leeward Islands, rules for British practitioners in, 560  
Leftwich, Dr. R. W., aseptic vaccination, 1718  
Legge, Dr. W., the use of the forceps in midwifery, 682  
Legrand, Dr. M. A., Les Troupes Coloniales, Statistiques de la Mortalité, *rev.*, 1002  
Legueu, Dr. F., De l'Appendicite, *rev.*, 404  
Leicester, report of Dr. S. Coupland on the outbreak of small-pox at, 1208; hot acid baths in scarlet fever at, 1435  
Lejars, Dr. F., Le Lavage du Sang, *rev.*, 1187  
Leney, Miss L., menstruation in a newborn infant, 852  
Lens, spontaneous dislocation of the into the anterior chamber, 8; dislocation of, couching, recovery, 1265  
Lenses, spontaneous expulsion of both in a child, 275  
Leon, Dr. G. A., Sidmouth new sewerage works, 1827  
Leopard's account of the origin of the placenta, 1857  
Lepra leontina, case of, 16  
Leprosy, proposed conference on, 49; serum treatment of, 417; information required as to for the coming conference on, 667; The Suppression and Prevention of, Dr. A. S. Ashmead, *rev.*, 813; English delegates to the conference on, 1014; serumotherapy of, 1135; in Paris, 1213; models of, 1372; in the British Empire, 1409; in Russia, 1684  
Lecher, Mr. F. H., Recent Materia Medica, *rev.*, 346  
Leuman, Surgeon-Captain B. H. S., Notes on Micro-organisms Pathogenic to Man, *rev.*, 1803  
Levers, Dr., deciduous a malignant, 137

Lewis, Surgeon-Major J. G. S., death of, 502  
— Dr. L., medical terminology, 260  
— Dr. P. S., certain points in the causation and treatment of spinal curvature, 431; the cure of lateral curvature, 1121; The Reiley and Cure of Spinal Curvatures, *rev.*, 1186  
Leyden, Dr. E. v., *Der Verhandlung des Congresses für innere Medicin*, 1861  
Leyme (department of Lot, France) as a health resort, 91  
Library of the B.M.A., list of authors and others who have presented books to, 354  
— Radcliffe, Oxford, proposed new building for, 1583  
— a scientific, the conduct of a, 1289  
Liebreich, Professor O., the aims of modern medicinal treatment, 885  
Life assurance, the medical aspects of, 299; and abstinence, 603; estimation of height and weight in examinations for, 1835  
Ligament, broad, hemorrhage into complicating the puerperium, 2191; cysts of the, 1647  
Ligaments their Nature and Morphology, Mr. J. B. Sutton, *rev.*, 278  
Lightning stroke, case of, recovery from after artificial respiration, 218  
Ligoniel, typhoid fever at, 1529  
Lincoln, the water supply of, 1454  
Lincoln, Dr. R. P., method of operating in turbotomy, 1301  
Lindsay, Dr. J. A., the dietetic treatment of diabetes, 1043; on rheumatoid arthritis, 1228; the problem of the consumptive poor, 1727; the public services from the medical point of view, 1820  
Lip-reading, teaching of to the deaf, 63  
Lippé, Dr. J., obliteration of the cervix uteri, 1143  
LITERARY NOTES:—31, 174, 238, 309, 363, 494, 660, 739, 915, 1108, 1367, 1452, 1672, 1736, 1820; the "Coimbra Medica" on the Queen's Commemoration Number of the BRITISH MEDICAL JOURNAL, 174; Dr. W. A. MacNaughton on the medical heroes of the "Forty-five," *ib.*; G. Kirland and his connection with Sir Astley Cooper, *ib.*; post-graduate instruction in St. Louis, *ib.*; lines on Dr. Jephson of Leamington, 239; leaf of papyrus book found at oxyrhynchus, 309; lines on Dr. Lettsom's therapeutic system, 309, 1367; letter from man who had his leg broken eleven times as to disposal of his body, 363; Zambo Pasha on leprosy, 494; Dr. Morato's address to the Holy City of Rome, 666; Hermann von Helmholtz and his work, 739; Robert Fludd, the mystical physician, *ib.*; Mr. D'Arcy Power on Abernethy, *ib.*; stories of Abernethy, 1109; the first case of Caesarean section in Georgia, 1736; Sir Astley Cooper on cycling, *ib.*  
Lithia water, 88  
Lithotriptor, "giant," an improved pattern of, 23  
Lithotrity for phosphatic calculi, 1796  
Little, Dr. E. M., appliances for spinal caries, 1804  
Littlewood, Mr. H., removal of the scapula for sarcoma, 1578  
Liver, acute yellow atrophy of the, 217; four cases of hydatids of, 398; locomotion after rupture of, 443; seven consecutive cases of abscess of treated by incision, 470; cirrhosis of in childhood, death from acute yellow atrophy of, 1086; cirrhosis of and intemperance, 1284; nine operations on, 1577; congenital cystic disease of, 1855  
Liverpool, burials and graveyards in, 286; correspondence from, 373, 938, 1296, 1457, 1534, 1612, 1676, 1753; the Stanley Hospital, 373; increased accommodation for infectious diseases, *ib.*; Sunday and Saturday Fund, 373, 1458; new professorship of public health, *ib.*; resignation of Dr. H. C. Chapman, 373, 938; infantile diarrhoea in Bootle, 926; need for district nursing, *ib.*; nomination of Mr. Victor Horsley, *ib.*; the Medical Institution, *ib.*; review of the sanitary state of the city during the year, 1296; deficient hospital provision for infectious cases, *ib.*; resignation of the city engineer, *ib.*; munificent donation to the Hospital for Consumption, *ib.*; the coronership of Birkenhead, 1457; Medical Institution dinner, 1458; medical students' dinner, 1458, 1676; supply of diphtheria antitoxin, *ib.*; the Liverpool Medical Club and hospital reform, 1534; the attitude of large employers to hospitals, *ib.*; proposed central hospital for, *ib.*; previous proposals for reform, *ib.*; want of provision for dealing with wandering lunatics, 1612; extension and municipalisation of horse ambulances, *ib.*; the result of want of room in emergency cases, 1676; the Ladies' Sanitary Association, *ib.*; appointment of Professor Boyce as bacteriologist to the corporation, 1753; the Ladies' Charity, *ib.*; the eyesight of school children, *ib.*  
Living Substance (The) as such and as Organism, Mrs. G. F. Andrews, *rev.*, 1803  
Lloyd, Mr. J., on appendicitis, 948; on traumatic aneurysm, 956; cyst of the broad ligament, 1647; tumour of breast, 1857; wiring fragments in fracture, 1858  
— Mr. W. F., the specific heat of the human blood, 1072  
Lobe, temporo-sphenoidal, abscess of the, drained through the osseous auditory meatus, 465  
Localisation, cortical cerebral, with special reference to rodents and birds, 1485; of Headache and Sick Headache, Mr. H. B. Hewetson, *rev.*, 1512  
Lockwood, Mr. C. B., the disinfection of hands and instruments, 314, 433; radical cure of inguinal hernia, injury to the bladder, formation of phosphatic calculi, lithotrity, recovery, 1796  
Locomotion after rupture of the liver, 443  
Locomotor ataxia as a form of chronic parenchymatous degeneration of the paraneurial system, 787  
"Locum tenens," *a.*, and a special fee, 63  
Lodgings, seaside, the law of, 38  
Loeb, Professor J., effect of highly charged conductors on muscle nerves near them, 610  
London, public health questions in, 279, 357; the water supply of, 420, 1580; a cholera scare in, 493; the "bakehouses" of, 504; a year's inquests in, 624; high and low death-rates in districts of in 1896, 843; diphtheria in, 925, 1023, 1112, 1200, 1285, 1354, 1463, 1542, 1603, 1619, 1683, 1705, 1831, 1883; Dr. Luf's report on smallpox in, 1437; increase of measles in, 1742, 1832; a local university for, 1815; public health in the City of, 1831  
Long, Dr. C. W., and the discovery of anaesthesia, 107, 1124  
Longevity, and total abstinence, 614, 1018; and marriage, 1547  
Longford, trained nurses in the union of, 440; the suspension of the medical officer of the workhouse at, 1132, 1258  
Longings of pregnant women, 1356  
Longmore, Dr. J., death under chloroform, 83  
Lord Nelson on health, 621  
— Roberts on a sober army, 1033  
Loretta's operation for stricture of the pylorus, 1089  
Loud, Mr. F., pneumonia treated successfully with inhalations of oxygen gas, 1179  
Loumeau, Dr. E., *Chirurgie des Voies Urinaires: Etudes Cliniques*, *rev.*, 814  
Lowson, Mr. J. A., beri-beri a "place" disease not food disease, 843  
Lubricant for catheters, 851  
Lucas, Mr. R. C., cross-legged progression, the result of double hip ankylosis, 1829  
Luff, Dr. A. F., report of, on the outbreak of small-pox in London in 1892-93, 1437; salts of lime and cirrhosis of organs, 1680  
Lunacy in Lancashire, 1676  
Lunatics, "experiments" on, 728, 842, 1207, 1373; pauper certification of, 751, 1831; at large, 1354; the cost of, 1540; criminal, supervision of, 1610, 1824  
Lung, leit, abscess of, operation, recovery, 342; operation for abscess of, due to localised necrosis, 880; from a case of glanders, 1720  
Lungs, puncture of in fracture of ribs, 341; fibrosis of, 1728  
Lunn, Mr. J. E., four pieces of wire removed from a woman's bladder, 342; Caesarean section for contracted pelvis, recovery of the mother and safety of the child, 1500  
Lupus, the new tuberculin in, 168; vulgaris, six cases of, treated by the new tuberculin, 207  
Lush, Dr. W. G. V., case of lepra leontina, 16  
Lusk, Dr. W. T., obituary notice of, 32  
Lustig, Professor, the serum treatment of plague, 1028, 1611  
Lyus, Dr. J. B., obituary notice of, 610  
Lyman, Dr. H. M., a case of osteomalacia, 1231  
Lymphadenoma, case of, 1641  
Lymphangioma, congenital cystic, spontaneous disappearance of a, 1633  
Lymphangitis, removal of adult filariae in cases of, 903  
Lynn. *See King's Lynn.*  
Lynn, the municipality of, and funds for university students, 831

M.

Macalister, Professor A., the teaching of anatomy, 878  
— Dr. D., the treatment of insomnia, 863

Macalister, Dr. J. D. L., Hodgkin's disease treated by bone marrow tabloids, 1421  
Macallum, Dr. A. B., on the heart beat, 880  
— Dr. H. A., the treatment of insomnia, 864; a preliminary report on the action of Behring's serum in diseases not due to the Klebs-Loeffler bacillus, 1700  
McArdle, Mr. J. S., suppurating kidney, 1580  
McCausland, Dr. R. B., antitetanic serum in the treatment of tetanus, 469  
McCloskey, Mr. A. G., bullet wound of chest, 907  
McCormac, Mr. J. S. D., extrauterine gestation, 905  
— Sir W., appointed surgeon in ordinary to the Prince of Wales, 232  
MacDonald, Dr. G., the objects and limits of tubinotomy, 1389  
— Dr. J. F., on hyperemesis gravidarum, 1139  
— Inspector-General J. D., the Maidstone epidemic, 1029, 1297  
— Mr. W., death of, 1763  
McDonnell, Mr. W. C., tonsillitis with pericarditis, without arthritis or other rheumatic signs, 1179  
McDowall, Dr. T. W., the insane in India, 493  
Macewen, Dr. W., and the managers of the Western Infirmary, Glasgow, 1206, 1290, 1366, 1449, 1608, 1818  
Macfadyean, Professor, specimens of glanders in the horse, 1721  
Macfadyean, Dr. A., appointed director of the British Institute of Preventive Medicine, 222  
MacGillivray, Dr. C. W., resilient stricture, 138  
McGraw, Dr. T. A., intussusception of the veriform appendix and cæcum, 956  
Macgregor, Dr. G. S., antistreptococcus serum in septic absorption, 805  
— Surgeon-Colonel J., the Queen and the jubilee poems of, 413  
McHarry, Dr. H., death of, 1032  
McInnes, Dr. T. R., sketch of career of, 1620  
McIntosh, Dr. W. C., The Life-Histories of British Food Fishes, *rev.*, 1344  
McKay, Dr. T. W. G., intestinal absorption of ferritin and haemoglobin, 672  
McKelvie, Dr., and the isolation hospital at Oban, 1208  
McKendrick, Professor J., the late Professor Roy, 1124  
MacKenzie, Dr. G. H., elastic trabeculae in the sputum, 117  
— Dr. N., on the physiological and pathological relation between the nose and the sexual apparatus of man, 1562  
— Dr. R. T., accurate measurement of spinal curvatures with description of a new instrument for the purpose, 959  
— Dr. S., the influences that have determined the progress of medicine during the preceding two-and-a-half centuries, 638; the dietetic treatment of diabetes, 1044; on rheumatoid arthritis, 1229; on cholelithiasis, 1245  
McKerron, Dr. R. G., obstruction of labour by ovarian tumours in the pelvis, 1722  
Mackinlay, Mr. J. G., the medical movement among women, 998  
Mackinnon, Dr. A., empyema of pneumonia with four cases, 1057; on cholelithiasis, 1245  
— Surgeon-Major-General Sir W. A., obituary notice of, 1376; Surgeon-General Mouat on, 1458; the benefactions of, 1722  
Maclean, Dr. E., unusual cases of tubal gestation, 136  
— Surgeon-General W., gets jubilee medal, 1864  
MacLennan, Dr. A., two cases of dystocia arising from relative shortening of the umbilical cord, 466  
— Mr. W., pump for artificial respiration, 142  
Macleod, Dr. N., morphine habit of long standing cured by bromide poisoning, 76; can beri-beri be caused by food supplies from countries where beri-beri is endemic? 390, 415; beri-beri and food, 1459  
McMurrich, Dr. J. P., the teaching of anatomy, 879; a note on the posterior interosseous nerve, 884  
Macnamara, Dr. J., the story of an Irish sept, 669  
McNaught, Dr. J., staphylococcus haemorrhagicus, 685  
McOscar, Mr. J., the treatment of harelip by silver wire and Aveling's shot and coil, 654  
McPhedran, Dr. A., the treatment of insomnia, 859  
Macpherson, Dr. J. S., gallant conduct of, 1602; injection of strychnine in wounds from poisoned arrows, 1623

MacRury, Brigade-Surgeon-Lieutenant-Colonel C. W., Indian administration, 1125  
 McVail, Dr. D. C., reappointed member of the General Medical Council, 120  
 McWalter, Dr. J. C., an unexpected preparation of phosphorus, 1688  
 McWatt, Dr. J., tetanus successfully treated with antitoxin, 1572  
 Macwatt, Dr. R. C., obituary notice of, 1378  
 Madden, Dr. T. M., the conservative and other treatment of diseases of the Fallopian tubes, 1147; Notes on the Special Hygiene, Physical and Mental, of Childhood and Youth, *rev.*, 1862  
 Madeira, sanitary state of, 1564; proposed improvements in sanitary state of, 1665  
 Madras, graduation in the medical schools of, 504; excessive prevalence of fever in, 752  
 Magistrates, medical, 101, 120, 163, 239, 246, 1130, 1219, 1220, 1290, 1543, 1732  
 Magnet, use of in surgery, 372  
 Maidstone, epidemic of typhoid fever at, 924, 935, 1011, 1022, 1029, 1113, 1117, 1126, 1205, 1362, 1452, 1529; visit of Surgeon-Major Semple to, 1015; nursing emergencies at, 1220  
 Maitland, Surgeon-Major C. B., typhoid fever among natives of India, 1214  
 —— Surgeon-Lieutenant-Colonel J., removal of adult filariae in case of lymphangitis, 903  
 Makins, Mr. G. H., International Medical Congress, Moscow, 250; cesophagotomy complicated by cellular emphysema, 1909  
 Maladministration, sanitary, 422  
 Malakand, medical arrangements for the field force at, 620; the siege of, the devotion of a doctor, 728; medical officers with the reserve brigades at, 846; despatches from, 1462  
 Malaria, a method of staining the flagellated organism of, 68; the risks of the study of, 163; Notes on, Surgeon-Major E. M. Wilson, *rev.*, 222; a problem of, 1805  
 Malchior, Dr. M., Cystitis und Urinenfektion, etc., *rev.*, 346  
 Malcolm, Mr. J. D., extirpation of the ovaries as a cure for cancer, 185, 432; complete removal of a multilocular cyst of the pancreas, 1797  
 Malpighi, inauguration of a monument to, 730  
 Malt extract, 406  
 Maltose, contribution to sanitary reform in, 623  
 Man, some distinctive characters of the structure of, 450, 482; mental evolution in, 643, 827, 1030, 1298; effect of resistance exercise on the circulation in, 1073; rumination in, 1812  
 Manby, Dr. E. P., the value of antitoxin in the treatment of diphtheria, 1267  
 Manchester, the prevalence of throat affections among female elementary school teachers in, 807; correspondence from, 938, 1214, 1372, 1676; culvert system of sewage, 938, 1372; teaching of infectious diseases, 938, 1030; a belated inquiry, 938; a novel provident scheme for, 1365; hospital reform in, 1520; extension of time for sewage scheme, 1676; lunacy in Lancashire, *ib.*; Hospital Saturday and Sunday Funds, *ib.*; measles at, 1684; the battle of the clubs at, 1820  
 Manders, Mr. H., the method of Dr. de Backer in the cure of tubercle and cancer, 802  
 Mania, the tetanus complicated by, 400; acute incipient arrested by hyoscine, 652  
 Manslaughter and pauper nursing, 298  
 Manson, Dr. P., a method of staining the malaria flagellated organism, 68; appointed physician and medical adviser to the Colonial Office, 163; the necessity for special education in tropical medicine, 983; pigmented cells found in mosquitoes fed on malarial blood, 1787; certain new species of nematode haematozoa occurring in America, 1837  
 Manual, of Static Electricity in X-ray and Therapeutic Uses, Dr. S. H. Mouell, *rev.*, 346; of Mental Diseases, Dr. C. Clark, *rev.*, 576; of Ophthalmology, Dr. E. Fuchs, *rev.*, 907; of Gynaecology, Drs. D. B. Hart and A. H. F. Barbour, *rev.*, 1094; of Bacteriology, Drs. R. Muir and J. Ritchie, *rev.*, *ib.*; of Hygiene for Students and Nurses, Dr. J. Glaister, *rev.*, 1511  
 Manure, an economical, 417  
 Marct, Dr. W., A Contribution to the History of the Respiration of Man, *rev.*, 1512  
 Marcy, Dr. H. O., the suturing of wounds; the advantages of the absorbable suture buried in aseptic wounds, 952; surgery of the gall bladder and bile ducts, 1374  
 Marriage and longevity, 1547  
 Marriage-rate, the, and the price of food, 1737  
 Marsden, Dr. R. S., the sanitary aspects of advertisements, 834  
 Marsh, Mr. H., the treatment of tuberculous disease of the hip-joint in its early stages, 393  
 —— Mr. J. H., presentation to, 61; acute suppulsive middle-ear disease in infancy, 214  
 Marshall, Mr. C. D., traumatic cyclitis, 1799; specimen of pseudoglioma, *ib.*  
 —— Dr. C. R., salol calculi, 78; the action of diuretics, 1701; the treatment of the heart failure of arterio-sclerosis, 1715  
 Martin, Mr. C., papilloma of ovary, 1500; mace- rated fetus from extrauterine gestation, 1728  
 —— Dr. C. J., treatment of snakebite, 1753  
 —— Mr. C. L., anterior dislocation of foot, 1639  
 —— Dr. E., Genito-Urinary Surgery and Venereal Diseases, *rev.*, 473  
 —— Dr. F. H., Lectures on the Treatment of Fibroid Tumours of the Uterus, Medical, Electrical, and Surgical, *rev.*, 22; a further review of the treatment of fibroid tumours of the uterus by vaginal ligation of the broad ligament, 1141  
 —— Mr. J. C., case of melancholia with calcification of dura mater, 1261  
 Mask, a new anaesthetic, 815  
 Mason, Dr. J. W., the safe disposal of typhoid excreta, 1530  
 Massage, the teaching of, 1807  
 Massiah, Dr., the halfpenny postage rate, 1135  
 Master, liability of for attendance on servant, 1130  
 Masterman, Mr. A. T., The Life Histories of British Food-Fishes, *rev.*, 1344  
 Masters of Medicine; John Hunter, Mr. S. Paget, *rev.*, 1342; William Harvey, Mr. D. A. Power, *rev.*, 1429  
 Mastoid, ultimate results of operation on the, 1551  
 Materia Medica, Recent, Mr. F. H. Lescher, *rev.*, 346  
 Matthews, Mr. J. C. S. a case of foetal ascites, 82  
 Maude, Mr. A., medical defence, 116, 1614  
 Maunsell, Surgeon-Major-General T., gets jubilee medal, 1524  
 Mauritius, precautions against the plague in, 459  
 Maury, Dr. R. B., on hyperemesis gravidarum, 1138  
 Maxwell, Dr. C. M., presentation to, 1620  
 —— Dr. T., medical book-keeping, 259  
 May, Dr. J. H. S., presentation to, 1327  
 —— Dr. W. P., rheumatoid arthritis (ostitis deformans) affecting bones 5,500 years old, 1631  
 Mayhew, Mr. C. S., an improved cesophageal probang, 657  
 Mayors, medical, 1464, 1586  
 Meacham, Mr. E., death of, 824  
 Meadows, Mr. B. F., the water supply of Hastings, 1223  
 Measles, notification of, 440; value of mandatory measures in, 759; case of the rash appearing on the first day, 1087; and the puerperium, 1467; at Manchester, 1684; increase of in London, 1742, 1832  
 Meat, powdered, on the treatment of phthisis, 259; waste of in workhouses, 566; underdone, dangers of, 1611; frozen, 1675  
 Meath Home, Godalming, report of, 1245  
 Mechan, Dr. A., dystocia due to congenital cystic disease of the kidneys, 275  
 Meckel's diverticulum, Dr. T. N. Kelynack on, 459; volvulus of, 1637  
 Medal, the Barclay memorial, 666  
 Medical Council, General, the representative of the Royal University of Ireland on, 417; regulations of as to the registration and education of medical students, 512; regulations of as to professional examinations, 513; regulations of as to dental surgery, 561; Dr. Rentoul and the, 665, 815; direct representation on, 728, 739, 835; Sir Walter Foster and the, 828; the election to, *ib.*; the forthcoming election to, 919, 927, 1011, 1013, 1019; voting papers for election of, 922; interrogatories for candidates for, 933; result of election for direct representative on, 1105, 1209; the coming meeting of, 1358, 1444; the disciplinary powers of, 1540; opening of winter session of, 1592; new members, *ib.*; communication from president, *ib.*; examinations for the naval and military services, 1593; unqualified assistants, 1593, 1595; letter of thanks from president, 1595; length of speeches, 1597; medical reform, *ib.*; restorations to the "Register," *ib.*; the Midwives Registration Bill, 1598; fines under the Medical Act, *ib.*; case of G. H. Wyse, 1650; penal cases, 1651, 1652, 1655; report of Education Committee, 1653; report of Executive Committee, 1655; the British Pharmacopoeia, *ib.*; dental education, 1656; the public medical service, *ib.*; medical aid associations, *ib.*; English at the army medical examination, *ib.*; British medical practitioners in Italy, 1748; payments to members, 1748, 1811; the election or appointment of representatives of corporations on, 1827  
 Medical defence and the British Medical Association, 47, 116, 116, 187, 248, 260, 312, 1614, 1663, 1679, 1755, 1807, 1826  
 —— etiquette, 195; and social obligations, 322  
 —— men, and the English Bar, 612; and the transference of disease, 1211, 1547  
 —— officers and school boards, 63  
 —— officers, district, increased stipends to, 60; non-resident, 256 and the Superannuation Act, 320; and attendance on inmates of almshouses, 752; and certification of lunatics for asylums, 1831; residence of, 1883; extras ordered by and not supplied by relieving officer, 1883  
 —— officers of health, the subediting of the reports of, 299, 848; duties of in infectious cases, 1219, 1619, 1831; books on duties, etc., of, 1543  
 —— officers, Poor-law, tenure of office of, 256; in Ireland, 1756  
 —— reform, Dr. S. Woodcock on, 201  
 " —— Register," the, an object lesson, 1136; certificates of death for, 1307  
 —— reticence, 235, 403  
 Medicator and injector, a pneumatic, 1003  
 Medicinal treatment, modern, the aims of, 85  
 Medicine, a record in taking, 64, 384; State, instruction in, 549; psychological, instruction in, 554; British, in Greater Britain, 576; preventive in New York, 629; the influences that have determined the progress of during the last two and a half centuries, 638; textbooks on, 85; tropical, the necessity for special education in, 955; authority in and of, 989; ethics and individualism in, 990; and biology, 1448; teaching and learning. Dr. B. Bramwell on, 1626; sale of, 1764; popular, 1888  
 Medicines, the mode of action of, 702  
 Meek, Dr., relation of pelvic disease to insanity, 774  
 Meeke, Mr. J. R., death of, 1763  
 Melena neonatorum, cases of, 216  
 Melancholia, acute, an analysis of 100 cases of, 777; case of with calcification of dura mater, 1261; and loaded bowels, 1500  
 Melbourne, correspondence from, 431, 1678, 1675, 1753; Sir T. Naghten Fitzgerald, Kt., K.C.S.I., 1685; of the profession, proposed public dinner, *ib.*; complimentary dinner to Sir T. N. Fitzgerald, 678; Australian College of Dentistry, 679; Death of W. H. Cutts, *ib.*; experimental inoculation of tick pests, *ib.*; new instruments, *ib.*; a new acarus, 1675; frozen meat, *ib.*; treatment of opium narcosis, 1676; a medico-legal case, 1753; treatment of snakebite, *ib.*  
 Meltzer, Dr. S. J., on the heart beat, 880; on the closure of the glottis during the act of deglutition, 1483  
 Membrane, tympanic, incision of in inflammation of the middle ear, 213; incised wound of the, 1180  
 Mendelson, Dr., influence of tobacco smoking on the health, 923  
 Meningitis, chronic basic, 138; and middle-ear disease, 314, 374; simple posterior basic in infants, the bacteriology of, 183; spinal, case of, 1610; epidemic cerebro-spinal, changes in the cells of the ventral horns and of the nucleus dorsalis (Clarkii) in, 1839  
 Meningocele, two cases of successfully treated by operation, 963; treatment of, 1259; spinal, 1579  
 Menopause, ovarian palatinoids in flushings following the, 1000  
 Menstruation in a newborn infant, 652, 756, 852, 1039, 1307  
 Mental evolution in man, 643, 827, 1030, 1298  
 Mercantile marine, sight tests for, 100, 1447  
 Mercier, Dr. L. M., medical reticence, 403; the nursing examination of the Medico-Psychological Association, 616  
 Merkel, Dr. F., Ergebnisse der Anatomie und Entwicklungsgeschichte, *rev.*, 221  
 Merson, Dr., assault on a lunatic, 320  
 Merv, influenza at, 752  
 Mesentery, strangulation of a loop of the ileum through a hole in the, 975  
 Metabolism of the body fluids, studies in, 1411  
 Metcalfe, Mr. J., the forces in midwifery, 1519  
 Methylated spirits, fatality from, 63; drunkenness from, 1884  
 "Metropolitanism," 1136  
 Miali, Dr. P., treatment of pruritus, 443  
 Micrococcus Ghadiali, description of, 418  
 Micro-organisms Pathogenic to Man, Notes on, Surgeon-Captain B. H. S. Leuman, *rev.*, 1803

Micropthalmos with cystic protrusion into the globe, 84

Microscopes, choice, etc., of, 1222

Midden privies and enteric fever, 440

Midwifery, A Short Practice of Dr. H. Jellett, rev., 27; the use of the forceps in, 682, 746, 1125, 1509

“Branch,” 1135

Midwives, Hebrew, 692; unqualified, 1384

Miles, Mr. A., picric acid in burns, 138

Militia, mess allowances in, 57; promotions and appointments in the medical staff of, 118, 1539, 168; employment of medical officers in, 1128

Milk, sterilised, 88; town and country, 162; and infection, 164; “pure,” 168; cases of follicular tonsillitis due to infection by, 339; infected receptacles of, 630; the microscopic examination of, 832; pure for poor children, 841; estimation of fat in, 1623; artificial mother's, 1532; curative effects of diet on, 1635; supply of to towns, 1669; filtration of, 1809

Miller, Mr. A. G., chronic glandular enlargements in the neck, 1426

— Dr. G. V., a (foreign body) tooth in the ear requiring reflection of the auricle, etc., for its removal, 810

Mills, Dr. T. W., the teaching of anatomy, 879; on the heart beat, 881; cortical cerebral localisation, with special reference to rodents and birds, 1485

Milne, Dr. L., obituary notice of, 1216

Milnes, Mr. A., on small-pox and vaccination, 25, 33, 161

Miners, an eight hours' working day for, 39, 196

Mirror, new aural and throat, 1004; stethoscope and ear speculum combined, 1272

Missionaries, medical, the training of, 38

Mitcham, report on the schools at, 285

Mitchell, Dr. A., Schott's treatment of cardiac diseases, 216

— Dr. A. B., skin grafting by Thiersch's method, 1858

— Dr. G. H., Walcher's position in labour, 15

Mittheilungen, aus der gynaekologischen Klinik des Professor Dr. Otto Engstrom in Helsingfors, rev., 277

Mivart, Dr. F. St. G., appointed medical inspector of the Local Government Board, 1200

Moccatta, Mr. F. D., the charity voting system, 51

Moir, Dr. J., the induction of premature labour, 1856

Molière and his Medical Associations, etc., Dr. A. M. Brown, rev., 139

Molluscum fibrosum of arm, 1800

Monaghan, the workhouse at, 622

Monell, Dr. S. H., A Manual of Static Electricity in X-ray and Therapeutic Uses, rev., 346

Montague, Mr. J. H., a new form of Hagedorn's needles, 142

Montreal, the meeting of the British Medical Association at, 38, 49, 114, 428, 667, 665, 717, 82x; correspondence from, 49, 114, 428, 1457; the sections, 49; presentation to Lord Lister, ib.; golf, ib.; the journey to Canada, ib.; the jubilee fêtes at, 114; dress at the meeting at, 123; conjoint meeting of sections, 428; excursions and entertainments, ib.; notice to members disembarking at Quebec, ib.; excursions after the meeting, 429; the opening ceremonies, etc., ib.; jubilee memorial nurses' home at, 733; excursions at the meeting at, 1101; medical benefit societies and lodges: proposed tariff, 1457

Moore, Dr. E. E., alleged blundering of asylum officials, 938

— Dr. J. W., pneumonia a multiple infection, 1725

Surgeon-Major R. H. H., abscess of left lung, operation, recovery, 342

Moorehouse, Dr. W. H., on rheumatoid arthritis, 1228

Morgan, Dr. R., presentation to, 662

— Dr. W., shirts for cyclists, 755

— Mr. W. L., intussusception, 1610

Morison, Dr. A., on the anatomy and physiology of the nervous mechanism of the viscera, 1354

“Morning Post,” the, on medical aid associations, 1206

Morphine, traumatic tetanus treated by, 467

— habit of longstanding cured by bromide poisoning, 76

Morphinomania and will-making, 496, 1611

Morris, Dr. H. C. L., the etiology of beri-beri, 500

— Mr. J. M., vomiting of round worms, 124; the employment of hyoscine hypodermically, 852

— Mr. M., six cases of lupus vulgaris treated by Koch's new tuberculin, 207; the rise and progress of dermatology, 697; the treatment of syphilis, 1314

Morrison, Mr. J. T. J., myoma uteri removed by hysterectomy, 1509

Morse, Dr. H. L., points in anatomy which have a practical bearing upon operations on the temporal bone in disease of the ear, 1555

Morten, Miss H., The Midwife's Pocket Book, rev., 1803

Morton, Mr. A. S., Mules's operation for ptosis, 1798; non-recurrent orbital sarcoma, ib;

— Mr. C. A., the pathology of genu valgum, 53; operation for abscess of the lung due to localised necrosis, 800; cyst of the cæcum, 1721

Mosquitos fed on malarial blood, peculiar pigmented cells found in 1786

Moss, Dr. H., death of, 375

Mother, Baby, and Nursery: a Manual for Mothers, Dr. Genevieve Tucker, rev., 1431

Motor car question, the, 28

Motors and cycles, 1603

Mott, Dr. F. W., effects of chlorine and neurine on blood pressure, 672

Mouat, Surgeon-General Sir J., on Sir W. MacKinnon, 1458

Mouillet, Dr. A., a case of Raynaud's disease, 806

Moullin, Mr. C. W. M., Coley's fluid, 1423

Mouse favus, 1508

Mouth breathing in consumption, 63

Mui, Dr. W., obituary notice of, 117

Muir, Surgeon-Major-General H. S., gets Jubilee medal, 1661

— Dr. R., Manual of Bacteriology, rev., 1094

— Dr. W. S., the treatment of insomnia, 865

Mules's operation for ptosis, 1798

Mullin, Dr. J. A., on cholelithiasis, 1244

Mullins, Inspector-General J., death of, 1461

Mumford, Dr. A. C., fertility of twin sisters, 323

Munro, Mr. N. G., a case of symmetrical gangrene associated with peripheral neuritis, 648

Murmur, cardiac, disappearance of a, 463, 683, 747

Murmurs, endocardial, of organic origin, the disappearance of, 1055

Murphy, Mr. C. E., chloride of sodium treatment of tinea tonsurans and tinea circinata, 810

— Dr. H. H., herpes zoster of the face with paralysis, 466

— Dr. M., death of, 189

Murray, Surgeon-Captain J., obituary notice of, 1763

— Dr. R. A., uterine flexions and displacements, 1155

— Mr. R. W., angular deformity of the spine treated by immediate reduction, 1504; forcible straightening of the spine in Fott's disease, 1630; operations for cleft palate and hare-lip, 1859

— Dr. W., death of, 376

— Dr. W. F., obituary notice of, 1763

Murrell, Dr. W., What to Do in Cases of Poisoning, rev., 222

Muschamp, Surgeon-General W. H., death of, 530, 620

Muscle, voluntary, sensory organs of, 1508

— fibres, smooth, rhythmical contraction of, 610

— Testing (Practical) and the Treatment of Muscular Atrophies, Dr. W. S. Hedley, rev., 1271

Musgrave, Dr. C. D., disappearance of a cardiac murmur, 683

Music, some mental aspects of, 403; and the Harveian oration, 1373

Musser, Dr. J. H., on the disappearance of endocardial murmurs of organic origin, 1055; clinical report on serum diagnosis in enteric fever, 1778

Muzzeling order, the, 1146, 1527; extension of in Sussex, 1832

— orders, 1548

Myelitis, acute diffuse, 1578

Myers, Dr. W., acquired immunity, 1680

Mynter, Dr. M., Appendicitis and its Surgical Treatment, rev., 1733

Myocardial changes, note on the use of terms to indicate, 1229, 1761

Myoma of the uterus, abdominal hysterectomy for, 1423, 1509; calcified, 1857

Myopia, heredity and the development of, 1505; surgical treatment of high degrees of, 1579

Myrtle, Dr. A. S., medical practice, old and new, 205

— Dr. J. A., the Association and medical defence, 1826

Myxodema, regrowth of hair in under treatment with thyroid tabloids, 274

Nævus, operation for, 1181; distensible of frontal region, with defect in the subjacent bone, 1264

Nahits, Dr., on comparative demography, 1525

Nails, white specks in, 1260

Nakawaga, Dr. A., remarks on Dr. Kolle's review of my article, “Professor Kitasato's anti-cholera serum,” 337

Nameplate, description on, 1887

Naphthalin, treatment of whooping cough by, 64

Napoleon I., the cause of the death of, 443; the doctors of at St. Helena, 669

Nasal. See Nose

Nattan-Larrier, M., rumination in man, 1812

Navy, Royal, promotions and appointments in medical staff of, 118, 191, 251, 315, 376, 435, 501, 620, 686, 749, 846, 939, 1933, 1217, 1331, 1310, 1461, 1538, 1617, 1681, 1765, 1820; regulations for admission to the medical service of, 557; the treatment of non-naval surgeons when attached to, 681; the medical service of, 1381; instruction of medical officers of, 1445, 1679; results of examination for appointments in medical staff of, 1765

Neck, The Surgery of the, Dr. E. Bottini, rev., 278; description of conditions found in the two and a-quarter years after ligature of all the carotid arteries and jugular veins on the left side, 465; chronic glandular enlargements in the, 1426

Necrosis, acute, of alveolar process of superior maxilla in a baby two days after birth, 1259

Neech, Dr. J. T., duration of the period of infectiousness in scarlet fever, 765; treatment of psoriasis, 1387

Needle holder, a, 1735

Needles, Hagedorn's new form of, 24, 142

Negroes in the United States, consumption and insanity among, 668

Neild, Dr. J. E., a medico-legal case, 1753

— Dr. W., value of mandatory measures in measles and whooping-cough, 764

— Dr. W. M., non-surgical treatment of boils, etc., 870

Nelson, Dr. D. H., death of, 501

Nematode haematozoa, certain new species of occurring in America, 1837

Nephritis (Chronic) and Albuminuria in Childhood, Dr. O. Heubner, rev., 1345

Nephrolithotomy, three cases of, in which the stones were extracted by an incision through the pelvis of the kidney, no fistula, 906

Nerve, posterior interosseous, note on, 884, 1136; external popliteal aneurysm followed by herpes in the area of distribution of the musculo-cutaneous branch of, 1719

— cells of the ventral horns and of the nucleus dorsalis (Clarkii), changes in epidemic cerebro-spinal meningitis, 1839

— roots, cervical and thoracic, in relation to wry-neck, 1172

Nerves, cranial, a case of head injury affecting the, 401; special for pain, are there any? 1358

Nervous centres, refractory period in, 672

Netley, distribution of prizes, etc., at army medical school at, 376; the lunatic hospital at, 1381

Neumeister, Dr. R., Lehrbuch des physiologischen Chemie, rev., 1271

Neurasthenia, chronic, the treatment of, 383, 691; Charcot's treatment of, 507

Neurine, effects of on blood pressure, 672

Neuritis, peripheral, symmetrical gangrene associated with, 648; peripheral, connected with pregnancy and the puerperal state, 1080, 1761

Neuroglia, histology and pathology of the, 403

Neuron, in relation to disease, 1359

Newcastle-on-Tyne, the new infirmary at, 613, 616, 1020; correspondence from, 616, 1020

Newell, Mr. A. G., antidiphtheria serum rashes, 707; school disinfection, scarlatinal puerperal fever, 1223

— Dr. P., silk elastic catheters, 626; hyperesthesia of nasal mucous membrane, 691; ichthylol and glycerine suppositories, 1547

Newington, Dr. H. N., some mental aspects of music, 403

Newman, Dr. D., the relationship of movable kidney to renal colic associated with transitory hydronephrosis and intermittent albuminuria, treatment by operation, 971

Newport, dispensaries and Sunday Schools at, 666; the directors of the infirmary at and Mr. H. C. Ensor, 1808, 1826

Newry, inquiry into the administration of the workhouse at, 26, 481

Newspapers, notices in, 1464, 1602

New South Wales, public health legislation in, 483; the regulation of medical practitioners in, 667

New York, abuse of medical charity in, 484; preventive medicine in, 629; the prevention of phthisis pulmonalis in, 746  
Nicholls, Dr. A. G., notes on some cases of infection by the bacillus aërogenes capsulatus, 1844

Nicoll, Dr. J. H., the collateral circulation after ligature of the common carotid, 683; a case of malignant tumour of the brain, originating in the middle ear: symptoms simulating temporo-sphenoidal abscess: opening of mastoid antrum and cranium: partial removal of tumour: cessation of respiration under chloroform: tracheotomy: death two and a half months after operation, 1082  
Niger, medical appointments to the expedition to, 1743

Night lights, disinfectant, 1734  
" Nineteenth Century," the, and Professor Fraser on snake venoms, 496  
Nitrate of uranium. *See* Uranium nitrate  
Nitrogen, excretion of in sporadic cretinism, 1427

Nitrous Oxide and Oxygen, The Administration of for Dental Operations, Dr. F. W. Hewitt, *rev.*, 140; anaesthesia from, 1480  
" Non-combatants," 1201, 1810

Niven, Dr. J., the marriage-rate and the price of food, 1737  
Nordrach, in the Black Forest as a health resort, 362, 1190

Norman, Dr. C., Charcot's disease, 18  
Norris, Dr. W. F., A System of Diseases of the Eye, *rev.*, 220

North, Brigade-Surgeon-Lieutenant-Colonel J., death of, 1461

Norton, Surg.-Lieut.-Col. A. T., made C.B., 1864  
Norway, rules for British practitioners in, 561

Norway, Dr. N. E., laryngeal cough, 943  
Norwich, the battle of the clubs at, 238

Nose, primary tuberculosis of the cavities of the, 1263; the relation of disease of to pulmonary tuberculosis, 1394; the connection of deformities of by subcutaneous operations, 1397; the physiological and pathological relations between it and the sexual apparatus of man, 1562; the treatment of the deformities of the, 1625; from a case of glanders, 1720

Notes on the Wounded in Naval Battles between Japan and China during 1894-5, Mr. S. Suzuki, *rev.*, 1511

Notices, simplified statutory as to nuisance removal, 440

Notification of disease, 60; dual at Devonport, 299, 362; of measles, 440; of infectious disease in France, 496; of infectious diseases at Huntly, 704; the ethics of, 751; queried as to, 1035, 1684, 1830; and typhoid fever, 1834, 1887  
system, defects in the, 362

Notter, Surgeon-Colonel J. L., Practical Domestic Hygiene, *rev.*, 812; the international sanitary conferences of the Victorian era, 1646

Nunez, Dr. T., brief considerations on the diagnosis and treatment of penetrating wounds of the abdomen (when is laparotomy indicated?), 960

Nunn, Veterinary Captain J. A., Notes on Stable Management in India and the Colonies, *rev.*, 88

Nuns as nurses, 360  
Nurse, champagne for workhouse patients ordered by a, 1210, 1304  
Nurses, pauper, in Ireland, 104, 164; the diet of, 124; Crimean, 106; nuns as, 360; trained in Irish workhouses, 440; army, 443; the Mr. Hall Caine and, 605; engagement of, 626; disinfection of, *ib.* for the working classes, 1020; monthly compensation to, 1222; monthly, the training of, 1223; liability of doctors in ordering, 1200; training schools for, 1623

Nurses' Hostel. *See* Hostel

Nursing, pauper, Dr. J. Smyth on, 37, 1354; pauper and manslaughter, 298; pauper, the death blow to, 493; as a profession, the Duke of Devonshire on, 615; in workhouses and workhouse infirmaries, 627; hospital for training ladies for, 85; pauper, abolition of in Ireland, 924; rural, 1115, 1286; in Irish Workhouses, 1863, 1872

## O.

Oban as a health resort, 1190; the McKelvie isolation hospital at, 1208

Obesity, thyroid gland substance in, 904  
Obituary notice of, Dr. M. Charteris, 31; Dr. J. L. Smith, *ib.*; Dr. W. T. Lusk, 32; Sir J. C. Bucknill, 255; Dr. H. Thompson, 320; Dr. W. H. Cutts, *ib.*; Dr. Frank Chance, 375; Dr. F. H. Bliss, *ib.*; Professor Preyer, *ib.*; Sir J. Tholozan, 420; Dr. J. Braxton Hicks, 618; Mr. C. F. Du Pasquier, 619; Dr. J. B. Luys, *ib.*; Dr. A. F.

Holmgren, 748; Dr. J. M. Turnbull, *ib.*; Professor C. M. Roy, 1031; Professor E. Drechsler, 1126; Dr. F. W. Barry, *ib.*; Dr. W. Muir, *ib.*; Professor R. Heidenhain, 1215; Mr. E. S. O'Grady, 1216; Dr. L. Milne, *ib.*; Surgeon-General W. R. Cornish, 1299; Dr. T. E. B. Fletcher, 1300; Surgeon-Major-General Sir W. A. Mackinnon, 1376; Rev. Dr. S. Haughton, *ib.*; Sir R. Alcock, 1377; Mr. T. G. Stockwell, 1378; Dr. E. Sheppard, *ib.*; Mr. John Hughes, *ib.*; Mr. G. B. Phillips, 1379; Dr. R. C. Macawatt, *ib.*; Dr. J. Cagney, 1616; Dr. C. Wyman, *ib.*; Mr. H. W. Freeman, 1681; Dr. A. C. Brownless, 1736; Surgeon-Captain James Murray, *ib.*; Dr. W. F. Murray, *ib.*; Mr. H. Chulton, 1880

Obstetric practice, private, 1858; hospital, *ib.*  
Obstruction, chronic intestinal due to a tumour of the ileum, 1578; acute intestinal, relieved by operation, death on the ninth day from toxæmia, 1795

O'Carroll, Dr. J. F., osteo-arthropathy, 1580  
O'Dwyer, Dr. J., acute syphilitic stenosis of the larynx, intubation, recovery, 1559

Surgeon-Major-General T. F., gets jubilee medal, 1443

Edema, wandering, 803, 944; solid of the conjunctiva, 1798

Gesophagotomy complicated by cellular emphysema, 1090

Gesophagus, perforation of by fishbone, pyopneumothorax, etc., 1573

Ogilvie, Dr. L., the medical aspects of life assurance, 299

Ogle, Dr. J. W., proposed testimonial to Dr. J. Arlidge, 1460

— Dr. W., on the age incidence of small-pox mortality, 668

O'Grady, Mr. E. S., obituary notice of, 1216; memorial to, 1524, 1661

O'Halloran, Surgeon-Captain M., severely mauled and clawed by a wounded tiger, recovery, 653; pernicious malarial fever, recovery, 1720

Ohlemann, Dr. M., Die Farbenblindheit und ihre Diagnose, *rev.*, 1094

Oil, creasoted, in obstruction of the trachea by diphtherial membrane, 1564

— of sandal wood, remarks on, 1835

Oils, experiments on the solubility of gall-stones in, 708

Oldham, burial irregularities at, 667

Oldwright, Dr. W., value of mandatory measures in measles and whooping-cough, 763

Oleum jecoris aselli, 52, 124

Oliver, Dr. C. A., A System of Diseases of the Eye, *rev.*, 220

Surgeon-Captain C. P., gets jubilee medal, 1539

Professor T., poisoning caused by eating the hairy willow herb, 707

O'Neill, Dr. W., a bishop on Sunday recreation, 1879

Operations in workhouse hospitals, assistance at, 101

Ophthalmia neonatorum, the Local Government Board on, 126; long-standing, 421; the prophylaxis of, 841; among school children in Prussia, 1372; potassium permanganate, 1506

Opium, permanganate of potash in poisoning by, 1000

— narcosis, treatment of, 1676

Oration, the Harveian, 1167, 1199; music and, 1373

Orbit, foreign body in [the, 341; secondary sarcoma of the, 1799

Organs, resistance of vascular channels of, 610

Orme, Mr. W. B., on beri-beri, 1460

Osborn, Dr. A. G., a case of prolonged unconsciousness, 665, 676, 1524

Osler, Dr. W., British medicine in Greater Britain, 575; Lectures on Angina Pectoris and Allied States, *rev.*, 1648

Osteo-arthropathy, case of, 1580

Osteomalacia, a case of, 1231

Oswestry, adoption of Infectious Disease (Notification) Act at, 1463

Otorrhœa, the treatment of, 1762

Out-patient question, the present position on the, 1351

Ovaries, extirpation of the as a cure for cancer, 54, 117, 185, 1250, 432, 684, 890, 1375; tubercle of, 1857

Ovariotomy, double, with eighteen months' interval between the operation, 219; for ovarian cystoma associated with prolapse uteri, 399; the management of true and false capsules in, 1092

Ovary, papilloma of, 1500; abscess of, 1728

Overcrowding, and phthisis, 384; in Board schools, 1444; in factories and workshops, 1467

Owen, Mr. E., The Surgical Diseases of Children, *rev.*, 596

Oxygen, warmer and economiser for, 89; pneumonia treated successfully by inhalation of, 1179  
Oysters and infectious disease, 27; sewage-fed and typhoid fever, 1526

## P.

Page, Mr. F., three cases of nephrolithotomy in which the stones were extracted by an incision through the pelvis of the kidney, no fistula, 906

Paget, Mr. S., Masters of Medicine: John Hunter, *rev.*, 1342

Paget-Tomlinson, Dr. W. S., gets jubilee medal, 1524

Pain, are there any special nerves for? 1358

Paisley, opening of nurses' home at, 1684

Palate, cleft, operations for, 1829

Palatinoids, new, 279; ovarian, in flushings following the menopause, 1000

" Pall Mall Gazette," the, on Irish workhouse reform, 419

Pancreatitis, acute haemorrhagic, 468

Panser, Dr. R., Die Schwerhörigkeit durch Starrheit der Paukenfenster, *rev.*, 406

Papilloma of ovary, 1509

Paracentesis versus exploratory incision and drainage, 79

Paralysis, Landry's, 15; with herpes zoster of the face, 466; general, of the insane, active treatment in, 1407; post-anæsthetic, 1448; pseudo-hypertrophic, 1799

Paraplegia, with multiple subcutaneous nodules, 1263

Paraplegic patient, home for, 943

Paris, correspondéne from, 48, 114, 182, 247, 372, 496, 615, 678, 743, 841, 1121, 1213, 1295, 1456, 1532, 1610, 1674, 1752, 1824; general news, 48, 114, 247, 372, 496, 678, 743, 1122, 1296, 1457, 1532, 1825, 1875; a question of fees in a law court, 48; the presentiments of a victim of the charity bazaar fire, *ib.*; the admission of patients to hospitals, *ib.*; the regulation of watering places, *ib.*; a batch of monuments, *ib.*; medical magnetism and the law, 114; a new gynaecological department in the Hôpital Broca, *ib.*; a monument to Duchenne at Boulogne, *ib.*; the French law and criminal lunatics, 182; disinfection of dwellings with formol, 183; mortality among colonial troops, *ib.*; Hospital Patronage Committee, *ib.*; the action of the x rays on tuberculosis, 247; the water supply of, *ib.*; the Russian plague commission, *ib.*; new Pasteur medallion, *ib.*; the treatment of exophthalmic goitre, 372; antitetanus serum, *ib.*; tuberculosis congress, *ib.*; mag nets and surgery, *ib.*; congress of French-speaking alienists, 496; education and hysteria, *ib.*; the notification of infectious diseases, *ib.*; morphinomania and will making, *ib.*; professional secrecy, 615; scientific commissions, 616; radiography of the skull, *ib.*; rebuilding of the hospitals of, 678; a district free from tuberculosis, *ib.*; toxicity of the sweat, *ib.*; the Boucicaut maternity, *ib.*; gratuitous medical assistance, 743; French feeling as to the Moscow congress, 743; the altitude cure, 744; provincial medical schools, *ib.*; physical development in schools, *ib.*; anthrax, 841; skin affections caused by the x rays, *ib.*; pure milk for poor children, *ib.*; the prophylaxis of ophthalmia neonatorum, *ib.*; a hospital patients' clothing fund, *ib.*; mismanagement of the army sanitary service, 1121; alcoholism in France, *ib.*; the night service in the hospitals of, *ib.*; proposed abolition of naval medical schools, *ib.*; municipal schools for nurses, 1122; leprosy in, 1213; the clothing of army reserve men, *ib.*; the detection of bullets in the body, *ib.*; a criminal lunatic at large, *ib.*; plague serum, 1295; congress plethora, *ib.*; competitive examinations, *ib.*; the economics of the Assistance Publique, *ib.*; Dr. Laporte, *ib.*; the nurses' baccalaureat, 1456; successful use of antivenomous serum, *ib.*; clinical lectures on diphtheria, *ib.*; Society of Hypnology, *ib.*; a dangerous house, *ib.*; epidemics of food poisoning, *ib.*; subsidies from the pari mutuel, *ib.*; lead poisoning from artificial flowers, 1542; the Havre municipal school for nurses, *ib.*; artificial mother's milk, *ib.*; nutritious bread, *ib.*; cancer regions, *ib.*; lady dispensing chemist, *ib.*; infants and railway travelling, *ib.*; yellow fever in the Sudan, *ib.*; criminal lunatics, 1610; aid for the insane after discharge from asylums, 1611; dangers of underdone meat, *ib.*; morphinomania and testamentary capacity, *ib.*; changes in examinations, *ib.*; the abuse of tobacco, *ib.*; donations to universities, *ib.*; French doctors and the

Laporte case, 1674; visit of the President to the Bicêtre, *ib.*; proposed sale of the Salpêtrière, 1675; opening of the Boucicaut Hospital, *ib.*; funeral of Professor Tarnier, *ib.*; a statue to Pasteur at Melun, 1752; medical practitioners and the law, 1753; the preparation of therapeutic serum *ib.*; female medical officers for girls' schools, *ib.*; French gymnastic societies, *ib.*; a statue to Lavoisier, *ib.*; the medical faculty of, 1824; dissecting-room porters and their pay, *ib.*; criminal lunatics, *ib.*; psittacosis, 1825; reading through opaque bodies, 1875; bone grafting from the dog, *ib.*; the medical staff of the hospitals of, *ib.*; Parish, Mr. E., Hallucinations and Illusions, a Study of the Fallacies of Perception, *rev.*, 812; Park, Dr. W. H., differentiation of typhoid and coli bacilli, 1778; Parker, Mr. R., nine operations on the liver, 1577; Parkes, Dr. L. C., on the outcome of sanitation, 925; Hygiene and Public Health, *rev.*, 1269; PARLIAMENT—school punishment, 59; typhus fever at Inniskillen, *ib.*; boarded-out children, 59, 119; dog muzzling in Leicestershire, 59; report as to Irish lunatics, *ib.*; medical attendance for postmen, *ib.*; hospital arrangements, etc., in Scotch prisons, 60; Pharmaceutical Society of Ireland, *ib.*; Poor-law officers' superannuation, *ib.*; burial grounds, *ib.*; "viewing the body," 119; classification of asylum paupers, 119, 190, 554; ventilation of metropolitan underground railways, 119, 378; infection from abroad, 119; "kissing the book," *ib.*; fever in the Belmullet Union Hospital, 119, 190; corporal punishment in prisons, 119; proposed modification of prison rules, *ib.*; bills advanced, *ib.*; petitions, 119, 379; notices, 119; reports, 120, 435; postponements, 120, 435; Lunacy Bill, 180, 253, 316; the London water question, 180; bubonic plague, *ib.*; experiments on living animals, *ib.*; election of medical officers of health, 193; dog muzzling, 190, 378; dispensers to Poor-law unions, 190; the care of State-aided children, *ib.*; London University Bill, 253, 315, 377; Verminous Persons Bill, 253, 316; venereal disease in the army, 254; "a malevolent fabrication," *ib.*; medical messes, *ib.*; beri-beri in an Irish asylum, 254, 317; the use of curare in vivisection, 254; the plague at Poona, *ib.*; glycerinated calf lymph, 254, 434; the Dogs Bill, *ib.*; Public Health (Scotland) Bill, 316, 377, 434; Infant Life Protection Bill, 317, 377; the Army Medical Staff examination, 317, 434; army service in India, 317; small-pox hospitals, *ib.*; mortality in Sierra Leone, *ib.*; dangerous lunatics, *ib.*; nuns as nurses in Ireland, 318; petroleum hair washes, *ib.*; calf or human lymph, *ib.*; the plague in India, *ib.*; the report on vaccination, 318, 377; pauper nursing in Ireland, 318; health of the navy, *ib.*; metropolitan cemeteries, *ib.*; Weights and Measures (Metric System) Bill, 377; District Council (Water Supply Facilities) Bill, *ib.*; Local Government Board medical officers report, *ib.*; pauper lunatic asylum accounts, *ib.*; the Metropolitan Water Companies Bill, *ib.*; Burials Joint Committee Bill, *ib.*; Yorkshire Coroners' Bill, *ib.*; Dangerous Performances Bill, *ib.*; schools for the blind and deaf, *ib.*; Cleansings of Persons Bill, *ib.*; Poor-law Acts (1889) Amendment Bill, *ib.*; Sale of Food and Drugs Bill, *ib.*; the organisation of the Local Government Board, the Local Government Board and vaccination, *ib.*; army medical nurses, 378; hardships of the army medical service, *ib.*; vacancies in the army medical service, *ib.*; rabies, *ib.*; glanders, *ib.*; the condition of the Richmond Lunatic Asylum, *ib.*; opium in Ceylon, *ib.*; the water famine in the East-end, *ib.*; the river Brent, 379; the river Blackwater, *ib.*; cottage homes for pauper children, *ib.*; ophthalmia among Poor-law children in the metropolis, 434; the Royal assent, *ib.*; vivisection, *ib.*; health of the British troops at Agra, *ib.*; the Tullia guardians and pauper patients, *ib.*; the Brook hospital, *ib.*; juvenile prisoners under remand, *ib.*; quarantine at Colombo, *ib.*; Parsons, Dr. J. I., a new method of treatment of prolapse of the uterus, 1154; Partnership, advertisement of dissolution of, 195; notice of, 1307; agreements for, 1540; Partnerships, changes in arrangements of, 123; Parturition, the injuries of old and new, 589; Pasteur, a new medallion for, 247; the work of and the modern conception of medicine, Professor C. Richet on, 693; international memorial to, 829; statue to at Melun, 1752—Dr. W. on cholelithiasis, 1245; fees at the Middlesex Hospital, 1623; Pastill, menthol co., 710; Patents for Inventions: Abridgements of Specifications, *rev.*, 1582; Paterson, Dr. W. H. J., deaths under chloroform, 93; Pathology, the progress and results of work in, 586; of the Affection of the Posterior Columns in Tabes, Dr. E. Redlich, *rev.*, 908; and Princeps (Surgical), Mr. J. J. Clarke, *rev.*, 1185; Patient, a remarkable, 98; Paton, Dr. N., on hepatic glycogenesis, 1433; Patterson Dr. R. D., and the Ballymagrane Dispensary, 628, 681; Pattin, Mr. H. C., alleged arrest of at Warsaw, 737; the safe disposal of typhoid excreta, 1530; Paul, Mr. A., on the report of the Royal Commission on Vaccination, 485—Mr. F. T., on tumours and enlargement of the thyroid gland treated surgically, 1; vilous tumours of the bladder, 1508; Pauper nurses or servants, 1354; Pavly, Dr. F. W., on hepatic glycogenesis in, 1433; supplementary Croonian lecture on points connected with the pathology and treatment of diabetes, 1494, 1565; Payne, Dr. J. F., the study of morbid anatomy, 1246; the prevention of enteric fever, 1793; Peachey, Mr. G., the D.P.H.Oxford, 1136; Pearson, Professor K., The Chances of Death and other Studies in Evolution, *rev.*, 345; Peculiar People, the, 1200; conviction of the, 1354; Peers, Mr. G. R., Electricity, its Medical Applications, being also an Exposure of Electric Quackery written in Plain Language, *rev.*, 222; Pellet, leaden, lodged in the eye, 1798; Pelvic disease in women, the etiological relation of to insanity, 766; septic, the operation of choice in, 1159; Pelvis, gauze-packing of the in gynaecological operations, 1164; obstruction of labour by ovarian tumours in the, 1722; Pembrey, Dr. M. S., temperature of man and animals after section of the spinal cord, 883; Pemphigus contagiosus, 1253; Penis, double, a case of, 732; carcinoma of, 1841; Penny (a) a head, 1542; Pension on loss of office, 1035; Pericarditis, calcifying, 1338; Perineum, Tait's flap-splitting operation on the, 1298; Periodicals, duplicate, 507; Peritonitis and perforation of the vermiciform appendix, operation, recovery, 1165; Perityphilitis and its Varieties, etc., Mr. F. Treves, *rev.*, 1733; Perkins, Dr. G. S., the chloride of sodium treatment of tinea tonsurans, 1030; loss of hair, 1134; Permanganate of potassium in opium poisoning, 1000; Permewian, Dr. W., on turbinotomy, 1302; on laryngeal paralysis, 1397; chronic arytenoid laryngitis, 1557; chloroform in the removal of tonsils, 1558; Perrigo, Dr. J., intrapelvic tuberculosis, 1150; Pershore, the guardians of and the Poor-law Officers Superannuation Act, 1867, 1878; Pertussis. *See* Whooping-cough; Peru, rules for British practitioners in, 561; Peters, Mr. G. A., gunshot wound of the spinal cord, 961; Petroleum hairwashes, 296, 360, 380—industry, trade diseases connected with, 1123; Pfeiffer, Dr. E., Der Verhandlung der Congresses für innere Medicin, *rev.*, 1861; Phalanx, ungual, dislocation of, 1639; Pharmaceutical specialities, 710; Pharmacy thirty years ago and now, 1280; Phear, Dr. A. G., cerebral sinus thrombosis, 1089; Phenols, disinfection by vapour of, 99; Phenyl hydrazin test for dextrose, 123; Philbrick, the sanitary condition of, 940; Phillips, Dr. E., the Coventry Provident Dispensary, 918, 1206—Mr. G. B., obituary notice of, 1379—Mr. H. C., exsanguineous confinement, 468—Dr. J., Outlines of the Diseases of Women, *rev.*, 1733—Dr. Leslie, the treatment of relapsing acne, 797—Dr. S., calcareous metamorphosis of tracheal glands, mediastinal abscess and bronchial fistula, 1261; Phipps, Surgeon-Major E. V. A., foreign body in the bladder, 136; Phonendoscope, the, 1723; Phonophone, the, a new stethoscope, 348; Phosphorus, an unexpected preparation of, 1683; Phosphorus-necrosis of the temporal bone, 1557; Phthisis, in South Africa, 100; powdered meat in the treatment of, 249; and overcrowding, 384; chronic, English watering places as winter residences for, 690; pulmonary, the New York experiment in the prevention of, 746; pulmonary, laryngeal infections in, 754; acute, the importance of rest in the treatment of, 1418; new mechanical treatment of, 1760; Physicians, ancient septic, 669; Physiology, Practical Exercises in, Dr. A. D. Waller, *rev.*, 83; an examination paper in, 188, 251, 374; progress of during the last 13 years 445, 477; Human Elements of, Dr. G. H. Stirling, *rev.*, 1431; Piano, an invalid's, 1650; Picric acid in burns, 138; Picton, Mr. J. A., the conversion of, 1810; Pig-bile, tabloids of, 23; Pigg, Mr. T. S., calcifying pericarditis, 1338; four unusual cases of melanotic sarcoma, 1721; Pigmentation, pathological, preceding malignant growth of the skin, 873; Pilcher, Mr. W. J., death of, 685; Pilgrimage, the, and the plague, 37; Pills, remarks on, 167; Pilocarpin, injection of in puerperal eclampsia, 706; Pin, Dr. A. A., puerperal fever caused by fright, 691; Pince-nez, the Revluc, 909; Pipe stem impacted in one of the bronchi for a period of three months, 800; Pitts, Mr. B., the Cullingworth fund, 373; Pituitary body, gumma of the, 1855; Pitryiasis rubra, 1725; Placenta, Leopold's account of the origin of, 1857; Plagge, Dr. Untersuchungen über das Soldatenbrod, *rev.*, 1513; Plague, and the pilgrimage, 37; quarantine against in Constantinople, 97; report of the Austrian Commission on, 100; in Egypt, 163; bacteriology and meteorology during the epidemic of, 165; in the fens in 1636, 167; the symptoms and pathology of, 171; report of the Russian Commission on, 172, 247; in the Bombay, 228, 246, 940, 1818; Professor Koch on, 234; Report of the Commission sent by the Egyptian Government to Bombay to Study, *rev.*, 405; regulations as to in Poona, 419; in Cutch Mandvi, *ib.*; the cessation at Jeddah, 419; the Government of India and the, 497; at Hardwár, 502; in India, 918, 1015, 1116, 1200, 1283, 1383, 1451; Professor Lustig's serum treatment of, 1028, 1611; the early history of in Bombay, 1304; the course of, 1527; special service for in India, 1672; amongst the Hardwár monkeys, 1683; Dr. Forquet on, 1887; results of Haffkine's inoculations against, 1864; Plants, vesicating, 323; medicinal of the United States, 1298; Platt, Mr. J. E., skin grafting by Thiersch's method, 1799; Pleura, acute tuberculous of, 1800; Plumbers, Company of. *See* Company—the registration of, 1766; Plumstead, the annual report of the vestry of, 1219; Pneumonia treated successfully by inhalations of oxygen gas, 1179; septic, case of, 1337; a multiple infection, 1725; Pneumothorax, the surgical treatment of, 1568; five cases of, 1859; Pocket Book, the Midwife's, Miss H. Morten, *rev.*, 1803; Poisoning, What to do in Cases of, Dr. W. Morrell, *rev.*, 222—by carbolic acid, 40; by pyrogalllic acid, 81; by chloroform, recovery, 135; by pyrogallic acid, treatment of, 188; in north-western and central India, 504; by carbolic acid, treated with vinegar, 595; by ptomaines, liability for, 603; from eating the hairy willow herb, 707; by canned foods, 938; attempted by laudanum and antipyrin, 1000; by opium, permanganate of potash in, 1000; by ice cream, 1684; Poisons, the sale of, 63, 144, 1770; careless sale of, 1830; Police, metropolitan, summer clothing for, 163—surgeons, duties of, 1467; Pollak, Dr. B., Die Färbetechnik des Nervensystems, *rev.*, 140; Polotebnoff, Professor, Einleitung in den Cursus der Dermatologie, *rev.*, 475; Polypus, uterine in a child aged 1½ year, 1181; Pontefract, notification of measles at, 440; Poole, Surgeon-Major G. K., medical defence, 1679—Mr. T. D., the wants of the general practitioner, 1021.

Poona, the proceedings of the Plague Committee at, 358; plague regulations in, 419; increase of plague at, 601; the medical officership of health at, 623; the sanitation of, 824.

Poor, consumptive, the problem of the, 1727.

Poore, Dr. G. V., dry urinals, 54; on the prevention of enteric fever, 1574.

Poor-law economics, 1588.

Popham, Mr. R. B., an operation table for the general practitioner, 1288.

Porquet, Dr., plague in India, 1887.

Porro's operation for impacted pelvic tumours, 1140.

Porter, Professor T. W., the mammalian heart, 610, 882; on the heart beat, 880.

Portsmouth, the new hospital at, 402; police fees at, 751; new military hospital at, 847.

Portugal, rules for British practitioners in, 561.

Postage of notification certificates, 1543.

Post-graduate course for London, 923

— study, 546.

Posture, the erect, Sir W. Turner on, 450, 482.

Potassium, permanganate, in ophthalmia, 1506.

Potter, Dr. J. C., compound tincture of benzoin in enteric fever, 1574.

— Dr. J. H., the administration of anaesthetics, chloroform v. ether, 684, 1762.

Pott's disease. *See Disease*.

Pound, Mr. F. J., death of, 1829.

Powell, Mr. A., the administration of chloroform with  $\text{CO}_2$ , 1479.

— Mr. C. M., hepatic cirrhosis of childhood, intercurrent typhoid fever, death from acute yellow atrophy, 1086.

— Sir R. D., Sir Walter Foster and the "Young Man," 1106.

Power, Mr. D'A., empyema of the antrum in a child aged 8 weeks, 808, 1337; suggestions for a veterinary sanitary science, 998; Masters of Medicine, William Harvey, rev., 1429; a case of spontaneous disappearance of a congenital cystic lymphangioma, 1633.

Practice and theory, Professor Allbutt on, 197.

— unqualified, 56; unqualified and the Medical Acts, 105; sale of and public appointments, 195; medical, old and new, Dr. A. S. Myrtle on, 205; special, 250; dental, 323; book debts in the purchase of a, 688, 943; general, its financial aspects, 920, 1020; general, 1373; unqualified medical, 1384; irregular, 1387; cheap v. gratis, 1623; in poor neighbourhoods, *ibid.*, general, 1679, 1756; contracts in restraint of, 1682; unqualified and advertising quackery, 1835, 1887.

Practitioner, the general, the remuneration of, 55, 184, 432, 681; a brother acting for in an emergency, 63.

Practitioners, British, abroad, regulations for, 560; general, why are they deprived of Government appointments in India? 691; preventive medical, 692; civil and military duties, 1682.

Pregnancy and women's labour in factories, 1017; and the puerperal state, peripheral neuritis connected with, 1080, 1761; chorea, complicating, 1610; ruptured tubal, 1727.

Prescriptions, the illegibility of, 1355.

Presentation to, Dr. J. Somerville, 59; Mr. J. H. March, 61; Professor J. Atfield, 168; Mr. H. Distin, 408; Dr. R. Morgan, 662; Mr. J. Wood, 667; Dr. J. Robertson, 821, 871; Dr. A. M. Hawkes, 903; Dr. J. B. Ward, 974; Dr. N. Raw, 1018; Mr. A. H. Creswell, 1036; Mr. R. Turner, 1208; Dr. J. H. S. May, 1327; Dr. J. Stothard, 1464; Mr. J. M. Carvell, 1543; Dr. C. M. Maxwell, 1620; Mr. A. M. Erskine, 1732; Mr. B. Hall, 1832; Dr. Bahadurji, 1854; Dr. H. T. Heath, 1862.

Preston, guardians of and the Local Government Board, 848.

Preston, Surgeon-Major-General A. F., gets jubilee medal, 1524.

Freyer, Prof., obituary notice of, 375.

Frith, Dr. A., an early prescription for cod-liver oil, 52.

Friestley, Dr. J., chorea in relation to scarlet fever, 805.

Primrose, Prof. A., the teaching of anatomy, 879; a case of uterus masculinus, 881.

Prince of Wales opens New Park Hospital, 167; made an honorary Fellow of the Royal College of Physicians, 23, 283.

Princess Henry of Battenberg lays foundation stone of Royal Isle of Wight Infirmary, 602.

Principals and assistants, 754.

Pringle, Dr. J. J., A Pictorial Atlas of Skin Diseases and Syphilitic Affections, etc., rev., 475.

Prison, medical service changes in, 95; increase in, 97; regulations for admission to, 558.

Prize, Alvarenga, award of, 1277.

Probang, an improved oesophageal, 657, 709, 1004.

Probst, Dr. C. O., value of mandatory measures in measles and whooping-cough, 761.

Procurators-fiscal and certificates of death, 621.

Profession, the medical and medical aid associations, 31; and the War Office, 188; the medical, overcrowding of, 566, 627; agitation in, against medical aid societies, 1026; the medical, mortality of, 1811; the medical and the District Nursing Association, 1865.

Proteid, Dead and Living. On the Synthesis and Molecular Construction of, Dr. P. W. Latham, rev., 472.

Pruritus, treatment of, 443.

Pseudoglioma due to choroido-retinitis secondary to meningitis, 1506; specimens of, 1799.

Psilosis, or Sprue, its Nature and Treatment, Dr. G. Thin, rev., 1861.

Psittacosis, 1825.

Psoriasis, treatment of, 1307, 1387.

Psychiatry, reflexes in, 779.

Psychology, The New, Dr. E. W. Scripture, rev., 1732.

Psychoses, Puerperal, Dr. O. Knauer, rev., 813.

Ptomaine poisoning, liability for, 603.

Ptosis, Miles's operation for, 1798.

PUBLIC HEALTH:—Health of English and Scotch towns, 60, 120, 191, 256, 319, 380, 439, 503, 622, 688, 751, 847, 940, 1024, 1131, 1219, 1303, 1382, 1463, 1542, 1618, 1683, 1765, 1831, 1883; vital statistics of London sanitary areas, 318, 1302; English urban mortality, 255, 1130; the Registrar-General's quarterly return, 439, 1382; zymotic mortality in London, 502, 1381; books for the examination for diploma in, 507, 549; regulation for diplomas in, 549; a State department of, 923; the work of the medical societies in its relation to, 1339; statistics, 1468; in the City of London, 1831; in Russia, 1835.

— authorities and School Boards co-operation between, 1766.

Puerperium, complicated by haemorrhage into the broad ligament, 210; the, and measles, 1467.

Puffing, paragraphic, 626, 851.

Pullen-Burry, Mr. H. B., the remuneration of the general practitioner, 432.

Pullin, Mr. B. G., Sidmouth new sewerage works, 1827.

— Dr. T. H. S., Sidmouth new sewerage works, 1827.

Pump for artificial respiration, 142.

Puncture in bicycle tyre, localisation of, 851.

Purchas, Mr. F. M., axis traction forceps, 598.

Purchase, ethics of, 442.

Purpura, haemorrhagica, a case of, 1610; Henoch's, 1800.

Purslow, Dr. C. E., hysteropexy for prolapse of uterus, 684; abscess of ovary, 1728.

Pus tubes, the comparative frequency of appendicitis as a complication of, 1071.

Pyæmia rapidly fatal, tonsillitis, accompanied by, 651.

Pye, Mr. W., Elementary Bandaging and Surgical Dressing for the Use of Dressers and Nurses, rev., 1343.

Pyelonephritis, suppurative, 1728.

Pye-Smith, Dr. P. H., on science and practice, 981.

Pyloreectomy for cancer of the pylorus, 1264, 1632.

Pylorus, stricture of the, Loretta's operation, 1089; pyloreectomy for cancer of, 1264, 1630.

Pyromyoma complicating cancer of cervix, 1722.

Pycopneumothorax of several months' duration cured by free incision with some remarks on the surgical treatment of pneumothorax, 1568, 1576; from fishbone perforating the oesophagus, 1573.

Pyrogallic acid, death from poisoning by, 81; treatment of poisoning by, 188.

Q

Quackery, advertising, and unqualified practice, 1835, 1887.

Quain, Sir R., on the cause of the first sound of the heart, 95.

Quebec, practice, etc., in, 1623.

Queen, the, the health of, 38; and the Commemoration Number of the B.M.J., 287; accepts Surgeon-Colonel J. MacGregor's "Jubilee Poems," 413; honorary physicians and surgeons to, 1445; the visit of to Cimiez, 1807.

Query, a medico-ethical, 195.

Quassada, Dr. A., and the yellow fever bacillus, 730.

Question, a surgico-legal, 118.

Questions, a string of, 63.

Quine, Dr. R. H., a sanitary dustbin, 1271, 1650.

Quod scripti, 1355.

R

Rabagliati, Dr. A., Air, Food, and Exercises, an Essay on the Predisposing Causes of Disease, rev., 1803.

Rabies at Hastings, 752.

Radcliffe Library. *See Library*.

Radius, A Clinical, Pathological, and Experimental Study of Fracture of the Lower End of the, with Displacement of the Carpal Fragment toward the Flexor or Anterior Surface of the Wrist, Professor J. H. Roberts, rev., 87.

Rae, Mr. G. A., injection of pilocarpin in puerperal eclampsia, 706; painless cure of hydrocoele with carbolic acid injection, 906.

Railway, South Indian, reorganisation of medical staff of, 1683.

servants, continental and British vision tests for, 1085.

Railways, underground, the ventilation of, 1198.

Rales, bronchial breathing and, 65.

Ramsden, Mr. H. K., suture of extensively separated tendons, 1088.

Ramsgate, new convalescent home at, 788.

Ramskill, Dr. J. S., the will of, 1003.

Rashes, antidiiphtheria serum, 707.

Rattray, Dr. J. M., case of bradycardia with rapid remission and fatal recurrence, 1252.

Rauschenbusch, Dr. F., on Behring's serum, 481.

Raven, Mr. T. F., regrowth of hair in myxedema under treatment with thyroid tabloids, 274.

Raw, Dr. N., presentation to, 1018; acute tuberculosis of pleura, 1800.

Rawlins, Mr. H. A., sea sickness: its cause, and measures to be taken for its relief, 468.

Ray, Mr. J. H., molluscum fibrosum and fibrolipoma of arm, 1800.

Raynaud's disease. *See Disease*.

Reactions and reagents, 361.

Reade, Surgeon-General H. T., death of, 57; and the Victoria Cross, 118; tribute of respect to, 252.

Reading through opaque bodies, 1875.

Reagents and reactions, 361.

Reckitt, Surgeon-Major J. D., opium poisoning, permanganate of potash treatment, recovery, 1000.

Rectum, high cancer of the, the operative treatment of, 16, 1064; disease of the, 367; trans-sacral excision of the, 1066; atony of the, 1467.

Redard, Dr., angular deformity of the spine treated by immedial reduction, 1642.

Redlich, Dr. E., Die Pathologie der tabischen Hinterstrangserkrankung, rev., 908.

Reed, Mr. R. R., death of, 824.

Rees, Mr. D. C., beri-beri a "place" disease, not a food disease, 747.

Referee, medical, to friendly societies, 173.

Reference works of, 259.

Reflexes, in psychiatry, 779; a study of, 1824.

Refraction, instruction in, 1467.

Registrar of births and deaths, parochial medical officer as, 1610.

Registration of trade accidents, 80.

Regnard, Dr. P., La Cure d'Altitude, rev., 655, 744.

Reid, Dr. E. W., an examination paper in physiology, 188; absorption of isotonic fluids from the intestine, 610.

— Mr. G. A., the temperance question, 1759.

— Sir James made baronet, 37.

— Surgeon S. T., a case of chloroform poisoning in which nearly half a grain of strichnine was injected, recovery, 1498.

— Dr. T. W., a continuous current water bed, 1824.

Reigate, the town council of and insanitary dwellings, 1808.

Reilly, Mr. F. B., death from poisoning by pyrogallic acid, 81.

Reinhardt, Dr. C., Nordrach in the Black Forest as a health resort, 362.

Renner, Dr. C., glycerinated calf lymph, 1298; the vaccination problem, 1879.

Rénon, Dr. Etude sur l'Aspergillose chez les Animaux et chez l'Homme, rev., 22.

Renshaw, Mr. K., intussusception of the vermiform appendix, 1770.

Renton, Dr. J. C., the signs and symptoms of perforated gastric ulcer, with notes of two cases in one of which operation was successful, 453.

Rentoul, Dr. R. R., the Midwives Bill opposition and his £50, 51, 187, 251; Draft Bill for the Registration of Midwifery, Medical, and Surgical Nurses, 117; and the General Medical Council, 665, 835; on Sir Walter Foster's candidature, 921; the resignation of membership of General Medical Council by, 1536, 1615, 1760; the General Medical Council and payment of fees of, 1748, 1811.

Reprints, circulation of, 1886.

Reservoirs and sedimentation tanks, 1660.

Resistance exercise, effect of upon the circulation in man, 1073  
 Respiration, artificial, pump for, 142; of Man, A Contribution to the Study of, Dr. W. Marcell, rev., 1512  
 Responsibility of criminal, the test of and insanity, 40  
 Rest, the importance of in the treatment of acute phthisis, 1418  
 Retinitis pigmentosa, without the characteristic pigmentation, 1060; albuminuria, case of, 1506  
 Retreats, reports of the inspectors of, 849  
 REVIEWS AND NOTES ON BOOKS:—Jellett, H., A Short Practice of Midwifery, embodying the Treatment Adopted at the Rotunda Hospital, Dublin, 21; Hart, Mrs. E., Picturesque Burma, Past and Present, 16; Martin, F. H., Lectures on the Treatment of Fibroid Tumours of the Uterus, Medical, Electrical, and Surgical, 22; Renon, Dr., Etude sur L'Aspergillose chez les Animaux et chez l'Homme, 16; Tomes, J., A System of Dental Surgery, 23; Transactions and Reports, etc., 16; Kutner, R., Technik und praktische Bedeutung der Asepsis bei der Behandlung der Harnleiden, 16; Rogers, J. G., Report on the Epidemic of Cholera in Egypt during the Years 1805 and 1806, 85; Cabot, R. C., A Guide to the Clinical Examination of the Blood for Diagnostic Purposes, 16; Waller, A. D., Exercises in Practical Physiology, 16; Swain, P., Surgical Emergencies, 86; Claude, H., Essai sur les Lésions du Foie et des Reins déterminées par certaines Toxines, 16; Thompson, E. P., Roentgen Rays and Phenomena of the Anode and Cathode, 16; Harbitz, F., Om Endokardit, dens pathologiske Anatomi og Aetiologi, 16; Vicent, F., Bacteria of the Spouts and Cryptogamic Flora of the Mouth, 87; Kocher, T., Chirurgische Operationslehre, 16; Terrier, F., Chirurgie de la Face, etc., 16; De Ruyter, G., and Kirchoff, E., Compendium der speciellen Chirurgie, 16; Roberts, J. B., A Clinical, Pathological, and Experimental Study of Fracture of the Lower End of the Radius, with Displacement of the Carpal Fragment toward the Flexor or Anterior Surface of the Wrist, 16; Gabbi, U., Semeiotica: Breve Compendio dei Metodi fisici di Esempi degli Enfermi, 88; Nunn, J. A., Notes on Stable Management in India and the Colonies, 16; Brown, A. M., Molière and his Medical Associations, Glimpses of the Court and Stage, The Faculties and Physicians of the Grand Siècle, 139; Pollak, B., Die Färbetechnik des Nervensystems, 140; China, Imperial Maritime Customs, Medical Reports for the Half Year ended March 31st, 1896, 16; Hewitt, F. W., the Administration of Nitrous Oxide and Oxygen for Dental Operations, 16; Hebb, R. G., The Westminster Hospital Reports, 16; The Transactions of the Fourth Session of the International Medical Congress of Australasia, 141; International Clinics, 16; Year Book of the Scientific and Learned Societies of Great Britain and Ireland, 16; The Municipal Year Book for 1897, 16; Norris, W. F., and Oliver, C. A., A System of Diseases of the Eye, 220; Merkel, F., and Bonnet, R., Ergebnisse der Anatomi und Entwicklungsgeschichte, 221; Cheyne, W. W., The Treatment of Wounds, Ulcers, and Abscesses, 222; Wilson, E. M., Notes on Malaria, 16; Calendar of the University of Sydney, 16; Murrell, W., What to Do in Cases of Poisoning, 16; Toxicology, 16; Peers, G. R., Electricity, 16; Hare, H. A., Practical Diagnosis, 16; Waring, H. J., Diseases of the Liver, Gall Bladder, and Biliary System, their Pathology, Diagnosis, and Surgical Treatment, 277; Mittheilungen aus der gynaekologischen Klinik des Professor Dr. Otto Engström in Helsingfors, 16; Sutton, J. B., Ligaments, their Nature and Morphology, 278; Bottini, E., La Chirurgia del Collo, Studio Clinico, 16; Reynolds, S. H., The Vertebrate Skeleton, 16; Wright, L., The Induction Coil in Practical Work, including Roentgen Rays, 16; Kidd, J., Heart Disease and the Nauheim Treatment, 16; Allbutt, T. C., A System of Medicine by Many Writers, 343, 1432; Pearson, K., The Chances of Death and Other Studies in Evolution, 345; Atkinson, Prevalence of Bubonic Plague in the Colony of Hong Kong during the Years 1895 and 1896, 16; Lescher, F. H., Recent Matteria Medica, 346; Malchior, M., Cystitis und Urininfektion, klinische, experimentelle und bakteriologischen Studien, 16; Monell, S. H., A Manual of State Electricity in X-Ray and Therapeutic Uses, 16; Beschreibung der Nordsee-Bäder, Sylt, Westerland und Wangenstadt, 16; Bramwell, B., Atlas of Clinical

Medicine, 404; Brunton, T. L., Lectures on the Action of Medicines, 16; Legueu, F., De l'Appendicite, 16; Roberts, T. K., The Spas of Wales, 16; Brouardel, P., Death and Sudden Death, 405; Smith, J., Fruits and Farinacea the Proper Food of Man, 16; Report of the Commission sent by the Egyptian Government to Bombay to Study Plague, 16; Panser, R., Die Schwerhörigkeit durch Starrheit der Paukenfenster, 406; Burdett, H., Burdett's Hospitals and Charities, 472; Latham, P. W., On the Synthesis and Molecular Constitution of Dead and Living Proteid, 16; Cooke, W., The North-Western Provinces of India, their History, Ethnology, and Administration, 16; White, J. W., and Martin, E., Genito-Urinary Surgery and Venereal Diseases, 473; Bosworth, F. H., A Textbook of Diseases of the Nose and Throat, 16; Schottländer, J., Ueber Eierstockstüberkulose, 474; Windle, B. C. A., Life in Early Britain, 16; Gager, C., Bad Gastein, nach den neuesten Hilfsquellen, 16; Waring, E. J., Remarks on the Uses of some of the Bazaar Medicines and Common Medical Plants of India, 475; Jack, F. B., the Art of Cooking for Invalids, 16; Starr, L., Diets for Infants and Children in Health and Disease, 16; Althaus, J., the Value of Electrical Treatment, 16; Kenny, M. J., Diet Chart and Alimentary Index, 16; Pringle, J. J., A Pictorial Atlas of Skin Disease, etc., 16; Polatoboff, Professor, Einleitung in den Cursus der Dermatologie, 16; Owen, E., The Surgical Diseases of Children, 536; Yeo, I. B., Food in Health and Disease, 16; Walsh, D., Excretory Irritation, and the Action of Certain Internal Remedies on the Skin, 597; Clark, C., Manual of Mental Diseases, 16; Bezzold, F., Ueber die Funktionelle Prüfung des menschlichen Gehörgangs, 16; Schill, Dr. G., Beck's Therapeutischer Almanack, 598; Robson, A. W. M., Diseases of the Gall Bladder and Bile Ducts, 654; Solly, S. E., A Handbook of Medical Climatology, 16; Regnard, P., La Cure d'Altitude, 65; Stevenson, W. 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handlung des Congresses für innere Medicin, *ib.*; Transactions and Reports, *ib.*

Reynolds, Dr. E. S., peripheral neuritis connected with pregnancy and the puerperal state, 1080; pseudo-hypertrophic paralysis, 1799

Surgeon J. H., and the Victoria Cross, 1381

Mr. S. H., The Vertebrate Skeleton, *rev.*, 278

Rheumatism, Chronic Articular, and its Treatment, Dr. C. Baumer, *rev.*, 813; and its Treatment by the use of the Percuso-Punctator, Mr. J. B. James, *rev.*, 814; the localising factor in, 1264

Rhinoplasty, cases of, 1181

Ribs, fracture of, puncture of lungs, surgical emphysema, 341; cervical, case of, 1638

Rice, Dr. E., death under ether, 1193

— Dr. W. K., depressing effect of sodium salicylate, 1500

Richardson, Dr. M. W., the Elsner and allied methods in the diagnosis of typhoid fever, 1842

Riche, Professor C., refractory period in nervous centres, 672; the work of Pasteur and the modern conception of medicine, 693; the treatment of insomnia, 803; on anaesthetics, 1476

Richmond, Mr. C. E., sarcoma of bone, 1800

— Mr. W. S., seat saddle for cycles, 279

Rickets and Scrofula, The Nature of and their Treatment, Dr. K. Elze, *rev.*, 709

Rideal, Dr. A. H., Dr. Rentoul's resignation, 1615

Ridley, Mr. N. C., secondary sarcoma of the orbit, 1799

Rigby, Dr. J. A., address of as candidate for General Medical Council, 837; the Preston Medico-Ethical Society and the candidature of, 838; and Sir Walter Foster's candidature, 934; letter of thanks from, 1282

Rinderpest, Koch's method of inoculation for, 98, 347, 682; French investigations as to, 603; preventive inoculation for, 1015, 1758; an immunising serum against, 1517; importation of into England, 1771

Ringworm of the scalp, treatment of, 507; the biology of, 876

Ritchie, Dr. J., Manual of Bacteriology, *rev.*, 1094

Rivers, pollution of, 741

Riviera, sanitary arrangements on the, 1018

Rix, Dr., on disguised advertisements, 1528

Roberts, Mr. C., Sussex sunshine, 1770

— Professor J. B., a Clinical, Pathological, and Experimental Study of Fracture of the Lower End of the Radius, with Displacement of the Carpal Fragment towards the Flexor or Anterior Surface of the Wrist, *rev.*, 87

— Mr. T. R., The Spas of Wales, their Medicinal and Curative Properties, *rev.*, 404

— Sir W., the Harveian oration on science and modern civilisation, 1167

— Mr. W. W., death of, 433

Roberts-Jones, Mr. M., The Workmen's Compensation Act Reviewed, *rev.*, 1003

Robertson, Dr. D. A., valedictory address to the Edinburgh Medico-Chirurgical Society, 1426

— Dr. J., presentation to, 821, 871

— Dr. W., traumatic aneurysm of the ulnar artery in the palm cured by tying the ulnar artery above the wrist, 1637

— Dr. W. F., histology and pathology of the neuroglia, 403

— Dr. W. H., death of, 376

Robinson, Mr. H. B., a successful case of retro-peritoneal uretero-lithotomy, 648

— Dr. Tom, a suspensory "girdle," 142

Robson, Mr. A. W. M., a case of perforating wound of the abdomen in which the superior mesenteric vein was wounded, ligature of vein, lavage of abdomen, transfusion, recovery, 77; Diseases of the Gall Bladder and Bile Ducts, *rev.*, 654; two cases in which Porro's operation was performed for impacted pelvic tumours preventing delivery, 1140; iodoform in surgical tuberculosis, 1339

— Mr. H., two cases of chronic follicular tonsillitis in which the tonsils were hidden by an expansion backwards of the anterior pillars of the soft palate, 340

Rochester, contamination of water supply of, 1219

Roddick, Dr. T. G., Canada in its medical aspects, 569

Roe, Dr. J. O., the correction of nasal deformities by subcutaneous operations, 1397

Roentgen, Professor, on the x rays, 114

— Rays and Phenomena of the Anode and Cathode, Mr. E. P. Thompson, *rev.*, 80;

Professor Roentgen on the nature of, 114; action of on tuberculosis, 247; deep tissue traumatism from Roentgen ray exposure, 272; the physiological effects of, 298; and the skull, 616; canards as to, 649; at Malakand, 666; skin affections caused by, 841; as a means of detecting small, deeply-placed stones in the exposed kidney, 1075; at the Indian frontier, 1742

Rogers, Dr. B. M. H., typhoid fever at Clifton, 1877

— Dr. E., on cholelithiasis, 1245

— Mr. F., on the employment of parturient women in factories, 729

— Dr. J. G., Report on the Epidemic of Cholera in Egypt during the Years 1895 and 1896, *rev.*, 85

Rohé, Dr. G. H., the etiological relation of pelvic disease in women to insanity, 766, 774; on melancholia, 779

Rolleston, Dr. H. D., spontaneous fracture of gall stone in gall bladder, 1504; peripancreatic cyst, 1797

Rolston, Mr. J. R., microphthalmos with cystic protrusion into the globe, 84

Romanes, Mr. J. G., Darwin and after Darwin, *rev.*, 1648

Rome, correspondence from, 311, 1028, 1123, 1533; foreign practice in Italy, 311; the Italian foundling hospitals, *ib.*; honours to Professor Sanarelli, *ib.*; an epidemic of diphtheria arrested by serum prophylaxis, *ib.*; Professor Lustig's serum treatment of plague, 1028; Dr. Mendini's Hygienic Guide to Dr. J. Eyre, *rev.*, 1093; jubilee of Professor Durante, 1123; a forthcoming congress in, *ib.*; Professor Sanarelli, *ib.*; foundling hospitals and syphilis in Italy, *ib.*; the Congress of Internal Medicine, 1533; the Congress of the Italian Society of Obstetrics, *ib.*; the Congress of the Ordini dei Medici and foreign practitioners in Italy, *ib.*; Catholic medical guild in, 1744

Romford, the guardians of and medical fees, 39

Rooms, the disinfection of, 1018

Ross, Dr. J., non-surgical treatment of boils, etc., 870

— Dr. J. F. W., dislocation of the kidney, 965; menstruation (?) in newborn infants, 1039; the diagnosis and treatment of intrapelvic tuberculous disease, 1144

— Surgeon-Major R., illness of, 163; some peculiar pigmented cells found in two mosquitoes fed on malarial blood, 1786

— Mr. S. J., two cases of laceration of the tongue, 1000; penetrating wound of chest and abdomen, 1088; the treatment of high temperature in anaemic patients, 1308; unqualified assistants, 1877

— Mr. W. P., death of, 686

Roth, Mr. B., analysis of 1,000 cases of lateral curvature of the spine treated by "posture and exercise" exclusively (without mechanical supports), 958

— Dr. F., the treatment of non-naval surgeons when attached to the Royal Navy, 681

Roué, Dr. B., lubricant for catheters, 851; electrolysis for redundant hairs, 1307

Roughton, Mr. E. W., empyema of the antrum of Highmore, 1577

Roumania, inebriety in, 508; rules for British practitioners in, 561

Roy, Professor C. S., obituary notice of, 1031; Professor J. McKendrick on, 1124

Royal Medical Guide, Drs. G. H. and J. E. Brandt, *rev.*, 657

Rumination in man, 1812

Russell, Miss H. D., a case of fibro-cyst of the uterus, abdominal hysterectomy, recovery, 708

— Dr. J., the after-effects of surgical procedure on the generative organs of females for the relief of insanity, 770, 774; the relation of insanity to the State, 783

— Dr. J. B., the chair of surgery in Glasgow and the Western Infirmary, 1449

— Dr. J. S. R., an experimental investigation of the cervical and thoracic nerve roots in relation to the subject of wry-neck, 1172

— Dr. J. W., lead poisoning, 1727

Ryan, Mr. R. P., Landry's paralysis, 15

Ryde, laying of foundation stone of Royal Isle of Wight Infirmary at, 602

Rye, Mr. A. B., death of, 749

Rymer, Mr. J. F., conservative dentistry in schools, 1467

S. Sack race, a medical, 1115

Saddle (seat), for cycles, 279; the Christy anatomical, 406

Saddles, cycle, 195, 755

"Safaiwallah," the, the unpopularity of, 97

Saglione, Dr. C., death of, 1604

Saint, a medical, 252

St. Columb Major, the notification of disease at, 1543

St. George the Martyr, Southwark, the vestry of and the reports of their medical officer of health, 848

"St. James's Gazette" on Brighton as a health resort, 444

St. Lucia as a health resort, 658

St. Matthew, Bethnal Green, notices as to removal of nuisances in, 440

St. Ouen, freedom of from tuberculosis, 678

St. Paul's, the State medical service at, 976, 1200

St. Petersburg, correspondence from, 49, 247, 1123, 1532; the International Medical Congress, 49, 247; the reception of deputations to the Czar, 247; an international prize, *ib.*; proposed international Jenner Society, *ib.*; the general meetings and orations, 248; trade diseases connected with the petroleum industry, 1123; new psychiatric and neurological museum in, *ib.*; vital statistics of, 1532; opening of the Pirogov museum, 1533; Professor Virchow and the Moscow students, *ib.*; a new medical society at, *ib.*

St. Thomas, Southwark, the church of, 1590

St. Vincent as a health resort, 658

Salary, stamped receipts for, 1039; Poor law, income tax and, 1684

Salol in typhoid fever, 1214, 1373

— calculi, 78

Salts, certain chemical, action of on the heart beat of the embryo of fundulus magellus, 1483; of lime and cirrhosis of organs, 1080

Samways, Dr. D. W., the choice of hotels at health resorts, 1467

Sanarelli, Professor G., on yellow fever, with a description of the bacillus ictericoides, 796; honours to, 311; rewards for, 479; interview with, 732; and the curative serum for yellow fever, 1116; proposed visit of to Italy, 1123; the serumotherapy of yellow fever, 1101

Sancta Maria Lodge of Freemasons, formation of, 1544

Sanders, Dr. C., closet accommodation for factories, 1135

Sandwith, Dr. F. L., antivenomous properties of the bile of serpents, 251

Sanitary inspectors. *See* Inspectors.

Institute. *See* Institute.

— organisation, Dr. E. Seaton on, 1015

Sanitation, the outcome of, 925

Sankey, Dr. E. H. O., glycosuria in the insane, 1259

Sanson, Dr. A. E., the investigation of some of the disorders of the heart, 1090; early experimental evidence concerning chloroform anaesthesia, 1680

Sarah Acland Nursing Home at Oxford, progress of, 1464

Sarcoma in the infraspinatus muscle, excision of scapula for, 457; idiopathic multiple pigmented (Kaposi type), 866; spindle-celled, weighing 4 lbs. 4 oz. removal of, 1182; removal of the scapula for, 1578; melanotic, four unusual cases of, 1721; non-recurrent orbital, 1798; secondary of the orbit, 1799

Sarcomata of bone, 1800

Saundby, Dr. R., the treatment of insomnia, 863; the dietetic treatment of diabetes, 1041

Savill, Dr. T. D., small-pox at Warrington in 1892-93, 1346; the aerial spread of small-pox, 1538, 1680, 1828

Sawyer, Sir J., on work and sleep, 1663

Scalp, multiple cutaneous gangrene of the, in a cachetic child, 13; treatment of ringworm of the, 507

Scapegoat, wanted a, 1288

Scapula, excision of for sarcoma in the infraspinatus muscle, 457; removal of for sarcoma, 1578

Schaeffer, Dr. O., Atlas and Essentials of Gynaecology, *rev.*, 1186

Scharlieb, Mrs., surgery at the New Hospital for Women in 1896, 338

Schedules for Plant Description, Mr. J. Wishart, *rev.*, 1002

Schill, Dr. E., Dr. G. Beck's Therapeutischer Almanack, *rev.*, 598; Jahreshericht ueber der Fortschritte der Diagnostik im Jahre 1896, *rev.*, 657

Schmeidemühl, Dr. G., Lehrbuch der vergleichenden Pathologie und Therapie des Menschen und der Haustiere, *rev.*, 656

Schmelz, Dr., Gynécologie Clinique et Opératoire, *rev.*, 1270

School, private, for feeble-minded lad, 943; or factory, 1526  
Catholic University Medical, instruction at, 537; fees at, 539  
of Instruction, Volunteer Ambulance, the proficiency examination of, 1539; distribution of prizes at, 1839  
of Medicine of the Royal Colleges, Edinburgh, instruction at, 535; opening of winter session at, 555; students at, 1683  
of Medicine for Women, Edinburgh, instruction, etc., at, 535; opening of winter session at, 555; students at, 1683  
of Medicine for Women, London, instructions, etc., at, 530; fees at, 539; opening of winter session at, 555; opening address at, 998; conversazione at, 1008; and the proposed teaching university for London, 187  
of Medicine for Women, St. Petersburg, study, etc., at, 508  
of Pharmacy of the Pharmaceutical Society, opening of session, etc., at, 1009  
of Physic in Ireland, instruction at, 537; fees at, 539  
Schools, barrack and the demands of the B.M.J., 166; metropolitan district and separate reports on the hygienic condition and administration of, 285, 413, 674, 1095; scientific temperance teaching in, 728; medical, etc., entries at, 1105; disinfection of scarlatinal puerperal fever, 1223; conservative dentistry in, 1288, 1467; Board, overcrowding in, 1444; infectious diseases in, 1467  
of Surgery of the Royal College of Surgeons in Ireland, instruction at, 537; fees at, 539  
Schnölländer, Dr. J., Ueber Eierstockstuberculosis, rev., 474  
Schott's treatment of cardiac diseases, 216, 433  
Schwartz, marriage and longevity, 1347  
Schwarzbach, Dr. B., eserin on sea voyages, 324  
Sciatica, the treatment of, 1340  
Science, and practice, Dr. F. H. Pye-Smith on, 981; and modern civilisation, Sir W. Roberts on, 1167  
cotland, and the jubilee, 40; rural, sanitation in, 63; the dispensing of medicines in, 1222  
Scott, Mr. J., inability to speak and defence to criminal proceedings, 1761  
Dr. L., experiments on the solubility of gall stones in oils, 798  
Scripture, Dr. E. W., The New Psychology, rev., 1732  
Scriven, Dr. J. S., the treatment of skin disease, 383; unqualified assistants, 1877  
Scurvy, infantile in the United States, 1684  
Sea sickness, its cause and measures to be taken for its relief, 468; treatment of, 628  
Seaton, Dr. E., on sanitary organisation, 1015; the work of the medical societies in its relation to public health, 1339  
Soborrhœa capitis, treatment of, 1887  
Secrecy, professional, 195, 615, 687, 1130  
Sedimentation tanks and reservoirs, 1660  
Selby, Dr. E. W., chronic intestinal obstruction due to a tumour of the ileum, 1578  
Selby, foundation of museum at, 1620  
"Selection" of ideas, 1126  
Seligmann, Mr. C. S., hatching bilharzia ova, 1338; two examples of malformation in fish, 1504  
Semiotica, Dr. U. Gabbi, rev., 88  
Semple, Surgeon-Major, visit of to Maidstone, 1015; illness of, 1114  
Sept, an Irish, the story of, 669  
Septicæmia, puerperal, serumtherapy in, 899, 1257; puerperal, case of, 1340  
Septum ventriculorum perforate, 1174  
Serpents, and other animals, the antivenomous properties of the bile of, 125, 251, 595  
Serum, treatment of typhoid fever by, 81; diagnosis of typhoid fever by, 266, 431, 1118, 1665, 1723, 1773, 1774, 1775, 1777, 1778; treatment of leprosy by, 417; examination of 100 cases of typhoid fever by, 1077; reaction of in doubtful cases of fever, 1267; some practical points in diagnosis by, 1852  
antidiphtheria, diphtheria treated by, 810  
— antipneumococcal, 1849  
— antirinderpest, report on, 164, 1517  
— antistreptococcal in the treatment of puerperal fever, 14; in septic absorption, 805; a severe case of facial erysipelas treated by, 1718  
— antitetanus, value of, 372; treatment of tetanus by, 460  
— antitoxic, bacteriology and, 383  
— antivenomous, successful use of, 1456  
Behring's, Dr. F. Rauschenbusch on injections of, 48; the action of in diseases not due to the Klebs-Loeffler bacillus, 1709

Serum, the plague, 1295  
— therapeutic, the preparation of, 1753  
Serumtherapy in puerperal septicæmia, 899, 1257; of yellow fever, 1101  
Servant, liability of master for attendance on, 1130  
Services, the public, from the medical point of view, 1820  
Sevenoaks as a health resort, 1189  
Severn, Mr. W. D., cases of follicular tonsillitis due to milk infection, 339  
Sewage, scientific treatment of, 833  
Sharman, Dr. H., certain points in the causation and treatment of spinal curvature, 432  
Sharp, Dr. G., the founder of Bands of Hope, 499  
Shattock, Mr. S. G., the negative action of sewer air in raising the toxicity of lowly virulent diphtheria bacilli, 1721  
Shattuck, Dr. F. C., on rheumatoid arthritis, 1228  
Shaw, Dr. J., acute incipient mania arrested by hyoscine, 652  
— Dr. J. B., the treatment of pruritus, 443  
Shaw-Mackenzie, Dr. J. A., haemorrhagic endometritis, 1798  
Shears, Mr. C. H. B., traumatic cyst of iris, 1858  
Sheffield, medical education in in the Queen's reign, 29; smoke abatement at, 99; visit of the Dangerous Trades Committee to, 1766  
Shellfish, sewage contaminated, 478; and typhoid fever, 1602  
Shepherd, Dr. F. J., the teaching of anatomy, 8-8; successful removal of an enormous mesenteric tumour and nearly eight feet of intestine, 966; strangulation of a loop of the ileum through a hole in the mesentery, 976  
Sheppard, Dr. E., obituary notice of, 1377  
Sherrington, Prof. C. S., sensory organs of voluntary muscle, 1508; A Textbook of Physiology, rev., 1732  
Ships, water for, 350  
Shirts for cyclists, 755  
Shoemaker, Dr. J. V., the treatment of syphilis, 1313  
Shore, Dr. L., on anaesthetics, 1477  
Shoulder presentation, neglected, complicated by rupture of the uterus, recovery, 276  
Shurly, Dr., the relation of nasal diseases to pulmonary tuberculosis, 1395; in laryngeal paralysis, 1306  
Shuttleworth, Prof., the relation between scarlet fever and milk, 730  
Sichel, Surgeon G., pemphigus contagiosus, 1253  
Sick, infectious visitation of by sanitary officer, 320  
Sickness, pauper, certifying, 320  
Siddall, Dr. J. B., vaccination in Japan, 1374  
Sidmouth, new sewerage works for, 1750, 1827  
Sierra Leone, sanitary neglect and its consequences at, 623; pernicious malarial fevers of, 1262  
Sight tests in the mercantile marine, 100, 1447  
Silk, Dr. J. F. W., the causation of chloroform syncope, 313  
Simonin, M., the pathogenesis of dust, 1114  
Simpson, Dr. W. J., retirement of, 1016  
Sinclair, Dr. W. J., the injuries of parturition, the old and the new, 589; on hyperemesis gravidarum, 1139  
Sinkler, Dr. W., on melancholia, 779  
Sinhuher, Dr., on the deodorising effects of pulverised earth, 606  
Sinus, cerebral, thrombosis of, 1089, 1166  
Sisters, twin. *See* Twin  
Sitalpur, cholera at, 1112  
Skeleton, The Vertebrate, Mr. S. H. Reynolds, rev., 278  
Skene, Dr. A. J. C., on hyperemesis gravidarum, 1138  
Skerritt, Dr. E. M., prognosis in heart disease, 1327  
Skin, the treatment of disease of, 383; eruptions on, occurring in patients already suffering from infected wounds, 804; manual on diseases of, 851; the importance of general therapeutic measures in the treatment of diseases of, 871; pathological pigmentation preceding malignant growth of, 873; action of thyroid extract on, 1334; eruptions on and infected wounds, 1335  
Skin-grafting by Thiersch's method, 1759, 1858  
Skull, radiography of the, 616  
Slaughter, Mr. W., an invalid piano, 1650  
Sleep and work, 1663  
Small-pox and vaccination, statistics of, 25, 33, 161, 485; in the German and French armies, 323; and vaccination in Germany, 443; the age incidence of mortality from, 668; the outbreak in Wotton asylum, 673; in Cyprus, 832; in Glasgow, 848; at Larnaca, 1031; at Leicester, 1585  
— of Apothecaries. *See* Apothecaries  
Balneological and Climatological, British, meeting of, 19, 1510, 1801  
Charity Organisation and the proposed central Hospital Board, 1739, 1813  
— Charitable nurses, report of, 12  
— of Chemical Industry, annual meeting of, 328  
Clinical, of London, introductory re-

marks by president, 1080; stricture of the pylorus, Loreta's operation, *ib.*; cerebral sinus thrombosis, *ib.*; cesophagotomy complicated by cellular emphysema, 1090; multiple congenital dislocations, 1203; primary tuberculosis of the nasal cavities, *ib.*; hemiplegia in a young child, *ib.*; paraplegia with multiple subcutaneous nodules, *ib.*; localised blushing and sweating on eating, *ib.*; pyloromyotomy for cancer of the pylorus, 1264; symmetrical deformity of hips in a youth, *ib.*; distensible naevus of frontal region with defect of the subjacent bone, *ib.*; angular deformity of the spine treated by immediate reduction, 1501, 1642; acute intestinal obstruction relieved by operation, death on the ninth day from intestinal toxæmia, 1795; a case of radical cure of inguinal hernia, injury to the bladder, formation of phosphatic calculi, lithotomy, recovery, 1796; fifteen consecutive cases of intussusception, *ib.*

Society, Dermatological of Great Britain and Ireland, meeting of, 84, 1340, 1728

Epidemiological, the International sanitary conferences of the Victorian era, 166

of Fellows of the Royal College of Surgeons of England, annual meeting of, 192

Globe, Sick and Benefit, annual report of, 756

Gynaecological, British, specimens, 228, 1183, 1797; the mechanism of inversion of the uterus, 218; escharotics in the treatment of uterine cervical cancer, 219; dysmenorrhœa, 1183; meeting of, 1510; haemorrhagic endometritis, 1798

Gynaecological and Obstetrical, North of England, meeting of, 20, 1730

Harveian, of London, creasote in consumption, 1266; meeting of, 1427; the treatment of lateral curvature of the spine, 1507; hernia of the abdominal cicatrix and operations for its cures, 1576; empyema of the antrum of Highmore, 1577; annual dinner of, 1685

Hunterian, medical haemorrhages, 1506; pruritus vulvae, 1507; chronic dry catarrh of the middle ear, 1722; microscopic examination of uterine curvatures, *ib.*; meeting of, 1859

Incorporated, of Medical Officers of Health, the presidency of the metropolitan branch of, 372

the Jenner, objects, etc., of, 227

Laryngological, of London, meeting of, 138, 1729

Medical, Birkenhead, annual meeting and list of officers, 1212; meeting of, 1581, 1860

Medical, Bolton and District, annual dinner of, 1305

Medical, Bournemouth, annual meeting and list of officers, 1341

Medical, Cambridge, meeting of, 624

Medical, Chester, annual meeting of, 1544

Medical, Folkestone, meeting of, 1342, 1801

Medical, Glasgow Eastern, resolutions of as to the Public Health (Scotland) Bill, 30

Medical, Glasgow Southern, office-bearers, etc., of, 1072; meeting of, 1647, 1731

Medical, Kidderminster, meeting of, 20, 1732

Medical of London, presidential address on the investigation of some of the disorders of the heart, 1090; John Arderne and his time, 1091; the localising factors in rheumatism and chorea, 1264; thyroid treatment, 1423; Coley's fluid, *ib.*; cases, *ib.*; pyoepitheliotrichia of some months' duration cured by free incision, 1576; mechano-therapy of movable kidney, *ib.*; case of pancreatic cyst treated by incision and drainage, 1797; case of peritoneal-cyst, *ib.*; case of complete removal of a multilocular cyst of the pancreas, *ib.*

Medical, Manchester, meeting of, 1580; pseudo-hypertrophic paraparesis, 1799; skin-grafting by Thiersch's method, *ib.*; Henoch's purpura, 1800; case, *ib.*

Medical, Midland, annual meeting and list of officers, 1268; meeting of, 1428; new members, 1647; excision of elbow-joint for tuberculous disease, *ib.*; colitis, *ib.*; cyst of broad ligament, *ib.*; syphilitic lesions, *ib.*

Medical, Newport, meeting of, 1581

Medical and Chirurgical, North London, meeting of, 173, 1859

of Medical Officers of Health, annual meeting, presidential address, 1339

of Medical Phonographers and Sir W. Gowers, 1657

Medical Sickness Annuity and Life Assurance, meeting of Executive Committee of, 26, 282; 1010, 1435, 1746; and cycling accidents, 676

Society, Medical, South West London, meeting of, 1580; the Medical Acts of Parliament—as they are and as they ought to be, 1748

Medical, Ulster, annual meeting and list of officers, 220, 1727; vote of thanks to retiring president, 1727; the problem of the consumptive poor, *ib.*; annual meeting of, 1767; skin grafting by Thiersch's method, 1858; private obstetric practice, *ib.*; hospital obstetric practice, *ib.*; miscellaneous, *ib.*

Medical, Wigan, meeting of, 753

Medical and Physical, Bombay, the plague, its concomitants and sequelæ, 171

Medico-Chirurgical, Aberdeen, annual dinner of, 1864

Medico-Chirurgical, Bradford, meeting of, 1341; specimens, 1507; the forceps in midwifery, *ib.*; club foot, *ib.*

Medico-Chirurgical, Bristol, annual meeting and list of officers, 1341; meeting of, 1647

Medico-Chirurgical, Edinburgh, cases, 137, 1723; specimens, 137, 1426, 1723; drainage of lateral ventricle in epileptiform convulsions, 137; picric acid in burns, *ib.*; chronic basal meningitis, *ib.*; resilient stricture, *ib.*; meeting of, 1354; patients, 1425; chronic glandular enlargement of the neck, 1426; president's address, *ib.*; election of officers, *ib.*; the phonendoscope, 1723; the serum diagnosis of typhoid fever, 1723; cyanosis in convulsions, how caused and how prevented, 1724; eczema palmarum and plantare, *ib.*

Society Medico-Chirurgical, Glasgow, opening of session at, 1203; the recent epidemic of plague in India, 1747

Medico-Chirurgical, Leeds and West Riding, the treatment of disease, 1339; cases and specimens, 1339, 1579; cycling injuries, 1339; iodoform in surgical tuberculosis, *ib.*; tumour of the cerebellum, 1342; removal of the scapula for sarcoma, 1578; malformation of auricle, *ib.*; acute diffuse myelitis, *ib.*; chronic intestinal obstruction due to a tumour of the ileum, *ib.*

Medico-Chirurgical, Nottingham, meeting of, 19, 134, 1581; annual meeting and list of officers, etc., 343

Medico-Chirurgical, Sheffield, meeting of, 1268, 1428; surgical treatment of high degrees of myopia, 1579; cases, specimens, etc., *ib.*

Medico-Chirurgical, West Kent, list of officers, 184; meeting of, 1428, 1731

Medico-Chirurgical, West London, meeting of, 19, 1730; list of officers, etc., 1268

National, for the Employment of Epileptics, annual meeting of, 41

National, for the Prevention of Cruelty to Children, report of investigating committee on, 359

Obstetrical, Edinburgh, puerperal fever, 17; the morphology of the vaginal segment of the genital tract, 18; Apostoli's method in uterine fibroid, *ib.*; meeting of, 220; specimens, 1856; the induction of premature labour, *ib.*; Leopold's account of the origin of the placenta, 1857

Obstetrical, of London, specimens, 136, 1092, 1240, 1721; unusual case of tubal gestation, 136; deciduoma malignum, 137; the management of true and false capsules in ovariotomy, 1092; abdominal hysterectomy for myoma of the uterus, 1423, 1441; pyometra complicating cancer of the cervix, 1722; the obstruction of labour by ovarian tumours in the pelvis, *ib.*; list of officers, etc., of, 1884

Obstetrical and Gynaecological, Glasgow, meeting of, 1511; specimens, 1724; ante-partum hemorrhage, *ib.*

Obstetrical and Gynaecological, North of England, the diagnosis of cancer of the uterus in its early stages, 1266; specimens, 1267

Ophthalmological of the United Kingdom, spontaneous dislocation of the lens into the anterior chamber, 53; demonstration of Tscherning's theory of accommodation, *ib.*; microphthalmos with cystic protrusion from the globe, 84; tuberculosis of the conjunctiva, *ib.*; card specimens, 84, 1265; president's address, 1249; some experiments on the union of corneal wounds, 1264; dislocation of lens, couching, recovery, *ib.*; heredity and the development of myopia, 1505; potassium permanganate in ophthalmia, 1506; cataract extraction, *ib.*; pseudo-glioma due to choroidoretinitis secondary to meningitis, *ib.*; case of albuminuric retinitis, *ib.*; leaden pellet lodged in the eye, 1798; Mules's operation for ptosis, *ib.*; non-recurrent orbital tumour, *ib.*; solid

œdema of the conjunctiva, *ib.*; traumatic cyclitis, 1799; specimens of pseudoglioma, *ib.*; secondary sarcoma of the orbit, *ib.*; chip of steel in the vitreous eighteen months, *ib.*; perforating wound of eyeball, *ib.*; recurrent membranous conjunctivitis, *ib.*

Society, Orthopaedic, British, meeting of, 276, 1729

Pathological of London, the bacteriology of the simple posterior basic meningitis in infants, 1183; multiple spontaneous fracture, *ib.*; specimens, 1183, 1505, 1855; president's address, 1246; empyema of the antrum in a child, 1337; a case of acromegaly with an analysis of 34 recorded examples, *ib.*; hatching bilharzia ova, 1338; calcifying pericarditis, *ib.*; calculus of the salivary gland, *ib.*; traumatic neuritis, *ib.*; spontaneous fracture of a gall stone in the gall bladder, 1504; malformation of the heart, *ib.*; intrapericardial rupture of an aortic aneurysm, *ib.*; two examples of malformation in fish, *ib.*; intussusception of the vermiciform appendix, 1505; observations made upon dogs to determine whether obstruction of the ureter would cause atrophy of the kidney, 1720; nose and lung from a case of glanders, *ib.*; specimens of glanders in the horse, 1721; the negative action of sewer air in raising the toxicity of lowly virulent diphtheria bacilli, *ib.*; cyst of the cæcum, *ib.*; pleomorphism of the colon bacillus, *ib.*; four unusual cases of melanotic sarcoma, *ib.*; aortic disease with unusual symptoms, *ib.*; a fractured femur from a case of fragilitas ossium, 1855; a specimen of spina bifida, *ib.*; gumma of the pituitary body, *ib.*; congenital cystic disease of kidney and liver, *ib.*

Pathological of Manchester, annual meeting and list of officers, 1184; meeting of, 1268; how milk becomes pathogenic, 1379; aneurysm of the abdominal aorta, *ib.*; suppuration occurring in a simple fracture, *ib.*; spinal meningocæle, *ib.*; deciduoma malignum (so-called), *ib.*; card specimens, 1379, 1801; sarcomata of bone, 1800; congenital dilatation of the colon, *ib.*; acute tuberculosis of pleura, *ib.*; syphilitic cirrhosis of kidney, *ib.*; renal growths, 1801

Pathological and Clinical, Glasgow, opening of session at, 1203, 1860

Pharmaceutical of Great Britain, the examination of, 1467

for the Prevention of Cruelty to Children, report of Lord Herschell's Committee on, 480

for the Relief of Widows and Orphans of Medical Men, meeting of court of directors of, 381, 1196

the Roentgen, inaugural meeting of, 1434

Royal, festival of the, 1666; Government grants made through the, 1766

Royal, of Edinburgh, office bearers of, 1767

Royal Medical, Edinburgh, presidents of, 1431

Royal Medical and Chirurgical, calcareous metamorphosis of tracheal glands, mediastinal abscess and bronchial fistula, 1261; pernicious malarial fevers of Sierra Leone, 1262; obscure cystic tumour of the bladder, containing two calculi; successful removal by suprapubic cystotomy, 1421; on mesenteric cysts, with two cases in young children; operation, 1422; special discussion on the prevention of enteric fever, 1574, 1793; The Transactions of, rev., 1582

Royal of Public Medicine and Medical Topography of Belgium, propose congress of hygiene, 381

Royal Statistical, statistics of smallpox and vaccination, 25, 33; subject of essays for medals of, 40

for the Study of Inebriety, meeting of, 160, 1165

Surgical Aid, annual meeting of, 1719

Therapeutical, Manchester, meeting of, 21, 1342, 1732

for Training Teachers of the Deaf, annual report of, 1874

Sodium, salicylate, depressing effect of, 1500, 1772

Soldier, Japanese, the health of, 1033

Soldiers, or gladiators? 235; our, the sobriety of, 665

Solly, Dr. S. E., Handbook of Medical Climatology, rev., 654

Somerville, Dr. J., presentation to, 59

Soudan, yellow fever in the, 1532

South Africa, phthisis in, 100; rules for British practitioners in, 560; as a health resort, book on, 1039; the health resorts of, 1307

Southampton, the annual report of the medical officer of health for, 101  
 South London, proposed hospital for, 299  
 Spart, Dr. F., on Hippocrates, 1749  
 Spain, rules for British practitioners in, 561  
 Spanton, Mr. W. D., two cases of meningocele successfully treated by operation, 963; "metropolitanism," 1136  
 Spas, of Wales, their Medicinal and Curative Properties, Mr. T. R. Roberts, *rev.*, 404; of Mid-Wales, Dr. A. Foxwell, *rev.*, 814  
 Speak, inability to, and defence to criminal proceedings, 1671, 1761  
 Specialities, pharmaceutical, 710  
 Speculum, pneumatic vaginal, 1188; ear stethoscope and mirror combined, 1272  
 Spee, Dr. F. V., *Handbuch der Anatomie des Menschen: Skeletlehre Kopf*, *rev.*, 1345  
 Spencer, Mr. W. G., calculus disease of the salivary gland, 1338; traumatic neuritis, *ib*; angular deformity of the spine treated by immediate reduction, 1645  
 Sphygmometer, simple and accurate form of for clinical use, 904  
 Spina bifida, case of, with ulceration and escape of cerebro-spinal fluid, recovery, 1180; a specimen of, 1855  
 Spinal cord. *See* Cord  
 Spine, the causation and treatment of curvature of, 132, 335, 431, 498, 645; the immediate reduction of the angular deformity in caries of, 336, 433; analysis of 1,000 cases of lateral curvature of the, 958; accurate measurements of curvatures of, with a description of a new instrument for the purpose, 959; lateral curvature of the spine, 1036, 1507; angular deformity of, treated by immediate reduction, 1501, 1527, 1642; Caries of (Spondylitis or Pott's Disease of the Spinal Column) Mr. N. Smith, *rev.*, 1512; the history of forcible extension of the, 1538; forcible straightening of in Pott's disease, 1630; appliance for caries of the, 1735, 1804, 1864  
 Spitzka, Dr., the influence of physical upon mental disease, 782  
 Splint, use of, in treatment of cancer of the breast, 1547  
 Spoon, new cholecystotomy, 1735  
 Sportsmen, a peculiar eruption in, 691  
 Sproule, Dr. T. W., exalpine, 1223  
 Spurrell, the bacteriology of simple posterior basic meningitis in infants, 1183  
 Sputum, elastic trabecula in the, 53, 117  
 Stable Management in India and the Colonies (Notes on), Veterinary-Captain J. A. Nunn, *rev.*, 88  
 Staining the malaria flagellated organism, a method of, 68; the Nervous System, the Technique of, Dr. B. Pollak, *rev.*, 140  
 Stammering, Explanation of with its Cure and Prophylaxis, Dr. F. Gruenbaum, *rev.*, 655; cure of, 1547  
 Stomach, boviral, 279  
 Stanley, Dr. D., family chorea, 1737  
 Staphylococcus haemorrhagicus, a coccus pathogenic to man and animals, 385, 685  
 Starling, Dr. E. H., Elements of Human Physiology, *rev.*, 1431  
 Starr, Dr. L., Diets for Infants and Children in Health and in Disease, *rev.*, 475  
 — Professor M. A., brain tumours and their removal, with a record of 80 cases and 15 operations, 1047  
 State. The relation of insanity to the, 783  
 "Status epilepticus" hystero-epilepsy simulating, 464  
 Stearns, Dr. H. P., heredity as a factor in the etiology of insanity, 774  
 Steavenson, Dr. A. P., carbolic acid poisoning treated with vinegar, recovery, 595  
 Steben, as a health resort, 497  
 Steedman, Dr. O., a case of perforation of the appendix vermiformis and peritonitis, operation and recovery, 1165  
 — Dr. T., Twentieth Century Practice, *rev.*, 656, 1185  
 Steel, chip of, in the vitreous eighteen months, 1799  
 Steele, Mr. R., the conduct of a scientific library, 1219  
 Stephens, Dr. R., the Cruciform Mark, *rev.*, 709  
 — Mr. R. J., death of, 749  
 Stephenson, Dr. S., report of an ophthalmia in Poor-law schools, 1023; potassium permanganate in ophthalmia, 1506  
 Steriliser, new eye instrument, 406  
 Stethoscope, a new, the phonophone, 348; mirror, and ear speculum combined, 1272  
 Stevens, Dr. J. B., menstruation in a newborn infant, 852  
 Stevenson, Dr. L. E., endemic goitre, 845  
 — Surgeon-Colonel W. F., Wounds in War, the Mechanism of their Production and their Treatment, *rev.*, 655  
 Stewart, Dr. D. D., final report of a case of a very large innominate aneurysm completely cured by the employment of electrolysis through ten feet of snarled, coiled, fine gold wire introduced into the sac, death at the expiration of three and a half years from cerebral thrombosis, 387  
 — Mr. D. P., the late Professor A. Buchanan, of Glasgow, 1547  
 — Professor G. U., the output of the heart, 610  
 — Dr. J., the relation of rheumatoid arthritis to diseases of the nervous system, tuberculosis, and rheumatism, 1225  
 — Dr. W., drainage of lateral ventricle in epileptiform convulsions, 137  
 Still, Dr. G. F., the bacteriology of simple posterior basic meningitis in infants, 1183; congenital cystic disease of kidney and liver, 1855  
 Still, coal tar, death in a, 1772  
 Stirling, Dr. A. W., Indian hemp, 691  
 Stockman, Professor R., dinner to, 1113  
 Stockport, the town council of and the power of entry to examine waterworks, 1744  
 Stocks, Mr. W. P., suppuration occurring in a simple fracture, 1579  
 Stockwell, Mr. T. G., obituary notice of, 1378  
 Stomach, the significance of dilatation in functional and organic diseases of the, 263; action of certain drugs on the secretion of the, 1726  
 Stomachs of women and their clothing, 1358  
 Stones, small, deeply-placed in the exposed kidney, the Roentgen rays and fluoroscope as a means of detecting, 1075  
 Storry, Mr. F. W., a case of Caesarean section, 1088; removal of spindle-ceiled sarcoma weighing 4 lbs. 4 ozs., removal of, 1182  
 Stothard, Dr. J., presentation to, 1464  
 Stott, Dr. F. W. A., a hernia corset, 710  
 Structure, resilient, 138  
 Structure, human, some distinctive characters of, 450  
 Strychnine in chloroform poisoning, 1495; injections of for wounds by poisoned arrows, 1620; for hearth and home, 1740  
 Stuart, Surgeon-Lieutenant-Colonel, G. B., death of, 435  
 Student, a septuagenarian, 196; the medical, his work and its object, 977  
 Style, Mr. R. G., reported cholera in Bethnal Green, 626  
 Suicide by carbolic acid, 638  
 Sunday recreation, Bishop Jayne on, 1661  
 Sunderland, milk and infection at, 164  
 Superannuation, allowances for, 752; Poor-law, 752, 1035  
 Superfetation (?), 745, 756  
 — in a case of twins (premature), 596  
 Suppositories, ichthylol and glycerine, 1188, 1307, 1387, 1547; the size of, 1606  
 "Suppression," 1527  
 Suppuration occurring in a simple fracture, 1579  
 Surgeon, the of old in war, 581; certifying factory, the duties of, 1887  
 Surgeons, non-naval, the treatment of when attached to the Royal Navy, 68  
 Surgery, Dental, A System of, Sir J. Tomes, *rev.*, 23; at the New Hospital for Women in 1866, 338; primitive, a case of, 48; the teaching of, 641; of the Nervous Centres, Dr. L. G. Giantanay, *rev.*, 656; abdominal cases of, 901; on the Indian frontier, 1387; military, recent experiences in, 1806  
 Sussex sunshine, 1770  
 Sutherland, Dr. G. A., case of albuminuric retinitis, 1506  
 — Dr. J. F., The Insane in Private Dwellings and Licensed Houses, *rev.*, 799  
 Sutton, the managers of the schools at, 361; the Local Government Board and the schools at, 925; purchase of school at by Metropolitan Asylums Board, 1664  
 Sutton, Mr. J. B., Ligaments, their Nature and Morphology, *rev.*, 278; The Diseases of Women, A Handbook for Students and Practitioners, *rev.*, 1185; abdominal hysterectomy for myoma of the uterus, 1423; pigmented cells found in mosquitos fed on malarial blood, 1787  
 Sutton Bridge, the sanitary needs of, 60  
 Suture, the figure of eight, in the radical cure of inguinal hernia, 215; of extensively divided tendons, 1085  
 Suturing of wounds, 952  
 Suzuki, Mr. S., Notes on the Wounded in Nava, Battles between Japan and China in 1894-5, with some Considerations of Sanitary Conditions during the War, *rev.*, 111

Swain, Dr. J., a case of ovarian cystoma associated with prolapsus uteri treated by ovariotomy and hysteropexy, 399, 845  
 — Mr. P., Surgical Emergencies together with the Emergencies attendant on Parturition and the Treatment of Poisoning, *rev.*, 86  
 Swallowing foreign bodies, 1388  
 Swan, Dr. J. M., clinical report on serum diagnosis in typhoid fever, 1778  
 Swauzy, Dr. H. R., some of the congenital anomalies of the eye, 1249; Handbook of Diseases of the Eye, *rev.*, 1271  
 Sweat, toxicity of the, 678  
 Sweating, localised, on eating, 1263  
 Sweden, rules for British practitioners in, 561  
 Sweets, poisonous, 236  
 Switzerland, rules for British practitioners in, 561; The Mineral Waters and Climate of, Dr. E. de la Harpe, *rev.*, 1001  
 Sydney, correspondence from, 50, 430; hospital Saturday at, 50; new pathological department, Sydney Hospital, *ib*; operating theatre, Prince Alfred Hospital, *ib*; the Queen Victoria Consumption Hospital, 430; medical dinner, *ib*; the "mountain murders," *ib*  
 Syers, Dr. H. W., aortic aneurysm, death after a few days' illness, necropsy, 1719  
 Sykes, Dr. W., a record in medicine taking, 384; white specks in nails, 1260  
 Sylt, Account of Westerland and Wenningstedt, the North Sea Spas in, *rev.*, 346  
 Sympons, Dr. E. M., a case of chronic superficial dissecting glossitis, 651; an improved oesophageal probang, 909; salol in typhoid fever, 1373  
 Syphilis, non-typical, cured by the Aachen specific method combined with surgical treatment, 332; treatment of at Aachen, 507, 685, 844, 1215; discussion at Montreal on the treatment of, 1309, 1756; tertiary, operation in some cases of, 1571; or framboesia, 1641; lesions in, 1647  
 Syringe, improved pistonless hypodermic, 1583  
 Syrupus ferri iodidi, preparation of, 1688  
 System (A) of Medicine by Many Writers, Professor T. C. Allbutt, *rev.*, 343, 1430

## T.

Table (an operation) for the general practitioner, 1188  
 Tablets, turtle, 88; nasal, 223  
 Tabloids, pig-bile, 23; hypodermic, 348; erythrol tetranitrate, 710; bone marrow, Hodgkin's disease treated by, 1421  
 Tait, Mr. L., Tait's flap-splitting operation on the perineum, 1208; calcified myoma, 1857; removal of uterus and appendages in a case of epilepsy, *ib*; tubercle of Fallopian tubes and ovaries, *ib*  
 Tangier as a health resort, 926  
 Targett, Mr. J. H., microscopic examination of uterine curettings, 1723  
 Tarnier, Professor, death of, 1605; funeral of, 1675  
 Tate, Dr. W. W. H., pyometra complicating cancer of the cervix, 1722  
 Taylor, Mr. A., The Sanitary Inspector's Handbook, *rev.*, 1513  
 — Dr. F., the remuneration of the general practitioner, 682  
 — Dr. G. S., skin eruptions occurring in patients already suffering from infectious wounds, 804  
 — Dr. J., muzzling orders, 1548  
 — Dr. J. C., acute septic gangrene, 470  
 — Mr. J. H., death of, 619  
 Teachers, female elementary, in Manchester, the prevalence of throat affections in, 807; School Board and infectious disease, 809  
 Teale, Mr. T. P., presidential address in Section of Sanitary Science of Congress of Sanitary Institute, 833  
 Teas, digestive, 141  
 Tebb, Mr. W., reply to on small-pox in the German and French armies, 323  
 Technik und praktische Bedeutung der Asepsis bei der Behandlung der Harnleiden, Dr. R. Kutner, *rev.*, 23  
 Teeth, book on extraction of, 1134  
 Teevan, Mr. A., the safe administration of anæsthetics, 684  
 Tegart, Mr. E., Crimean nurses, 196  
 Temperance, progress of, 412; scientific teaching in schools, 728  
 — question, the, 1759  
 Temperature of the body in health and disease, the means by which it is maintained, 11, 70; of man and animals after section of the spinal cord, 883; high in anaemic patients, the treatment of, 1308

Temple, Dr. J. A., on hyperemesis gravidarum, 1137  
 Tenaculum, a self-retaining, 1432  
 Tendons, extensively divided, suture of, 1088  
 Terminology, medical, 260  
 Terrier, Dr. F., Chirurgie de la Face, *rev.*, 87  
 Terrot, Miss S. A., gets Royal Red Cross, 1018  
 Testimonials as to electric belts, 323  
 Testis, ectopia of, 195  
 Tetanus, microscopic appearances of the spinal cord in, 333; complicated by typhoid symptoms and mania, recovery, 400; traumatic, treated by antitoxin and morphine, recovery, 467; treatment of by antitetanic serum, 469; treated by antitoxin, 652, 907, 1572  
 Textbook of Operative Surgery, Dr. T. Kocher, *rev.*, 87; of Diseases of the Nose and Throat, Dr. F. H. Bosworth, *rev.*, 473; of the Comparative Pathology and Treatment in Man and Animals, Dr. G. Schneidemühl, *rev.*, 656; of Physiological Chemistry, Dr. R. Neu-meyer, *rev.*, 1271; of Veterinary Ophthalmology, Dr. G. G. Van Mater, *rev.*, 1582  
 Theatres, modern operating, 1770  
 Theory and practice, Prof. Albutt on, 197  
 Thessaly, sickness among the Turkish troops in, 1034  
 Thiersch's method, skin grafting by, 1799, 1858  
 Thigh, amputation of in a child, 1642  
 Thin, Dr. G., bacteriology of alopecia areata, 127; pernicious malarial fevers of Sierra Leone, 1262; curative effects of milk diet, 1635; pigmented cells found in mosquitos fed on malarial blood, 1287; Psoriasis or Sprue, its Nature and Treatment, *rev.*, 1861  
 Thissen, Dr. T., a case of non-typical syphilis (syphilis gravis) cured by the Aachen specific method combined with surgical treatment, 332  
 Thiozán, Sir J., obituary notice of, 420; alleged poisoning of, 505, 728, 1760  
 Thomas, Dr. A., Le Cervelet, *rev.*, 1269  
 —— Mr. A. J., myxomatous tumour of vagina in a child aged 1 year and 9 months, 1088  
 Brigade-Surgeon-Lieutenant-Colonel G. D., gets jubilee medal, 1443  
 —— Mr. J. L., successful colectomies for an intraperitoneal rupture of a tubal gestation and two other uncommon pelvic tumours, 461  
 —— Mr. W. T., the treatment of varicose ulcer, 185; description of conditions found in the head and neck two years and a-quarter after ligature of all the carotid arteries, jugular vein, etc., of the left side, 405; excision of the kidney for primary carcinoma, 1267; angular deformity of the spine treated by immediate reduction, 1645  
 Thompson, Mr. E. P., Roentgen Rays and Phenomena of the Anode and Cathode, *rev.*, 86  
 —— Dr. H., obituary notice of, 320  
 —— Dr. W. G., the clinical value of the Widal test for enteric fever, 1755  
 Thomson, Dr. Alexis, stricture of the intestine a sequel of strangulated hernia, 950; carcinoma of penis, 1841  
 —— Mr. Arthur, Handbook of Anatomy for Art Students, *rev.*, 758  
 —— Mr. H. H., a case of hystero-epilepsy simulating "status epilepticus," 464; disappearance of a cardiac murmur, 683  
 —— Dr. StC., primary tuberculosis of the nasal cavities, 1263; distensible naevus of frontal region with defect in the subjacent bone, 1264  
 —— Sir W., on the army medical service, 1332  
 —— Dr. W. E., ectropium, complete exposure of the cornea for ten years without destruction of the eyeball, 134  
 Thorburn, Mr. W., The Relation of Cancer to Life Assurance, *rev.*, 908  
 Thorne, the battle of the clubs at, 1672, 1820  
 Thorne, Sir R., on glycerinated calf lymph, 1286; on the prevention of enteric fever, 1575  
 Thornton, Mr. B., professional secrets and the law, 687, 1130  
 Thorowgood, Dr. J. C., extirpation of the ovaries as a cure for cancer, 1375  
 Throat cut, treatment of, 462; cut, sequel to a case of, 465; prevalence of affections of among female elementary school teachers in Manchester, 807  
 Thrombosis of cerebral sinus, 1089, 1166  
 Thudichum, Mr. G., the scientific treatment of sewage, 833  
 Thyroid gland, tumours and enlargements of treated surgically, 1; spasmodic torticollis treated with extract of, 216; treatment of obesity by, 904; action of extract of in ichthyosis, 1334; insufficiency of, 1420; treatment by, 1428  
 Thyrotomy, metallic shoe hook removed from the larynx by, 1553; for epithelioma of larynx, 1577  
 Tickborne, Dr. C. R. C., the medical history of Dublin in the Queen's reign, 52  
 Tick pest, inoculation of, 679  
 Tigress, wounded severely, mauled and clawed by, 653  
 "Times," the, on the British Medical Association, 663; and its clerical correspondents, 1524  
 Tinea, tonsurans and circinata, chloride of sodium treatment of, 810, 1030  
 Tirah, the expedition to, 847; the expeditionary force to, 1217  
 Tisdall, Mr. J. J., the Poor-law Officers Super-annuation Act, 1878  
 Tissues, deep injury to from exposure to Roentgen rays, 272  
 Tivy, Dr. W. J., the prevention of enteric fever, 1704  
 Tobacco, influence of smoking of on the health, 923; the abuse of, 1611  
 Tochi, medical arrangements for the expedition to, 235, 251; the field force at, 376, 420; the disaster at, 687; the health of the force at, 1301  
 Todd, Dr. A., the posterior interosseous nerve, 1136; Irish Poor-law medical officers, 1756  
 Tomes, Sir J., A System of Dental Surgery, *rev.*, 23  
 Tomlinson, Surgeon-Lieutenant L. P., death of, 376  
 Tomony, Dr. J. K., extraordinary fecundity, 628  
 Tongue, two cases of laceration of the, 1000  
 Tonsillitis, follicular, due to milk infection, 339; chronic follicular, two cases of in which the tonsils were hidden by an expansion backwards of the anterior pillars of the soft palate, 340; accompanied by rapidly fatal pyaemia, 651; with pericarditis, without arthritis or other rheumatic signs, 1179  
 Tonsils, incomplete examination of, 444; chloroform in the removal of, 1858  
 Tooth in the ear, requiring reflection of the auricle, etc., for its removal, 810; reinsertion of a, 906  
 Toronto, proposed exhibition of Queen's Jubilee presents in, 1384  
 Torquay, the water supply of, 1868  
 Torticollis, spasmodic, treated with thyroid extract, 216; appliance for, 1735  
 "Touch paralysis," or the inability to recognise the nature of objects by tactile impressions, 787  
 Touts, insurance, 443  
 Towlettes, sanitary, 196  
 Townsend, Mr. C. F., Chemistry for Photographers, *rev.*, 1514  
 Toxicology (Catechism Series), *rev.*, 222  
 Toxins, gastro-intestinal, their clinical significance and therapeutic indications, 269  
 Toynebee Hall, annual report of, 1884  
 Trabecula, elastic, in the sputum, 53, 117  
 Trachea, introduction of creosoted oil, through the tracheotomy tube in obstruction of by diphtheritic membrane, 1564  
 Tract, genital, the morphology of the vaginal segment of the, 18  
 Tralee, nuns as nurses at, 360; the workhouse at 848  
 Transactions of the Fourth Session of the Inter-colonial Medical Congress of Australasia, *rev.*, 141; the Medico-Chirurgical, *rev.*, 1582; and Reports, *rev.*, 1861  
 Trephining amongst savage people, 508  
 Treub, Dr. H., the mechanism of inversion of the uterus, 218  
 Treves, Mr. F., Perityphlitis and its Varieties, their Pathology, Clinical Manifestations, and Treatment, *rev.*, 1733  
 Trevithick, cerebral sinus thrombosis, 1166  
 Trinidad as a health resort, 611  
 Trowbridge, the battle of the clubs at, 675  
 Trower, Mr. A., case of pulmonary carcinoma, 1337  
 Trudeau, Dr. E. C., artificial immunity in tuberculosis, 1849  
 Truman, Dr. C. A. P., the treatment of whooping-cough by naphthalin, 64  
 Trusses, washable, 1804  
 Tscherning's theory of accommodation, 83  
 Tubby, Mr. A. H., on the immediate reduction of angular deformity in spinal caries, 336; some unusual forms of hernia, with remarks, 968; some rare affections of the fingers, 1069; angular deformity of the spine treated by immediate reduction, 1501, 1645  
 Tubercle, the method of Dr. de Baecker in the cure of, 802; of Fallopian tubes and ovaries, 1857  
 Tuberculin, the new, in lupus, 168; the new,

discussion on at the Berlin Dermatological Society, 183; the new, six cases of lupus vulgaris treated by, 207; generalisations from 6 years' use of, 1053  
 Tuberculosis, and vaccination, 49; of the conjunctiva, 84; action of x rays on, 247, 298; of the insane, 403; of the Ovary, Dr. J. Schottländer, *rev.*, 474; freedom of St. Ouen from, 678; experiments on organisms of, 834; general, 1031, 1125; intrapelvic, diagnosis and treatment of, 1144; the King of Sweden and the abatement of, 1211; primary of the nasal cavities, 1265; surgical, iodoform in, 1339; pulmonary, the relation of nasal diseases to, 1394; artificial immunity in, 1849  
 Tubes, Fallopian, the conservative and other treatment of diseases of the, 1147; tubercle of, 1857  
 Tucker, Dr. G., Mother, Baby, and Nursery: a Manual for Mothers, *rev.*, 1431  
 Tumour, enormous mesenteric, removal of, 966; malignant, of brain, originating in the middle ear, 1082; myxomatous, of vagina in a child 1 year and 9 months old, 1088; large parotid, 1212; of the cerebellum, 1340; obscure, cystic of the bladder containing two calculi, successful removal by suprapubic cystotomy, 1221; of breast, 1857  
 Tumours and enlargements of the thyroid gland treated surgically, 1; uncommon pelvic, cæliotomy for, 461; Cerebral, Dr. M. Auveray, *rev.*, 1001; of the Nervous System, Dr. L. Bruns, *rev.*, 1002; of the brain, removal of, 1057; impacted pelvic, Porro's operation for, 1140; fibroid of the uterus, treatment of by vaginal ligation of the base of the broad ligament, 1141; villous of the bladder, 1508; ovarian in the pelvis, obstruction of labour by, 732  
 Tunnicliffe, Dr. F. W., the effect of resistance exercise upon the circulation in man, local and general, 1073  
 Turbinotomy, discussion on at Montreal, 1389  
 Turks, the wounded in the late war, 1467  
 Turin, antirabic inoculations at, 32  
 Turkey, rules for British practitioners in, 561  
 Turks, sickness amongst in Thessaly, 1034  
 Turnbull, Dr. J. M., obituary notice of, 749  
 Turner, Dr. G., Professor Koch's rinderpest inoculation, 632  
 —— Mr. G. R., peripancreatic cyst, 1797  
 —— Mr. R., presentation to, 1208  
 —— Sir W., some distinctive characters of human structure, 450, 482  
 Turney, Dr. H. G., peripheral neuritis connected with pregnancy and the peripheral state, 1761  
 Turtle tablets, 88  
 Tweedie, Mrs. A., Through Finland in Carts, *rev.*, 1431  
 Twentieth Century Practice, Dr. T. Stedman *rev.*, 656, 1185  
 Twin sisters, the fertility of, 123, 195, 259, 323  
 Twins, the fertility of, 99; superfecundation in a case of, 506  
 Tylecote, Mr. T. H. L., a case of popliteal aneurysm followed by herpes in the area of distribution of the external popliteal nerve, 1719  
 Typanum, non-operative treatment of chronic suppurative disease of the, result of the, 1563  
 Typhilitis, case of hydatids simulating operation, recovery, 811  
 Typhoid fever. *See* Fever, enteric  
 Typhus fever. *See* Fever  
 Tyre of bicycle, localisation of puncture in, 851  
 Tyson, Dr. J., the dietetic treatment of diabetes, 1043; on rheumatoid arthritis, 1220; note on the use of terms to indicate myocardial changes, 1229  
 U.  
 Ulcer, varicose, the treatment of, 185; perforated gastric, the signs and symptoms of, with notes of two cases, in one of which operation was successful, 453; painful chronic, treatment of, 943; caused by the distoma haemato-bium, partial resection of the bladder for, 964; perforated gastric, 1254  
 Uncle Bernac, Dr. A. Doyle, *rev.*, 708  
 Unconsciousness, prolonged, case of, 665, 676, 1524  
 Union, Medical Defence, half-yearly report of, 226; the presidency of, 1443  
 United States, medical graduation and practice in the, 429; alcoholism and the penal law in, 484; rules for British practitioners in, 561; yellow fever in, 665, 730, 832, 1200, 1358, 1585; consumption and insanity among negroes in, 668; vital and social statistics of, 737; medicinal plants of the, 1388; football in, 1534; infantile scurvy in, 1684

University of Aberdeen, examiners at, 100; graduation in medicine at, 315; regulations as to medical and surgical degrees at, 520; in instruction at, 534; regulations as to diplomas in State Medicine, 552; opening of winter session at, 555  
— of Berlin, the chair of physiology at, 12  
— of Brussels, hood and gown for M.D. degree of, 195; degrees for practitioners at, 546; the M.D. degree of and public health appointments, 940  
— of Cambridge, pass lists, 58, 1302, 1882; Professor Allbutt on the need for re-endowment of, 165; the John Lucas Walker studentship, 436; regulations of as to medical and surgical degrees, 514; regulations as to diplomas in State Medicine, 550; opening of session at, 1008; department of pathology, 1009; the vice-chancellorship of, 1014; professorship of pathology, 1217, 1446, 1461; anatomy, 1218, M.B. and C.M. examinations, 1302, 1461; matriculation, 1302; examiners, *ib.*; entries at medical school of, 1379; fellowship, 1460; midwifery, *ib.*; State Medicine, 1460, 1692; honorary degrees, 1461, 1682; professor of Chinese, *ib.*; bequest for physiology, 1541; medical degrees, 1541, 1831; open science scholarships, *ib.*; examinations, 1619; the John Lucas Walker fund, 1682; professorship of surgery, *ib.*; appointments, 1764; lectureship in midwifery, 1831; rebuilding of the medical schools, *ib.*; Rede lecture, *ib.*; examination in sanitary science, *ib.*  
— of Dublin, degrees conferred at, 120, 1882; regulations of as to medical and surgical degrees, 522; regulations as to diplomas in State Medicine, 553  
— of Durham, representatives of at the Diamond Jubilee, 37; regulations of as to medical and surgical degrees, 516; degrees for practitioners at, 546; regulations as to diplomas in State Medicine, 551; pass lists, 751, 847, 940; meeting of Convocation of and conferring of degrees, 1032; disciplinary powers of, 1451; the chairmanship of the Board of Faculties at, 1602  
— of Edinburgh, pass lists, 120, 380, 436; meeting of University Court of, 252; graduation ceremony at, 379, 1302; regulations as to medical and surgical degrees at, 519; instruction at, 534; regulations as to diplomas in State Medicine, 552; opening of winter session at, 555; dinner of graduates of at Birmingham, 1202; meeting of General Council of, 1379; opening of McEwan Hall of, 1661, 1745; the Medical Faculty of, 1682; entries at the medical school of, 1683  
— of Glasgow, the chair of Materia Medica at, 235, 268, 361; pass lists, 252, 1129; graduation in medicine at, 315; regulations as to medical and surgical degrees at, 520; in instruction at, 536; opening of winter session at, 555; the chair of Surgery at and the Western Infirmary, 1208, 1291, 1366, 1449, 1608, 1818; portrait of Lord Lister, 1218; Queen Margaret College, *ib.*; the course in pathology, *ib.*; honours in medicine, grant by the Bellahouston trustees, *ib.*; examiner in anatomy, *ib.*; results of professional examinations at, 1302; appointments, 1619; distinctions at M.D. examinations, *ib.*; foundation of a Mackinnon scholarship at, 1684  
— of Innsbrück, students at, 1684  
— of Liège, the rectorship of, 1684  
— of London, the Bill of, 233; pass lists, 436, 1541, 1831; regulations of as to medical and surgical degrees, 515; degrees for practitioners at, 546; regulations as to diplomas in State medicine, 550; the Duke of Devonshire on, 1665; the Calendar of, 1682; the reconstruction of, 1746, 1866; conference on the proposed reconstruction of, 1836  
— of Lyons, the professorship of bacteriology at, 399  
— of McGill, the chair of zoology at, 232; and Professor Roddick's address, 843  
— of Oxford, regulations of as to medical and surgical degrees, 513; regulations as to diplomas in State medicine, 550; the D.P.H. of, 1136; the lectureship in Medical Pharmacology and Materia Medica at, 1460  
— of Royal, of Ireland, pass lists, 58, 1033, 1218, 1379; regulations of as to medical and surgical degrees, 523; regulations as to diplomas in State Medicine, 553; honorary degrees at, 1285  
— of St. Andrews, and University College, Dundee, 169; regulations as to medical and surgical degrees at, 520; opening of winter session at, 555; meeting of university court

of, 621; the university professors and appointment of assistants at, 1032  
University of Sydney, the Calendar of, *rev.*, 222  
— Victoria, pass lists, 438; regulations of as to medical and surgical degrees, 515; regulations as to diplomas in State Medicine, 550; annual meeting of convocation, 1379; disciplinary powers, 1541; M.B. examination, *ib.*; entrance examination in arts, *ib.*  
— of Vienna, the rectorship of, 94  
“ — of Westminster,” the, 1516, 1607, 1672, 1737, 1827, 1860  
Uranium nitrate, treatment of diabetes mellitus by, 1044  
Ureter, experiments on dogs to determine whether obstruction of the would cause atrophy of the kidney, 1720  
Urtero-lithotomy, retroperitoneal, a case of, 648  
Urethra, strictures of, 1181  
Urinals, dry, 54  
Urine, The Practical Examination of. Professor L. Conn, *rev.*, 1513; indican in the, and bacterial activity in the intestine, relation between, 1847  
Urquhart, Dr. A. R., the relation of pelvic disease to insanity, 774; heredity, a factor in the etiology of insanity, 777; the relation of insanity to the State, 767; on locomotor ataxy, *ib.*  
Uruguay, rules for British practitioners in, 561  
Uterus, the mechanism of inversion of, 218; escharotics in the treatment of cancer of the cervix of, 219; rupture of complicating shoulder presentation, recovery, 276; gunshot wound of the, recovery, 300; prolapse of treated by hysterectomy, 399, 684, 746, 845; hysterectomy for fibro-cyst of, 708; masculinization of cervix of, 1139; procedentia of with numerous vesical calculi, 1141; a further review of the treatment of fibroid tumours of by vaginal ligation of the base of the broad ligament, 1141; obliteration of the cervix of, 1143; the palliative and radical treatment of flexions and displacements of, 1151; complete inversion and procedentia of, 1178; the diagnosis of cancer of in its early stages, 1266; abdominal hysterectomy for myoma of the, 1423, 1441, 1509; rigidity of the os treated by hot baths, 1639; pyometra complicating cancer of the cervix of, 1722; and appendages, removal of in a case of epilepsy, 1857  
Uvula, elongated, causing respiratory obstruction  
Uvulæ, elongated, causing respiratory obstruction in chloroform administration, 1499

V.  
Vaccination, and small-pox, statistics of, 55, 33, 161, 485, 679; and tuberculosis, 49; by calf lymph, 100; public, birthplace in relation to, 440; and small-pox in Germany, 443; Mr. H. B. Collins on, 664; successful grants for, 710, 1585, 1684; compulsory, 833; against typhoid fever, 1015, 1353; in Japan, 1006, 1374; declaration of medical officers of health as to the value of, 1193; public and private, 1224, 1387; imperfect, *ib.*; the case for, 1599; age at, 1684; aseptic, 1718  
— problem, the, 1110, 1215, 1757, 1828, 1879  
— prosecutions, the conduct of, 1664, 1758  
Vaccinators, public, payment of, 1036; superannuation of, 1307  
Vaccine et Vaccination, MM. J. Delobel and P. Cozette. *rev.*, 187  
— lymph and insanity, 1387  
Vagina, myxomatous tumour of in a child aged 1 year and 9 months, 1088; labour complicated by abnormalities of, 1139  
Van der Veer, Dr., on appendicitis, 949  
Van Giessen, Professor, locomotor ataxia as a form of chronic parenchymatous degeneration of the paraneuronal system, 787  
Van Mater, Dr. G. G., A Textbook of Veterinary Ophthalmology, *rev.*, 1582  
Van Praagh, Mr. W., education of deaf child, 1307  
Varalettes, 80  
Vegetable extracts, 1862  
Vein, femoral, air embolism from wound of, 274  
Velpeau, monument to, 372  
Ventilation in houses and hospitals, 441; of underground railways, 1108  
Ventilators of sewers and typhoid fever, 732  
Ventricle, lateral, drainage of in epileptiform convulsions, 137  
Ventricle, ovarian cystoma and prolapsus uteri treated by, 399; for prolapse of uterus, 684, 746, 845

Vermiform appendix. *See Appendix*  
Verrall, Mr. T. J., ulceration and rupture of gall bladder, operation, recovery, 341  
Vertebrates, sympathetic ganglia of, 881, 1398  
Veterinary sanitary science, suggestions for a, 998  
Vicenti, Dr. F., Bacteria of the Sputa and Cryptogamic Flora of the Mouth, *rev.*, 87  
Vinegar, carbolic acid poisoning treated with, 595  
Vines, Mr. S. K., an examination paper in physiology, 251  
Vinrace, Dr. J. H., on medical defence, 248  
Virchow, Professor, elected foreign associate of the French Academy of Science, 296; letter from on Malpighi, 730; and the lady doctors, 732; jubilee of the "Archiv" of, 1288; jubilee of as university teacher, 1457; and the Moscow cow students, 1533  
Virgin Islands, rules for British practitioners in, 560  
Viscera, protrusion of in self-inflicted wound of abdomen, 400  
Vision tests, Continental and British, for railway servants, 1085  
Visitation of infectious sick by sanitary officer, 320  
Visiting List, Smith's Physicians and Surgeons, *rev.*, 1861  
Visits of ceremony, 123, 259  
Vitreous, chip of steel in the, 18 months, 1799  
Vivisection, Canon Doman on, 260  
Volunteer Medical Staff Corps, promotions and appointments in, 57, 118, 315, 376, 620, 846, 932, 1033, 1128, 1217, 1301, 1381, 1461, 1539, 1617, 1631, 1705, 1830  
Volvulus of Meckel's diverticulum, 1637  
Vomiting of round worms, 124; pernicious intubation of larynx in, 1058  
Vos, Mr. G. H., prolonged administration of iodide of potassium, 966  
Voting system, the charity, 51

W.  
Wacher, Mr. S., radical cure of hernia, 1121  
Wade, Mr. C. H., wanted a name, electrography, 52  
— Surgeon-Captain G. A., case of lightning stroke, recovery after artificial respiration, 218  
Wainwright, Mr. W. L., tonsillitis accompanied by rapidly fatal pyæmia, 651  
Walcher's position in labour, 15; in obstetrics, 1639, 1756  
Waldo, Dr. H., a case of Addison's disease, 82; the treatment of skin disease, 383  
Walford, Dr. W. G., typhoid fever at King's Lynn, 1363; sequel to a case of imperforate anus operated on in infancy, 1420  
Walker, Dr. B., a peculiar eruption in sportsmen, 691  
— Mr. C. C., the will of, 321  
— Mr. G. E., amyl nitrate in apparent death from chloroform, 352  
— Mr. H. S., malformation of auricle, 1578  
Wallace, Dr. J., a note on exploratory incision and drainage versus paracentesis, 79  
Wallace's specific, No. 1, 1540  
Waller, Dr. A. D., Exercises in Practical Physiology, *rev.*, 85; action of certain reagents upon electrotonic currents, 672; on anaesthetics, 1469, 1479; Lectures on Physiology, *rev.*, 1802; gets Prix Parkin, 1807  
Walsh, Dr. D., deep tissue traumatism from Roentgen ray exposure, 272; Excretory Irritation and the Action of Certain Internal Remedies on the Skin, *rev.*, 597; skin eruptions and infected wounds, 1335  
Walter, Mr. C. C., death of, 1379  
War, Turco-Greek, the French field hospital in, 1617  
Wanman, Dr. W. A., loss of hair, 1222; treatment of seborrhœa capitis, 1887  
War Office, the, and the medical profession, 188  
Ward, Mr. A. H., the Montreal debate on the treatment of syphilis, 1757  
— Dr. G. W., memorial to, 849  
— Dr. J. B., presentation to, 974  
Warden, Dr. C., on turbinotomy, 1393  
Wardle, Mr. M., ventrification for prolapsed uterus, 746; a new cholecystotomy spoon, 1735  
Waring, Dr. E. J., Remarks on the Uses of some of the Bazaar Medicines and Common Medical Plants of India, *rev.*, 475  
— Mr. H. J., Diseases of the Liver, Gall Bladder, and Biliary System, *rev.*, 277  
Warming, of consulting rooms, 1546, 1888; of dwelling houses, 1886  
Warrington, Dr. T. D., Savill's report on small-pox at in 1862-93, 1346  
Washbourn, Dr. J. W., antipneumococcal serum, 1849

Water, bacteriological tests for the purity of for ships, 350; drinking, bathing in, 603; halfpenny in the slot, S32; the limits of the value of analysis of, 1203; drinking, examination of, 1340; stored, dangers to, 1352; the bacteriological examination of, 1742

Waterclosets, waterless, 60

Water diviners' fees at Ampthill, 420

— heater, the "Ballantine" instantaneous, 1271

Waterhouse, Mr. H. F., intussusception of the veriform appendix, 1505

Waterlow, Sir S. system of distribution of Hospital Sunday and Saturday Funds, 1347

Water supplies, the sanitary control of, 1197; the safeguarding of, 1283, 1365, 1453; and hop-pickers, 1529

Waters, Surgeon-Lieutenant E. E., endemic goitre in north-east Bengal, 650

— Dr. E. W., the treatment of pruritus, 443

Wathen, Mr. J. H. typhoid fever at Clifton, 1876

Watkins-Pitchford, Mr., report of on antirinderpest serum, 164

Way, Surgeon R. H., memorial to at Haslar, 1207

Weather prophet, another, 1448

Weber, Dr. F. P., localised sweating and blushing on eating, 1263; aortic disease with unusual symptoms, 1721

Webster, Dr. F. R., death of, 32

Weighing machine, a consulting room, 259

Weight, estimation of in assurance examinations, 1835

Weir, Dr. A. McC., Dr. Rentoul's resignation 1615; the vaccination problem, 1757, 1879

Welch, Professor, on biology and medicine, 1448

— Surgeon-Colonel F. H., supposed immunity of natives of India to enteric fever, 499

Wellington, Mr. H., a specimen of spina bifida, 1855

Welsford, Dr. A. G., on medical defence, 249, 312

Wesbrook, Dr. F. F., preliminary report on the serum diagnosis of typhoid fever in an epidemic during which typhoid bacillus was isolated from the public water supply, 1774

West, Dr. S., bronchial breathing and rales, 65; bronchial breathing, 1537; case of pyopneumothorax of several months' duration cured by free incision, with some remarks on the surgical treatment of pneumothorax, 1568

West Africa, service in, 1381

West Indies, rules for British practitioners in, 560

Westmacott, Mr. F. H., spinal meningocele, 1579

Wethered, Surgeon-Major T. A., death of, 1301

Wetherell, Dr. J. A., the etiology of beri-beri, 500

Wheelhouse, Mr. C. G., on Sir Walter Foster's candidature, 931

Whitaker, Dr. E. T., admission to English bar, 323; examination of drinking water, 1340

Whitby, Dr. C. J., disappearance of a cardiac murmur, 463, 683, 747

White, Mr. F. F., unqualified practice and the candidature for the General Medical Council, 1106; the treatment of otorrhoea, 1762

— Dr. J. W., Genito-urinary Surgery and Venereal Diseases, rev., 473

— Mr. S., four cases of hydatids of the liver, 398

— Dr. W. H., the means by which the temperature of the body is maintained in health and disease, 11, 70; stricture of the pylorus, Loretta's operation, 1089

Whitehead, Mr. W., molluscum fibrosum and fibro-lipoma of arm, 1800

Whiteford, Mr. C. H., extirpation of ovaries in inoperable mammary cancer, 117, 251; the figure of eight suture in the radical cure of inguinal hernia, 215

Whitfield, Dr. A., six cases of lupus vulgaris treated by Koch's new tuberculin, 207

Whitla, Dr. W., the treatment of insomnia, 866; the treatment of syphilis, 1309

Whittaker, Dr. J. T., generalisations from six years' use of tuberculin, 1953; terms to indicate myocardial changes, 1220

Whittingdale, Dr. J. L. F., antistreptococcal serum in the treatment of puerperal fever, 14; death under chloroform, 410

Whitton, Brigade-Surgeon G. E., death of, 252

Whitworth, Dr. W., diphtheria in the country, 1040

Whooping cough, treatment of by naphthalin, 64; value of mandatory measures in, 759; the bacteriology of, 151

Whymper, Mr. E., The Valley of Zermatt and the Matterhorn, rev., 1269

Whyte, Mr. J., longevity and total abstinence, 614

Widal, Dr. F., the serum diagnosis of typhoid fever, 1773

Widal's serum. *See Serum*

Wigmore, Dr. J., loaded bowels and melanocholia, 1500

Wilcox, Dr. M. R., studies in the metabolism of the body fluids, 1401

— Dr. R. W., the treatment of insomnia, 855

Wilks, Sir S., proposed dinner to, 828; dinner to, 1022

Will making and morphinomania, 496, 1611

Willesden, the Board of Guardians and St. Mary's Hospital, 1666

Willett, Mr. A., the correction of certain deformities by operative measures upon bones, 1689

Williams, Dr. F., the treatment of chronic neurasthenia, 383, 609

— Sir J., the Cavendish lecture on ovarian tumour with pregnancy, 102

— Mr. Justice V., on medical assessors, 421

— Mr. W. R., extirpation of the ovaries as a cure for cancer, 250, 684

Williamson, Dr. R. T., "touch paralysis" or the inability to recognise the nature of objects by tactile impressions, 787

Willis, Mr. W. M., case in which the sac of a popliteal aneurysm refilled five years after ligation of the femoral artery, 1855

Wilson, Dr. A. C., ichthiol and glycerine suppositories, 1307

Surgeon-Major E. M., Notes on Malaria, rev., 222

— Dr. G. J., the bankruptcy of, 1130

— Dr. H., shoulder presentation complicated by rupture of the uterus, recovery, 276

— Dr. J. C., on rheumatoid arthritis, 1228

— Mr. J. P. A., air embolism from wound of the femoral veins, 274

— Dr. L. B., preliminary report on the serum diagnosis of typhoid fever in an epidemic during which typhoid bacillus was isolated from the public water supply, 1774

— Mr. N. O., external rupture of one corpus cavernosum, 1260

Winchester, Dr. H., death of, 375; response to appeal for family of, 627, 691, 756

Windle, Dr. B. C. A., Life in Early Britain, being an Account of the Early Inhabitants of the Island and of the Memorials which They have left behind them, rev., 474

Wine, Comaltana, 141; Kollox, 909

Wines, coca, dangers of, 1666

Winter resorts, South of England, 1547

Winterbottom, Mr. H., death of, 189

Wire, four pieces of removed from a woman's bladder, 342

Wiring fragments in fracture, 1838

Wishart, Mr. J., Schedules for Plant Description, rev., 1002

Witness, medical, hints for the, 1605; medical at inquest, 1618

Witnesses, medical, cross-examination of, 621; powers of coroners as to, 1618, 1838

Wolstenholme, Mr. R. H., the proposed Obstetric Nurses Bill, 250; hospital reform, 1878

Woman, four pieces of wire removed from the bladder of a, 342

Women, as veterinary surgeons, 105, 1279, 1764; the medical education of, 545; parturient, the employment of in factories, 729; the etiological relation of pelvic disease in to insanity, 766; the medical movement among, 998; pregnancy and the labour of in factories, 1017; Diseases of, Mr. J. B. Sutton and Dr. A. E. Giles, rev., 1185; pregnant, the longings of, 1356; the clothing and stomachs of, 1358; Outlines of the Diseases of, Dr. J. Phillips, rev., 1733

Wood, Mr. F. C., case of acute necrosis of alveolar process of superior maxilla in a baby two days after birth, 1259

— Mr. J., presentation to, 677

Woodcock, Dr. S., on medical reform, 201

Woodhead, Dr. G. S., the Harben lectures, 26, 91, 172, 226; the prevention of enteric fever, 1794

Woodhull, Dr. A. A., apocynum cannabinum, a diuretic plant, 1714

Woods, Dr. H., on medical defence, 248

— Mr. R. H., mouth breathing in consumption, 62; middle ear disease, 1790

Woolsorster, death of a, inattention to regulation, 614

Woolsorster's disease. *See Disease*

Work and sleep, 1663

Workhouses, waste of food in, 418, 566; children in the, 1095

Workmen and metropolitan hospitals, 1521

Workmen's subscriptions and subscribers' "rights," 1808, 1826

Worms, round, vomiting of, 124

Wound, perforating, of abdomen, 77; gunshot, of uterus, recovery, 300; punctured, of chest wall, penetrating sternum and wounding heart, 469; penetrating, of chest and abdomen, 1088; incised of the membrana tympani, 1180; infected, skin eruptions and, 1335

Wounds, Ulcers, and Abscesses, The Treatment of, Mr. W. W. Cheyne, rev., 222; in War, the Mechanism of their Production and their Treatment, Surgeon-Colonel W. F. Stevenson, rev., 655; suturing of, 952; penetrating, of abdomen, diagnosis and treatment of, 969; corneal, some experiments on the union of, 1265

Wray, Mr. C., heredity and the development of myopia, 1505

Wright, v. Butler, 315

— Dr. A. H., notes on methods and results in the Burnside Lying-in Hospital connected with the Toronto General Hospital, Toronto, Canada, 1156

— Mr. G. A., intussusception of the veriform appendix, 1770

— Dr. H. P., the dietetic treatment of diabetes, 1043

— Mr. J. E., cycle saddles, 755

— Mr. L., The Induction Coil in Practical Work, including Roentgen Rays, rev., 278

"Wrist easel," a, 814

Wry-neck, the cervical and thoracic nerve roots in relation to, 1172

Wrzesniowsky, Dr., gunshot wound of the uterus, recovery, 300

Würdemann, Dr. H. V., phosphorus-necrosis of the temporal bone, 1557

Wunderlich, Dr. G., thyroid insufficiency, 1420

Wylls, Mr. W. E., the battle of the clubs at Great Yarmouth, 737

Wyman, Dr. C., obituary notice of, 1616

X.

X rays. *See Roentgen rays*

Y.

Yarmouth. *See Great Yarmouth.*

Year Book, of the Scientific and Learned Societies of Great Britain and Ireland, rev., 141; The Municipal for 1897, rev., 16; of Pharmacy and Transactions of the Pharmaceutical Conference, 1897, rev., 1802

Yearsley, Mr. M., eucaine as a local anaesthetic in the surgery of the throat, nose, and ear, 1560

Yeats, Dr. W., cancer of the breast treated by injections of alcohol, 808

Yeo, Dr. I. B., Food in Health and Disease, rev., 595

Yonge, Dr. E. S., the prevalence of throat affections among female elementary school teachers in Manchester, 807

Youl, Dr. R., death of, 824

Young, Surgeon-General A. G., death of, 252

— Mr. H. S. S., the conduct of vaccination prosecutions, 1758

— Dr. M., hospital ward floors, 123; phosphorescent odour of the breath, 626

— Mr. W. McG., a severe case of facial erysipelas treated by antistreptococcus serum, 1718

— Dr. W. S., jaundice and influenza, 81; vomiting of round worms, 124

"Young Man," the and Sir Walter Foster, 926, 1021, 1106, 1116

Z.

Zell-am-See as a health resort, 407

Zenger, Professor, as a weather prophet, 1448

Zenner, Dr. P., the relation of pelvic disease to insanity, 774

Zermatt, The Valley of the and the Matterhorn, Mr. E. Whymper, rev., 1269

Zuni Indians, surgery among the, 483

## INDEX TO THE EPITOME FOR VOLUME II FOR 1897.

 The Figures in this Index refer to the Number of the Paragraph NOT the Page. 

**A.**

Abadie, ocular haemorrhages in young persons and in adults, 128  
Abbe, new incision for nephrectomy, 46; the pathology of appendicitis, 179  
Abdomen, the treatment of penetrating wounds of, 247; large fibro-sarcoma of the wall of successfully treated by extirpation, 316; rupture of wound of from coughing, 322; recovering without operation from penetrating gunshot wounds of the, 418; contusions of the, 441  
Abdominal section, silk or catgut in? 104; non-septic paralysis of intestines after, 315 — sections, repeated, multiple abdominal hydatids treated by, 164  
Abortion, and quinine, 9; habitual, 29; common, and tubal pregnancy, 89; incomplete, sulphate of quinine in, 129; missed and irregular, 448; incomplete, the curette denounced, 529  
Abscess, of the lung and puerperal infection, 31; cervical, and otitis media, 266; of the ovary, 272; of vulvo-vaginal gland, 444; spinal, treatment of, 503  
Abscesses, produced by the hypodermic injection of turpentine, treatment of insanity by means of, 198  
Acarus, a vesicant, 398  
Acetanilide poisoning in a newly-born infant, 55  
Acetonuria, case of, 416  
Acromegaly, case of, 436  
Actinomycosis, cured by iodide of potassium, 30; the cerebral complication of, 312  
Actol as a general disinfectant, 350  
Adami, retroperitoneal lipoma, 6  
Addison's disease. *See Disease*  
Adenitis, cervical, associated with phlyctenular ophthalmia, Maragliano's serum in, 136  
Adenomyoma of the uterus, origin of, 130  
Adenophlegmon, cervical, with deep diffuse cellulitis, 402  
Adhesions, painful peritoneal, 488  
Aemmer, airoil and its disadvantages, 216  
Agglutination of typhoid bacilli by chemical substances, 222  
"Agonal," entry of micro-organisms into the blood serum, 18  
Airoil in diarrhoea, 75; and its disadvantages, 216  
Ajello, the cause of death in burns and varnishing in animals, 241  
Albarran, renal surgery, 290  
Alberti, treatment of insanity by means of abscesses produced by hypodermic injections of turpentine, 198  
Albuminuria and eclampsia in pregnancy, 108; cyclic, 209; diabetic, and its treatment, 474  
Alciette, paralysis in the course of scarlet fever, 439  
Alimentary canal, diphtheria communication through the, 512  
Alimentation, hypodermic, with olive oil, 221  
Alkaloids of opium, 174  
Allen, primary neoplasms of the kidney, 260  
Allerhand, a new method of staining sections of brain and spinal cord, 372  
Alzheimer, general paralysis of the young, 99  
Amaurosis and puerperal eclampsia, 388  
Amblyopia, toxic, the visual field in, 288  
Amillet, saline injections after flooding, 192  
Ammonia, milk and excretion of, 223  
Anaemia, subcutaneous injections of iron in, 11; pernicious, spinal cord disease in, 284  
Anesin, 302  
Aneurysm, aortic, 100, 265  
Angina pectoris, musical murmurs in, 158  
Angioma cavernosum of the spleen, 6  
Aniline stains, diagnosis of diabetes mellitus from the reaction of the blood to, 2, 157  
Animals, the cause of death in burns and varnishing in, 241  
Anosmia, treatment of, 218  
Anthony, injections of calomel in syphilis, 513  
Anthrax serum, 496

Antipyrin, influence of upon the hydrochlorate of quinine, 281  
Antitoxin, diphtheria, the origin of, 354 — tetanus, questions as to, 72  
Antitoxins and toxins, a new theory, 78  
Anus, scrotal, 186  
Aorta, disease of and tabes, 501  
Apera bitter water, 178  
Aphasia, prognosis, etc., of, 120  
Apoplexy of the ovary, 32  
Appendicitis, relapsing, pathogeny of, 156; the pathology of, 179; tubo-ovarian congestion simulating, 189; suppurative, a lumbo-iliac incision in, 292; and intestinal obstruction, 361; the differential diagnosis of, and intestinal obstruction from gall stone, 487  
Arm, prolapsed, central laceration of perineum from, 231; fetal labour impeded by tumour of, 324  
Arnozan, use of the Roentgen rays in the determination and form of the fistulous tracts, 526  
Arsenic, intravenous injections of in the treatment of psoriasis, 351  
Arsenous acid in epithelioma, 15  
Ascites, the, of young women, 51; chyliform and atrophic hepatic cirrhosis, 181  
Audebert, post-partum hemorrhage from a laceration in the vestibulo-clotteridian region, 32; extraction of the detached fetal head, 363; treatment of hemorrhage from cervical lacerations, 406; sialorrhoea cured by the reduction of a retroflexed gravid uterus, 511  
Aufrecht, tracheal stenosis, 3

**B.**

Babeau, morbid milk in a healthy woman, 471  
Bacilli, typhoid, agglutination of by chemical substance, 222; of tubercle, action of  $\alpha$  rays on, 479  
Bacillus coli and infantile enteritis, 519  
Bacteriology of whooping-cough, 498  
Bacterium, coli commune, action of the endometrium, 148  
Bäcker, latent rupture of uterus in labour, 49  
Boginsky, pyelonephritis in children, 40; eucasin as a children's food, 473  
Baqué, salophen, 472  
Barbagallo, airoil in diarrhoea, 75  
Barks, the etiology of foot and mouth disease, 517  
Barr, cirrhosis of the liver, 243  
Bayle, puerperal neuritis, 71  
Bean in the left bronchus of a child, 489  
Bechterew, treatment of in epilepsy, 352  
Béguin, gonorrhoeal rheumatism in pregnancy, 273  
Belin, the serum treatment of diphtheria, 495  
Benedicente, formol albumin, 450  
Benzote of mercury, treatment of buboes with, 278  
Berger, injury and cancer, 84; mixed tumours of the soft palate, 127  
Bergkammer, fatal inclusion in an infant aged 11 months, 328  
Bergmann, the surgery of cerebral tumours, 462  
Bergonié, action of  $\alpha$  rays on tubercle bacilli, 479; use of the Roentgen rays in the determination of the direction and form of fistulous tracts, 526; intestinal obstruction treated by electricity, 331; the action of  $\alpha$  rays on pulmonary tuberculosis, 370  
Berkley, lesions produced by thyroid extract, 153  
Berlitzheimer, tetany of gastric origin, 367  
Bernhard, contracted kidney in children, 481; splenectomy for injury, 523  
Besnier, the internal treatment of eczema, 17  
Bibard, treatment of anosmia, 218  
Bier, curative action of hyperæmia, 220; the therapeutic effect of artificial hyperæmia, 353  
Bieracki, chlorosis, 61  
Bilbaut, a case of congenital genu recurvatum, 317  
Björkstern, diphtheria with unusual complications, 311

Bladder, chronic contraction of the prostatic fibres encircling the vesical neck of, 144; ovariotomy ligatures in the, 447; cure of exstrophy of by marginal sutures, 525  
Blanc, operation for tubal pregnancy, death, 212  
Blastomycetes in hypertrophied tonsils, 478  
Blepharitis, ichthyol in, 56  
Block, the serum diagnosis of scarlet fever, 355  
Blood, diagnosis of diabetes mellitus by reaction of to aniline stains, 2, 157; the bactericidal action of the, 96; a rapid method of estimating iron in the, 116; diabetic, Bremer's reaction in, 313; effect of change of temperature on the, 374 — serum "agonal," entry of micro-organisms into, 18; antipyretic action of, 435  
Blumreich, infective disease and extirpation of the spleen, 200  
Bodon, labour in a case of complete transposition of the viscera, 167  
Bogoslowsky, apera bitter water, 178  
Boimond, retroversion of gravid uterus, uræmia, recovery, 52  
Bok, aphasia, 120  
Boland, chloroform versus ether in obstetrics, 50  
Bones, premature development of, 214  
Bonoin, actinomycotic typhilitis, 184  
Bonomo, the action of  $\alpha$  rays on micro-organisms, 139  
Bordier, a "new" symptom of facial paralysis, 482  
Bosányi, heat as a therapeutic agent, 430  
Bouilly, the ascites of young women, 51  
Bourneville, unilateral cerebral atrophy with idiocy, 484  
Bourquin, the cerebral complications of actinomycosis, 312  
Bradley, primary sarcoma of the pleura, 359  
Bradycardia, unilateral, 339  
Brain, unilateral atrophy of with idiocy, 484; tumour of and mental functions, 500  
Braquehaye, congenital hypertrophy of the sub-lingual glands, 318  
Braun, closure of a perforating gastric ulcer by omentum, 102  
Breast, suppurating, chondro-osteosarcoma of the, 165  
Breech presentation, peritoneal symptoms in, 323  
Bremer, diagnosis of diabetes mellitus by reaction of the blood to aniline stains, 2, 157; the reaction of in diabetic blood, 313  
Bresler, kryofin in influenza, 453  
Bretton, tuberculous meningitis of choreic type, 437  
Brieger, meat poisoning, 438  
Brockbank, the causation of the presystolic murmur, 142  
Brachiocele, cystic, teratoma of the neck simulating, 146; the surgery of, 342  
Bronchus, left, of a child, bean in the, 489  
Bronovsky, strontium lactate, 197  
Brosch, the dangers of artificial respiration, 349  
Brousse, treatment of eczema by picric acid, 429  
Bruschi, gangrene of the genitals following forceps application for deformed pelvis, recovery, 297  
Bryant, treatment of epilepsy, 177  
Buboës, treatment of with benzoate of mercury, 278  
Burel, local treatment of cutaneous syphilis, 304  
Burns, injections of artificial serum as a means of preventing death in, 154; the cause of death in and varnishing in animals, 241  
Burridge, congenital absence of uterus and vagina, 213  
Burrell, recurrent dislocation of the shoulder, 504  
Büssenius, the new tuberculin, 93  
Buzdygau, the influence of iron on the secretion of gastric juice, 392  
Buzzi, the serum treatment of leprosy, 428

Copies of the Index to the Epitome, with Title-page, for binding in separate form, can be had on application to the Office, 429, Strand, W.C.

## C.

Cade, perforating hard and soft sores, 314  
 Caesarean section, deformity from stays, diffuse enchondroma, 255; followed by vaginal amputation of the artificially inverted uterus, 298  
 Calabrese, paralytic rabies, 377  
 Calculi, biliary, intestinal obstruction by, 401  
 Calculus, vesical, in children, 7  
 Calmette, toxins and antitoxins, a new theory, 78  
 Calomel, injections of in lupus, 76; in gonorrhoeal conjunctivitis of the newborn, 115; injections of in syphilis, 513  
 Calot's operation without anaesthesia, 346  
 Campana, duration of the period of contagion in syphilis, 379  
 Cancer, contagiousness of, 23; and cirrhosis of the liver, 38; of the uterus, chelidonium majus in, 74; and injury, 84; chelidonium in, 237; and pregnancy, 384; primary of the Fallopian tubes, 449; haemorrhage at menopause and, 508  
 Capitan, obesity and gigantism in a child of 4, 143  
 Capsules, accessory suprarenal in pelvis, 174  
 Carcinoma, primary, of gall-bladder, 180; of serous membrane, 242  
 Cardiac. *See Heart*  
 Carle, pyloric obstruction and hypersecretion of hydrochloric acid, 414  
 Carratu, chloroform as an anthelmintic, 477  
 Casper, chronic gonorrhoea, 230  
 Castaïne, milky blood serum, 240  
 Castration for molluscs ossium, 346  
 Caterpillar, tumour caused by hairs of, 117  
 Catgut or silk in abdominal section? 104  
 Cattle malaria, 539  
 Caustics, effect of, on the uterus, 48  
 Cauterisation, painless, with nitrate of silver, 332  
 Cavazzani, hydrarthrosis, 524  
 Celli, cattle malaria, 539  
 Cellulitis, deep diffuse in cervical adenophlegmon, 402  
 Centauri, "stomoosins," 534  
 Cerebral. *See Brain*  
 Cerny, arsenic acid in epithelioma, 15  
 Cervix uteri. *See Uterus*  
 Chambrelent, puerperal infection and abscess of lung, 31  
 Chancres, hard, of the ocular conjunctiva, 209  
 Charlee, placenta praevia, death at seventh month, 530  
 Charpentier, habitual abortion, 29  
 Chelidonium majus, in cancer of the uterus, 74; in cancer, 237  
 Cherry, primary neoplasms of the kidney, 260  
 Child, young, diabetes mellitus in a, 22; over 3 months, congenital obliterations of hepatic duct in a, 106; of 4, obesity and gigantism in a, 143; gonorrhoeal peritonitis in a, 420; 4 months old, gastric ulcer in a, 455; bean in the left bronchus of a, 489; ovariotomy for sarcoma in a, 509  
 Childhood, fracture of the neck of the femur in, 45; cyclic haematuria of, 125; Addison's disease in, 376  
 Children, vesical calculus in, 7; pyelonephritis in, 40; adherent prepuce, a cause of convulsions in, 8; acute nephritis in, 160; eucasin as a food for, 473; contracted kidney in, 481; treatment of articular rheumatism in by Roentgen rays, 514  
 Chipault, the treatment of Pott's disease of the spine, 43  
 Chloride of zinc, the radical cure of hernia by injections of, 105  
 Chlorides, urinary, the prognostic value of, 121  
 Chloroform versus ether in obstetrics, 50; as an anthelmintic, 477  
 Chlorosis, diagnosis of, 61; treatment of, 73  
 Cholecystitis in enteric fever, 206  
 Cholera, infantile, saline injections in, 432  
 Chondro-osteosarcoma, suppurating, of breast, 202  
 Chorea, pathogenesis of, 287; etiology of, 502  
 Christiania, puerperal fever in the maternity at, 423  
 Chrostek, "agonal" entry of micro-organisms into the blood serum, 18; etiology of chronic rheumatism, 283  
 Cicatrix, ovariotomy, treatment of hernia of, 416  
 Cirrhosis of the liver, and cancer, 38; hepatic, pathogeny of, 58; atrophic, hepatic, and chyliform ascites, 181; of the liver, 243; hepatic, sulphate of potash and, 334  
 Clendinnen, precocious menstruation and premature osseous development, 214  
 Clitoris, cystic tumour of the, 320  
 Cocaine, in the intractable vomiting of pregnancy, 470

Coignet, perforating hard and soft sores, 314  
 Colles's law, exception to, 224  
 Colombini, the frequency of complications in gonorrhoea, 442  
 Colon, inflammation of the, 458  
 Comby, tannin and its derivatives in infantile diarrhoea, 258  
 Condio, nervous diarrhoea in pregnancy, 299  
 Congestion, tubo-ovarian simulating appendicitis, 299  
 Conjunctiva, ocular, hard chancre of the, 209  
 Conjunctivitis, gonorrhoeal of the unborn, calomel in, 115  
 Constipation in the puerperium, 210  
 Contusions, abdominal, 441  
 Convulsions in children, adherent prepuce a cause of, 81; puerperal, veratrum viride in, 159  
 Cord, spinal, disease of in pernicious anaemia, 284; reflexes in injuries of the, 490  
 — umbilical, picric acid dressing of, 251, 425; fatal inversion of uterus from traction on the, 532  
 — orpuscles, "Russell's" in the central nervous system, 373  
 Corrosive sublimate, intravascular injections of, 57  
 Cough, nervous, in pregnancy, 364  
 Coughing, rupture of abdominal wound from, 322  
 Cramer, the treatment of hydronephrotic kidney, 25  
 Crawford, malformed hands, 187  
 Crises, idiopathic gastric, 226  
 Croizier, obesity and gigantism in a child of 4, 143  
 Croston, labour in a case of elongation of the vaginal portion of the cervix uteri, 326  
 Crouzat, peritoneal symptoms in breech presentation, 323  
 Curette, the, denounced in incomplete abortion, 529  
 Cyanosis, the independence of congenital cardiac malformation and, 202  
 Cyst, dermoid ovarian in labour, 87; dermoid, labour obstructed by, 271; hydatid of the liver, ileus due to, 362; a vaginal, 492  
 Cystadenoma of the uterus, origin of, 130  
 Cystitis, gonorrhoeal in women, 13  
 Cysts, dermoid, of the anterior mediastinum, 244  
 Czaplewski, bacteriology of whooping-cough, 498  
 Czempin, ruptured tubal pregnancy twice within a year, 101  
 Czerny, milk and ammonia excretion, 223  
 D.  
 Da Costa, serum diagnosis of enteric fever, 483  
 Dalchié, metrorrhagia and heart disease, 235  
 D'Anna, intravascular injections of sublimate and quinine, 57  
 Darez, adherent prepuce a cause of convulsions in children, 81  
 Darier, ichthyol in blepharitis, 56  
 Dauchez, limitation of the use of the uterine sound, 11  
 D'Aulnay, gonococcosis, 59  
 Davis, pregnancy and syphilis, 169; prenatal infection, 305  
 Death, the cause of in burns and varnishing in animals, 241  
 De Baets, labour in a case of fixed latero-flexion of the cervix, 254  
 De Buck, galactol, 451  
 De Cesare, the Bechterew treatment in epilepsy, 352  
 Deciduoma malignum, metastatic deposit in brain, 275  
 De Grazia, "Russell's" corpuscles in the central nervous system, 373  
 De Holstein, general paralysis of diabetic origin, 63  
 Delafeld, inflammation of the colon, 458  
 Delagenière, the surgery of the ureter, 103  
 Delarde, toxins and antitoxins, a new theory, 78  
 Delbet, the internal saphena vein and varices, 486  
 Demars, the radical cure of hernia by zinc chloride injections, 105  
 Demons, abdominal contusions, 441  
 De Paoli, primary tuberculosis of the female external genitalia in the adult, 107, 168  
 De Quervain, the cerebral symptoms of actinomycosis, 312; appendicitis and intestinal obstruction, 361  
 Dercum, cerebral diplegia, 227  
 De Schulz, juniper tar, 431  
 De Simoni, blastomycetes in hypertrophied tonsils, 478  
 De Vos, abscess of the ovary, 272  
 De Wecker, corneal tattooing, 383

Diabetes, mellitus, diagnosis of from the reaction of the blood to aniline stains, 2, 157; mellitus in a young child, 22; mellitus, varieties of, 264  
 Diarrhoea, airoli in, 75; infantile, tannin and its derivatives in, 258; nervous in pregnancy, 299  
 Dieulafoy, haematuria in chronic nephritis, 245; renal haematuria without apparent cause, 375  
 Diphtheria, prolonged, 42; treatment of, 112; serum treatment of, 137, 257; with unusual complications, 311  
 — antitoxin. *See Antitoxin*  
 — immunisation through the alimentary canal, 512  
 — toxin, the behaviour of human milk to, 307  
 Diplegia, cerebral, 227  
 Disease, infective, and extirpation of the spleen, 200; cardio-vascular, treatment of, 409; tubular, nodular forms of, 424  
 — Addison's, in childhood, 376  
 — foot and mouth, the etiology of, 516  
 — Graves's, operating on the thyroid in, 336  
 — Pott's, of the spine, treatment of, 43; early nervous symptoms in, 381  
 Dock, carcinoma of serous membrane, 242  
 Döntz, tetanus antitoxin, 72  
 Doernberger, opium poisoning, 289  
 Doléris, rupture of recto-vaginal septum in labour, 90  
 Dorpbilith, kolanin, 33  
 Doutrelefont, the R. tuberculin, 277  
 Dowd, treatment of chronic gonorrhoea, 280  
 Drennan, exception to Colles's law, 224  
 Dreyer, face presentations, 28  
 Dropsey of the fetus, 427  
 Drion, large fibrosarcoma of the abdominal wall successfully treated by extirpation, 316  
 Duchamp, Caesarean section followed by vaginal amputation of the artificially inverted uterus, 298; actinomycosis cured by iodide of potassium, 301  
 Duct, hepatic, congenital, obliteration of in a child over 3 months old, 106  
 Dühring, v., hereditary syphilis, 185  
 Dugon, abscess of vulvo-vaginal gland, 444  
 Duogern, v., cholecystitis in enteric fever, 206  
 Dupeu, acute nephritis in children, 460  
 Duplay, tuberculous osteo-arthritis of the shoulder, 83; operative treatment of tuberculous testis, 294; treatment of spinal abscess, 503  
 Dupuytren's contraction, 419  
 Durante, cyclic haematuria of childhood, 125  
 Duret, the cure of vesical extrophy by marginal suture, 525  
 Dysmenorrhoea, membranous, removal of ovaries for, 327  
 Dyspepsia, emotional, 62  
 Dyspnoea, uræmic, treatment of by ether, 238  
 Dystocia from mottoscopy, 446  
 Dzerjowsky, the origin of diphtheria antitoxin, 354

E.  
 Ear, middle, operative treatment of chronic inflammation of the, 67  
 Eberhart, labour impeded by tumour of foetal arm, 324  
 Ebstein, acute nephritis, 140  
 Eclampsia and albuminuria in pregnancy, 108; post-partum, 347; in pregnancy and labour, statistics of, 365; puerperal and amaurosis, 388; puerperal, principles of treatment in, 467  
 Eczema, the internal treatment of, 17; picric acid in, 155, 429  
 Egger, "agonal" entry of micro-organisms into the blood serum, 18  
 Einhorn, orthoform, 279  
 Electricity, intestinal obstruction treated by, 331  
 Eliachevitsch, puerperal eclampsia and amaurosis, 388  
 Eisner's method, 499  
 Enchondroma, diffuse, 255  
 Endocarditis, rheumatic, 485  
 Endometrium, action of the bacterium coli commune on, 148  
 Engelmann, the serum treatment of tetanus, 330  
 Englich, treatment of prostatic retention, 4  
 Engström, non-septic paralysis of intestines after abdominal section, 315  
 Enteritis, infantile, bacillus coli and, 519  
 Epilepsy, treatment of, 177; the Bechterew treatment of, 352  
 Epithelioma, arsenic acid in, 15  
 Erb, chronic anterior poliomyelitis after injury, 159  
 Erdberg, treatment of enlarged prostate, 248

Erysipelas, serumtherapy in, 515  
Escherich, diphtheria, immunisation through the alimentary canal, 512  
Esmann, pregnancy and labour after ventrification of the uterus, 69  
Ether versus chloroform in obstetrics, 50; treatment of uræmic dyspnoea by, 238  
Eucasin as a children's food, 473  
Everke, laceration of vaginal fornix in labour, 403  
Eye, oxygenated water in affections of, 219; Roentgen rays and foreign bodies in the, 382

## F.

Face presentations, 28, 47  
Falk, infantile paralysis, 263  
Fanteno, pyloric obstruction and hypersecretion of hydrochloric acid, 414  
Baralli, penetrating wound of the heart, 399  
Federici, cervical, adenophlegmon with deep diffuse cellulitis, 402  
Feeding in inherited syphilis, 77  
Feinberg, nervous complications of influenza, 10x  
Feindell, general neurofibromatosis, 522  
Femur, fracture of the neck of in childhood, 45  
Féré, Dupuytren's contraction, 419  
Fermé, antipyretic action of blood serum, 435  
Ferré, premonitory symptoms of puerperal infection, 295, 385; action of  $\alpha$  rays on tubercle bacilli, 479  
Ferroni, structure of the ovaries in osteomalacia, 421  
Feyerstein, pyramidon, 432  
Fever, enteric, cholecystitis in, 206; causes of epidermis of, 286; fetal, 308; the serum diagnosis of, 396, 483  
— puerperal, antistreptococcus serum in, 176; in the Christiana Maternity, 423  
— relapsing, phagocytosis in, 394; serum diagnosis of, 521  
— scarlet, the serum diagnosis of, 355; paroxysm in the course of, 439  
Fibroid, submucous uterine, operation under grave conditions, ultimate recovery, 170  
Fibroids and pregnancy, 147; of the uterus, triplets and, 366  
Fibroma of parietes and pregnancy, 491  
Fibro-sarcoma, large, of abdominal wall successfully treated by extirpation, 316  
Fieux, dermoid ovarian cyst in labour, 87; iodide or potassium and lactation, 92; the treatment of placenta praevia, 270  
Flinley, primary sarcoma of the pleura, 359  
Finney, operative treatment of general suppurative peritonitis, 207  
Fischer, melana neonatorum, 461  
Fistula, congenital, in the neck, operative treatment of, 400  
Fistulous tracts, use of Roentgen rays in the determination of the direction and form of, 526  
Flatau, castration for mollusca osseum, 345  
Flexner, pseudo-tuberculosis hominis streptothrix, 282  
Flooding, saline injections after, 192  
Florence's reaction, 457  
Fetus, amorphous, 274; dropsy of the, 427; extra-uterine, death of from congenital cerebral disease, 445  
Food preparations, artificial, 53  
Foot and mouth disease. *See Disease*  
Formalin, 217  
Formol-albumin, 450  
Fornace, hypodermic alimentation with olive oil, 221  
Fornix, vaginal, laceration of in labour, 403  
Fournier, the choice of a mercurial treatment, 135  
Fracture, thyroid treatment as a means of consolidation in, 229  
Fraenkel, influenza, 225; aortic aneurysm, 265  
Fraink, papilloma of labium majus, 348  
Francesco, Maragliano's serum in cervical adenitis associated with phlyctenular ophthalmia, 136  
Frenkel, a "new" symptom of facial paralysis, 482  
Fricker, foreign bodies in the stomach, 86  
Friedlaender, effect of change of temperature on the blood, 374  
Friedman, Roentgen rays and foreign bodies in the eye, 382  
Fritsch, the puerperium and gonorrhœa, 407  
Freiheit, vesical calculus in children, 7; corneal tattooing, 383  
Fuchs, perforation of the gall bladder, 166  
Fuller, chronic contraction of the prosthetic fibres encircling the vesical neck of the bladder, 144  
Futterer, primary carcinoma of gall bladder, 180

G.  
Galethol, 451  
Galeski, treatment of gonorrhœa with silver irrigation, 454  
Gall bladder, perforation of the, 166; primary carcinoma of, 180  
Gall stone, the differential diagnosis of intestinal obstruction from, and of appendicitis, 487  
Gallois, treatment of uræmic dyspnoea by ether, 238  
Ganglion, Gasserian, extirpation of for neuralgia, 343  
Gangrene of the genitale following forceps application, 297  
Gastric juice, influence of iron on the secretion of, 301  
Gaucher, picric acid in eczema, 155  
Gauthier, thyroid treatment as a means of consolidation in fracture, 279  
Gavriloff, serum treatment of diphtheria, 257  
Genitals, female external, primary tuberculosis of the in the adult, 107, 168; gangrene of, following forceps application, 297  
Geno recurratum, congenital, a case of, 317  
Gerhardt, aortic aneurysm, 100; pulsus paradoxus, 356  
Gessner, face presentation, 47  
Gestation, tubo-uterine, successful operation for, 133  
Geyl, acute prolapse of fetal membranes in fifth month of pregnancy, 422  
Gianelli, brain tumour and mental functions, 500  
Gibson, treatment of acute intussusception, 249  
Gigantism in a child of 4, 143  
Gland, vulvo-vaginal, abscess of, 444  
Glands, sublingual, congenital hypertrophy of, 318  
Glaucoma, new treatment of, 465  
Gloves, the use of in practical surgery, 505  
Glück, intramuscular injections in laryngeal syphilis, 250  
Göbel, osteomalacia and Roentgen rays, 491  
Goenner, is the vagina in normal pregnancy aseptic? 171  
Goffroy, the diagnosis of early general paralysis, 337  
Goinard, painful peritoneal adhesions, 488  
Goitre, exophthalmic, dangers of operative interference in, 26; exophthalmic, operative treatment of, 65, 163  
Goldfarb, and its disadvantages, 216  
Gonococci, the differentiation of, 456  
Gonococcosis, 59  
Gonorrhœa, irrigation in, 36; and primary sterility, 70; a cause of detachment of placenta, 131; chronic, 230; chronic, treatment of, 280; and the puerperium, 407; the frequency of complications in, 442; treatment of with silver irrigation, 454; acute, protargol, a new remedy for, 497  
Gottschalk, accidental haemorrhage, 188  
Gottstein, acquired immunity, 412  
Goudart, diabetic albuminuria and its treatment, 474  
Gouget, peripheral neuritis due to hepatic insufficiency, 392  
Gout, lead poisoning and, 79  
Graves's disease. *See Disease*  
Graziani, formalin, 217  
Gregoire, guaiacol injections in surgical tubercle, 196  
Griffith, fetal typhoid fever, 308  
Grindal, a lumbro-iliac incision in the treatment of suppurative appendicitis, 292  
Grognot, early nervous symptoms in Pott's disease, 381  
Gros, the action of  $\alpha$  rays on micro-organisms, 139  
Gross, death of extrauterine fetus from congenital cerebral disease, 445  
Guaiacol, injections of in surgical tubercle, 196  
Guéniot, dorsal nipple in a man, 319  
Gunshot wound, penetrating of abdomen, recovery from without operation, 418

## H.

Hacker, v., operative treatment of congenital fistula of the neck, 400  
Hæmarthrosis of the knee, the mechanical treatment of, 162  
Hæmaturia, cyclic, of childhood, 125; in chronic nephritis, 245; renal without apparent cause, 375  
Hæmoglobinuria, paroxysmal, 20  
Hæmorrhage, post-partum from a laceration in the vestibulo-clotiridian region, 32; accidental, 188; from cervical lacerations, treatment of, 406; at menopause and cancer, 508  
Hæmorrhages, ocular, in young persons and in adults, 128

Hager, the Maragliano serum, 195  
Hairpin swallowed and detected per vaginum, 531  
Hairs of caterpillar, tumours caused by, 117  
Halbertsma, statistics of eclampsia in pregnancy and labour, 365  
Hands, malformed, 187  
Hansmann, acromegaly, 436  
Hansy, treatment of fracture of the lower jaw, 30  
Haroitz, causes of epidemic typhoid, 286  
Harlez, varicellous laryngitis, 160  
Hayem, polyadenoma of the stomach, 516  
Hazen, congenital dislocation of both knees, 12  
Head, detached fetal extraction of, 363  
Heart, musical murmurs in disease of, 158; the independence of congenital malformations of and cyanosis, 202; disease of and metrorrhagia, 235; diphtheritic affections of the, 261; penetrating wound of the, 399  
Heat as a therapeutic agent, 430  
Heinz, orthoform, 279  
Hensel, bacteriology of whooping-cough, 498  
Hernia, the radical cure of by zinc chloride injections, 103; of suppurating ovary in an aged woman, 211; of ovariotomy cicatrix, treatment of, 426  
Herpes and tuberculosis, 21  
Herkheimer, intravenous injections of arsenic in the treatment of psoriasis, 351  
Heydenreich, excision of the rectum through the vagina, 463  
Hibbard, gastric ulcer in a child 4 months old, 455  
Higier, epileptiform paralysis, 310  
Hintze, bilateral axillary polymastia, 91  
Hip-joint, the risk attending forcible correction of distortion due to disease of, 64  
Hlava, kaolinosis, 518  
Hoffmann, the urine in osteomalacia, 60; ovariotomy for sarcome in a child, 59  
Hohr, the new tuberculin, 152  
Homans, cavernous angioma of the spleen, 85  
Hoppe-Seyler, acute sulphur poisoning, 94  
Hubert, constipation in the puerperium, 210  
Hütter, tabes and aortic disease, 501  
Hydatids, multiple abdominal, treated by repeated abdominal sections, 164  
Hydramnion and one-yolk twins, 252  
Hydrarthrosis, 524  
Hydrastis canadensis, 305  
Hydrochloric acid, free, in the stomach contents, 413; hypersecretion of and pyloric obstruction, 414  
Hyperæmia, curative action of, 220; artificial, the therapeutic effect of, 353  
Hypo-azoturia, 335  
Hysteria, in the male, 122; the after-history of radical cure of, 341

## I.

Idiocy, unilateral cerebral atrophy with, 484  
Ileus due to hydatid cyst of the liver, 362  
Immunity, vaccinal, the duration of, 358; acquired, 412  
Infancy, chronic atypical polyarthritis commencing in, 527  
Infant, newly-born, acetanilide poisoning in an, 55; pelvic sarcoma in an, 109; aged 11 months fetal inclusion in an, 238  
Infection, puerperal, and abscess of the lung, 31; colobacillary, the serum reaction in, 109; puerperal, premonitory symptoms of, 295, 385; prenatal, 395  
Inflammation, infective, influence of temperature on, 480  
Influenza, nervous complications of, 101; complications of, 225; kryoflin in, 453  
Injections, saline, after flooding, 192  
Injury and cancer, 84  
Insanity, treatment of, by means of abscesses produced by hypodermic injections of turpentine, 108  
Intestines, non-septic paralysis of, after abdominal section, 315  
Intussusception, acute, treatment of, 249; case of a nucleus of gut passed per rectum, 267  
Iodide of potassium, and lactation, 92; actinomycosis cured by, 301; in phthisis, 411  
Iodine, solutions of, in trachoma, 16  
Iodothyroin, 37  
Iron, the absorption of and its hypodermic administration, 95; subcutaneous injection of in anaemia, 113; in the blood, a rapid method of estimating, 115; influence of on the secretion of gastric juice, 391; distribution of in the liver, 434  
Irrigation in gonorrhœa, 36

**J.**  
 Jaboulay, treatment of exophthalmic goitre, 163  
 Jacob, potassium chlorate poisoning, 415  
 Jacobs, primary sarcoma of Fallopian tube, 190  
 Jacobson, fetus amorphous, 274  
 Jacoby, infective disease and extirpation of the spleen, 200; a new mechanical treatment for phthisis, 380  
 Jasiewicz, the duration of vaccinal immunity, 358  
 Jaw, lower, treatment of fracture of, 360  
 Jaworski, fatal menstruation, 296  
 Jemma, Elsner's method, 499  
 Jepson, triplets and fibroids of the uterus, 366  
 Jessen, prolonged diphtheria, 42  
 Johannessen, pelvic sarcoma in an infant, 109  
 Jolles, a rapid method of estimating iron in the blood, 116  
 Jonnesco, a new method of performing lumbar nephropexy, 162; abdominal panhysterectomy in pelvic suppuration, 387; new treatment of glaucoma, 405  
 Juniper tar, 431  
 Jurasovský, deciduoma malignum, metastatic deposit in brain, 275

**K.**  
 Kaolinosis, 518  
 Kasem-Beck, the presystolic murmur, 201  
 Kasperek, the action of tuberculin, 134  
 Keen, resection of the sternum for tumours, 66  
 Keiffer, pregnancy and fibroids, 147  
 Keller, milk and ammonia excretion, 223; menstruation and nutrition, 345  
 Kempner, meat poisoning, 438  
 Kennedy, regeneration of nerves, 39  
 Keratitis, relapsing interstitial of uterine origin, 253  
 Kidney, wandering hydronephrotic, treatment of, 25; the etiology of tumours of the, 138; primary neoplasms of the, 260; surgery of the, 290, 440; contracted, in children, 481  
 Kirkbride, leucin and tyrosin in the urine, 538  
 Kjelsberg, puerperal fever in the Christiania maternity, 423  
 Klein, a bean in the left bronchus of a child, 489  
 Klempner, artificial food preparations, 53  
 Knee, the mechanical treatment of haemarthrosis of the, 162  
 Knees, congenital dislocation of both, 12  
 Koch, F., a bean in the left bronchus of a child, 489  
 — R., the new tuberculin of, 54, 93, 152, 175, 177, 300, 535  
 Kölle, the differential diagnosis of intestinal obstruction from gall stone and of appendicitis, 487  
 Koenig, relapsing interstitial keratitis of uterine origin, 253  
 Kolanin, 33  
 Krause, congenital prolapsum uteri and spina bifida, 236  
 Krauss, treatment of cerebral syphilis, 104  
 Kreitmair, fatal inversion of uterus in labour, 469  
 Kronecker, coronary thrombosis, 118  
 Krukenberg, treatment of diphtheria, 112  
 Kubisgari, 98  
 Kryofin in influenza, 453

**L.**  
 Labium majus, papilloma of, 348  
 Labour, latent rupture of uterus in, 49; after ventrification of the uterus, 69; dermoid ovarian cyst in, 87; rupture of rectovaginal septum in, 90; and placental anomalies, 111; in a case of complete transposition of the viscera, 167; in a case of fixed-latero flexion of the cervix, 254; obstruction by dermoid cyst, 271; impeded by tumours of fetal arm, 324; in a case of elongation of the virginal portion of the cervix uteri, 326; statistics of eclampsia in, 365; laceration of vaginal fornix in, 403; swollen leg after, 404; fatal inversion of uterus in, 469; acquired atresia of cervix in, 528  
 Labusquière, effect of caustics in the uterus, 48  
 Lacoud, cyclic albuminuria, 309  
 Lactation, iodide of potassium and, 92  
 Lamberlenghi, central laceration of perineum from prolapsed arm, 231  
 Lambret, reflexes in injuries of the spinal cord, 490  
 Lancereaux, sulphate of potash in hepatic cirrhosis, 334  
 Larat, treatment of infantile paralysis, 256  
 Laryngitis, varicellous, 160  
 Latouche, treatment of congenital absence of vagina, 213  
 Lauenstein, preventive plugging in abdominal surgery, 24  
 Laur, hard chancre of the ocular conjunctiva, 209

Laurent, intussusception, 9 inches of gut passed per rectum, 267  
 Lead poisoning and gout, 79; etiology of, 246  
 Leg, swollen, after labour, 404  
 Legay, etiology of chorea, 502  
 Le Goff, Bremer's reaction in diabetic blood, 313  
 Lejars, dangers of operative interference in exophthalmic goitre, 26  
 Lemoine, the local application of salicylate of methyl in rheumatism, 35  
 Lennander, operative treatment of hypertrophied prostate, 44  
 Lenoble, rupture of recto-vaginal septum in labour, 90  
 Lépine, pyramidon, 34; the absorption of iron and its hypodermic administration, 95; subcutaneous injections of iron in anaemia, 113; diabetes mellitus, 264  
 Leprosy, the serum treatment of, 428; in India and Egypt, 520  
 Lessage, bacillus coli and infantile enteritis, 519  
 Lesser, syphilis insontium, 145  
 Leube, the surgical treatment of gastric ulcer, 126  
 Leucin in the urine, 538  
 Levy, the x rays in obstetrical diagnosis, 468  
 Liebman, a darning needle in ovary and uterus, 232  
 Ligatures, ovariotomy in the bladder, 447  
 Limbs, lower, elephantiasic oedema of, 320  
 Lindemann, distribution of iron in the liver, 434  
 Lindholm, gonorrhœal cystitis in women, 13  
 Lipoma, retroperitoneal, 6  
 Lithopædion, 443  
 Liver, cirrhosis of the and cancer, 38; cirrhosis of the, 243; movable, fixing a, 293; ileus due to hydatid cyst of the, 362; distribution of iron in the, 434  
 Loesch, the diagnosis of tuberculosis by tuberculin, 182  
 Loeventhal, serum diagnosis of relapsing fever, 521  
 Loin, saline injections in infantile cholera, 433  
 London, the bactericidal action of the blood, 96  
 Lop, peritoneal symptoms in breech presentation, 323  
 Lovett, recurrent dislocation of the shoulder, 504  
 Lucas-Championnière, kubisgari, 98  
 Ludwig, diagnosis and treatment of rupture of the uterus, 8  
 Lugeol, retention of urine and pregnancy at the fifth month, 151  
 Lung, abscess of the and puerperal infection, 31  
 Lupus, injections of calomel in, 76

**M.**  
 MacEvitt, tubo-ovarian congestion simulating appendicitis, 189  
 Mahé, the treatment of fracture of the lower jaw, 360  
 Maignan, the prognostic value of urinary chlorides, 121  
 Malaria, phenicol in, 536; in cattle, 539  
 Male, hysteria in the, 122  
 Malherbe, operative treatment of chronic inflammation of the middle ear, 67  
 Malvos, agglutination of typhoid bacilli by chemical substances, 222  
 Man, dorsal nipple in a, 319  
 Maragliano, Koch's new tuberculin, 54; the serum of cervical adenitis associated with phlyctenular ophthalmia, 136; the serum of, 195; radioscopy of the thoracic organs, 459  
 Marchthurn, extirpation of pregnant fibroid uterus, 386  
 Marian, chorea, 287; treatment of ulcero-membranous stomatitis, 369  
 Marie, Bremer's reaction in diabetic blood, 313  
 Marsh, intermenstrual phenomena and the relation of menstruation to ovulation, 250  
 Marsi, vicarious menstruation after removal of ovaries, 494  
 Martin, apoplexy of the ovary, 321  
 Martius yellow, poisoning by, 203  
 Marx, actol as a general disinfectant, 350  
 Maslovsky, gonorrhœa a cause of detachment of placenta, 131  
 Mathieu, haemorrhagic erosions of stomach, 97  
 Maturity, precocious, 215  
 Mayer, Mdle. v., pathogeny of relapsing appendicitis, 156  
 Maygrier, hydramnion and one-yolk twins, 252; post-partum eclampsia, 347; incomplete abortion, the curette denounced, 529  
 Meat poisoning, 438  
 Mediastinum anterior, dermoid cysts of the, 244  
 Mégini, a vesicant acarus, 398  
 Méjia, gonorrhœal peritonitis in a child, 420  
 Melena neonatorum, 46

Membrane, serous, carcinoma of, 242  
 Membranes, fetal, acute prolapse of in fifth month of pregnancy, 422  
 Meningitis, cerebro-spinal, 378; tuberculous, of choreic type, 437  
 Menopause, the, and senile involution of the uterus, 405; haemorrhage at and cancer, 508  
 Menstruation, precocious and premature osseous development, 214; relation of ovulation to, 250; fatal, 296; and nutrition, 345; vicarious, after removal of ovaries, 494  
 Mental functions, brain tumour and, 500  
 Mercury, the choice of a treatment by, 135  
 Merkle, chyloform ascites and atrophic hepatic cirrhosis, 181  
 Metorrhagia and heart disease, 235  
 Meyer, origin of adenomyoma and cystadenoma of the uterus, 130; fetal sounds (not cardiac) audible before birth, 344; acquired atresia of cervix in labour, 528  
 Michaux, fibroma of parietes and pregnancy 493  
 Micheli, hypodermic alimentation with olive oil, 221  
 Michi, fixing a movable liver, 293  
 Microbes in acute rheumatism, 333  
 Micro-organisms, "agonal," entry of into the blood serum, 18; the action of x rays on, 139  
 Milk and ammonia excretion, 223; human, the behaviour of to diphtheria toxin, 307; morbid, in a healthy woman, 471  
 Mingour, intestinal, obstruction treated by electricity, 331  
 Minin, cheilidonium in cancer, 237  
 Modigliano, murmur heard over the gastric area, 183  
 Mollard, diphtheritic affections of the heart, 261  
 Mollities ossium, castration for, 346  
 Mongour, the action of x rays on pulmonary tuberculosis, 370  
 Monstrosity, dystocia from, 446  
 Monteverdi, complete transposition of viscera, 119  
 Moore, multiple abdominal hydatids treated by repeated abdominal section, 164  
 Morisani, action of the bacterium coli commune on the endometrium, 148  
 Moritz, unilateral bradycardia, 339  
 Moure, the treatment of oæna, 368  
 Mouton, tuberculin as a diagnostic agent, 262  
 Müllerheim, arterial sclerosis limited to female organs, 132  
 Mugnai, extirpation of Gasserian ganglion for neuralgia, 343  
 Murmur, the presystolic, causation of, 142; heard over the gastric area, 183; the pre-systolic, 201  
 Murmurs, musical, in heart disease and angina pectoris, 158  
 Murray, syphilis in pregnancy, 234  
 Muzio, teratoma of the hard palate, 268  
 Mya, lumbar puncture, 123  
 Mydriatics, the electrical introduction of, 390  
 Myeloma, multiple, 204  
 Myomectomy, vaginal, 88  
 Myotics, the electrical introduction of, 390

**N.**  
 Nathan-Larrier, cystic degeneration of ovary and urinary tract, 408  
 Navas, pyelonephritis of pregnancy, 10  
 Nebelthau, acetonuria, 416  
 Neck, teratoma of simulating cystic bronchocèle, 146; operative treatment of congenital fistula of the, 400  
 Needle, darning, in ovary and uterus, 232  
 Neisser, protargol, a new remedy for acute gonorrhœa, 497  
 Neoplasms, primary of the kidney, 260  
 Nephrectomy, new incision for, 46  
 Nephritis, acute, 140; chronic, haematuria in, 245; acute, in children, 460  
 Nephropexy, lumbar, a new method of performing, 161  
 Nerves, regeneration of, 39; future of, 291  
 Nesamoff, solutions of iodine in trachoma, 16  
 Neugebauer, foreign bodies in uterus, 510  
 Neuineyer, orthoform, 533  
 Neuralgia, paræsthetic, 205; extirpation of the Gasserian ganglion for, 343  
 Neuritis, puerperal, 71; peripheral due to hepatic insufficiency, 392  
 Neuro-fibromatosis, general, 522  
 Nighoff, ovariotomy ligatures in the bladder, 447  
 Nipple, dorsal, in a man, 319  
 Nitrate of silver, painless cauterisation by, 332  
 Nobécourt, lead poisoning and gout, 79; the serum reaction in colobacillary infection, 199  
 Noel, contagiousness of cancer, 23

Nove-Josserand, painful peritoneal adhesions, 488  
 Nutrition and menstruation, 345  
 O.  
 Obalinski, renal surgery, 440  
 Obesity in a child of 4, 143  
 Obstruction, intestinal, treated by electricity, 331; intestinal and appendicitis, 361; intestinal by biliary calculi, 401; intestinal from gall stone and of appendicitis, the differential diagnosis of, 487  
 Edema, elephantiasic, of lower limbs, 320  
 Esophagus, spindle-shaped dilatation of the, 80  
 Oettinger, idiopathic gastric crises, 226  
 Ogata, the plague, 306  
 Olive oil, hypodermic alimentation with, 221  
 Ollier, the Roentgen rays in osteoplastic surgery, 5  
 Omentum, closure of a perforating gastric ulcer by, 102  
 Onuf, pseudo-spastic paresis with tremor, 124  
 Ophthalmia, phlyctenular, associated with cervical adenitis, Maragliano's serum in, 136  
 Opium, alkaloids of, 114; poisonings by, 289  
 Orthmann, tuberculosis of the ovary, 149  
 Orthoform, 279, 533  
 Osler, parasthetic neuralgia, 205  
 Osteo-arthritis, tuberculous, of the shoulder, 83  
 Osteoma, large, of the rectus femoris, 464  
 Osteomalacia, the urine in, 60; stricture of the ovaries in, 421; and Roentgen rays, 491  
 Ostermayer, labour obstructed by dermoid cyst, 271  
 Otitis media and cervical abscess, 266  
 Ovaries, removal of for membranous dysmenorrhoea, 327; structure in osteomalacia, 421; vicarious menstruation after removal of ovaries, 404  
 Ovariectomy, three other independent lesions, 276; for sarcoma in a child, 509  
 Ovary, tuberculosis of the, 149; suppurating, in an aged woman, hernia of, 211; darning needle in, 232; abscess of the, 272; apoplexy of the, 321; and urinary tract, cystic degeneration of the, 408  
 Ovulation, relation of to menstruation, 250  
 Ozæna, the treatment of, 368  
 P.  
 Palate, soft, mixed tumours of the, 127; hard, teratoma of the, 268  
 Paley, intussusception, 9 inches of gut passed per rectum, 267  
 Panhysterectomy, abdominal in pelvic suppuration, 387  
 Pansier, the electrical introduction of mydriatics, 390  
 Papilloma of labium majus, 348  
 Paralytic, acute ascending as a complication of Pasteur's treatment, 19; general, of diabetic origin, 63; facial, the tongue in, 82; general, of the young, 99; infantile, treatment of, 236; infantile, case of, 263; epileptiform, 310; early general, the diagnosis of, 337; general, pruritus as a symptom of, 338; in the course of scarlet fever, 439; facial, a "new" symptom of, 482  
 Parascandalo, the cause of death in burns and varnishing in animals, 241; serumtherapy in erysipelas and pyæmia, 515  
 Paresis, pseudospastic, with tremors, 124  
 Parietes, fibroma of and pregnancy, 493  
 Parotids, swelling of in uremia, 141  
 Parvainen, the menopause and senile involution of the uterus, 405  
 Pasteur's treatment, acute ascending paralysis as a complication of, 19  
 Patay, eclampsia and albuminuria in pregnancy, 108  
 Pel, etiology of lead poisoning, 246  
 Pelvis, access of suprarenal capsules in, 174  
 Pennato, cirrhosis of the liver and cancer, 38  
 Penzo, influence of temperature on infective inflammation, 480  
 Perineum, central rupture of from prolapsed arm, 231  
 Peritoneum, decidual tissue in the normal pregnancy, 173; foreign bodies in the, 269  
 Peritonitis, general suppurative, operative treatment of, 207; gonorrhœal in a child, 420  
 Pessary, vaginal stomach pains from the presence of, 110  
 Peters, labour and placental anomalies, 111  
 Pflanz, dermoid cysts of the anterior mediastinum, 244; the behaviour of human milk to diphtheria toxin, 307  
 Phagocytosis in relapsing fever, 394  
 Phenocin in malaria, 536  
 Phthisis, R. tuberculin in, 300; a new mechanism

cal treatment for, 389; iodide of potassium in, 411  
 Pichevin, hemorrhage at the menopause and cancer, 508  
 Picric acid in eczema, 155, 429; dressing of umbilical cord with, 251, 425  
 Pinkus, dropsey of the fetus, 427  
 Placenta, anomalies of the and labour, 111; gonorrhœa a cause of detachment of, 131; prævia, treatment of, 270; prævia, death at seventh month, 530  
 Plague, the, 306  
 Platon, submucous uterine fibroid, operation under grave conditions, ultimate recovery, 170  
 Platzer, missed and irregular abortion, 448  
 Pleura, primary sarcoma of the, 359  
 Plugging, preventive in abdominal surgery, 24  
 Pneumococcus, the, in pregnancy, 172  
 Poisoning, acute, by sulphuric, 94; by Martius yellow, 203; by opium, 289  
 Poliomyelitis, chronic anterior after injury, 159  
 Polyadenoma of the stomach, 516  
 Polyarthritis, chronic atypical, commencing in infancy, 527  
 Polymastia, bilateral axillary, 91  
 Poncet, Cesarean section, deformity from stays, diffuse enchondroma, 255  
 Pontoppidan, poisoning by Martius yellow, 203  
 Porcelli, chronic atypical polyarthritis commencing in infancy, 527  
 Posner, Florence's reaction, 457  
 Potassium chloride, poisoning by, 415  
 Potter, principles of treatment in puerperal eclampsia, 467  
 Pott's Disease. *See Disease*  
 Pozzi, treatment of the uncontrollable vomiting of pregnancy, 68; cocaine in the intractable vomiting of pregnancy, 470  
 Pregnancy, pyelonephritis of, 10; treatment of uncontrollable vomiting of, 68; after ventrification of the uterus, 69; tubal and common abortion, 80; eclampsia and albuminuria in, 108; and fibroids, 147; at the fifth month and retention of urine, 151; and syphilis, 169; normal, is the vagina aseptic in? 171; the pneumococcus in, 172; normal, decidual tissue in peritoneum in, 173; ruptured tubal, twice within a year, 191; tubal, operation for, death, 212; syphilis in, 234; gonorrhœal rheumatism in, 273; nervous diarrhoea in, 299; nervous cough in, 364; statistics of eclampsia in, 365; and cancer, 384; acute prolapse of fetal membranes in fifth month of, 422; cocaine in the intractable vomiting of, 470; and fibroma of parietes, 493  
 Prepuce, adherent, a cause of convulsions in children, 81  
 Procsa, the etiology of foot and mouth disease, 517  
 Procida, removal of ovaries for membranous dysmenorrhœa, 327  
 Prostate, hypertrophied, operative treatment of, 44, 248  
 Protargol, a new remedy for acute gonorrhœa, 497  
 Pruritus as a symptom of general paralysis, 338  
 Pseudo-tuberculosis hominis streptothrixia, 282  
 Psoriasis, vaccinal, 328; intravenous injections of arsenic in the treatment of, 351  
 Puerperium, constipation in the, 210; the, and gonorrhœa, 407  
 Pukalof, calomel in gonorrhœal conjunctivitis of the newborn, 115  
 Pulsus paradoxus, 356  
 Puncture, lumbar, 123, 285; spinal, 357  
 Pyæmia, serumtherapy in, 515  
 Pyelonephritis, of pregnancy, 10; in children, 40  
 Pylorus, obstruction of and hypersecretion of hydrochloric acid, 414  
 Pyramidon, 34, 432  
 Q.  
 Quervain, otitis media and cervical abscess, 266  
 Quinine, abortion and, 9; intravascular injections of, 57  
 R.  
 Rabies, paralytic, 377  
 Radioscopy of the thoracic organs, 459  
 Ragnini, penetrating wound of the heart, 399  
 Ramond, pathogenesis of hepatic cirrhosis, 58  
 Rapazewski, fatal inversion of uterus from traction on the cord, 532  
 Ratimoff, chelidonium in cancer, 237  
 Raymond, intestinal obstruction by biliary calculi, 401  
 Reclus, catgut or silk in abdominal section? 104  
 Rectum, excision of the through the vagina, 463  
 Rectus femoris, large osteoma of the, 464  
 Reel in the uterus, vesico-vaginal fistula, 325  
 Regaud, diphtheritic affections of the heart, 261  
 Reichold, ileus due to hydatid cyst of the liver, 362  
 Reissmann, pregnancy, and cancer, 384  
 Religioki, chelidonium in cancer, 237  
 Renal. *See Kidney*  
 Rendu, acute ascending paralysis as a complication of Pasteur's treatment, 19  
 Resinelli, cystic tumour of the clitoris, 329  
 Respiration, artificial, the dangers of, 349  
 Retina, detached, operative treatment of, 27  
 Reynés, hypoazoturia, 335  
 Rheumatism, local application of salicylate of methyl in, 35; gonorrhœal in pregnancy, 273; chronic, etiology of, 283; acute, microbes in, 333; chronic operative treatment in, 380; articular, salicylate of methyl in, 410; articular in children, treatment of by Roentgen rays, 514  
 Richardière, swelling of the parotids in uremia, 141  
 Ricker, the etiology of tumours of the kidney, 138  
 Ries, nodular forms of tubular disease, 424  
 Ritter, acute sulphonal poisoning, 94  
 Kochon, picric acid dressing of umbilical cord, 251, 425  
 Roentgen rays, the, in osteoplastic surgery, 5; action of on micro-organisms, 139; action of on pulmonary tuberculosis, 370; and foreign bodies in the eye, 382; in the obstetric diagnosis, 468; action of on tubercle bacilli, 479; and osteomalacia, 491; treatment of articular rheumatism in children by, 514; use of in the determination of the direction and form of fistulous tracts, 526  
 Rohrer, operative treatment of detached retina, 27  
 Romberg, treatment of chlorosis, 73  
 Rosenbach, emotional dyspepsia, 62  
 Rosenberg, diabetes mellitus in a young child, 22  
 Rosenthal, tubo-uterine gestation, successful operation, 133  
 Rosner, deformed uterus requiring operation, 30  
 Rossa, accessory suprarenal capsules in pelvis, 174  
 Rouher, herpes and tuberculosis, 21  
 R. tuberculin. *See Tuberculin, Koch's new*  
 Rubeska, puerperal tetanus, 507  
 Ruge, tabes and aortic disease, 501  
 Rumpel, spindle-shaped dilatation of the cœphagus, 80  
 Rumpf, treatment of cardio-vascular disease, 499  
 Ruotte, recovery without operation from penetrating gunshot wound of the abdomen, 418  
 "Russell's" corpuscles in the central nervous system, 373  
 S.  
 Saalfeld, painless catheterisation by nitrate of silver, 332  
 Sabraze, congenital hypertrophy of the sub-lingual glands, 318  
 St. Arnold, suppurating chondro-osteosarcoma of breast, 165  
 Saenger, nerve suture, 291; hydrastis canadensis, 305; Graves's disease, 336  
 Sainton, the risk attending forcible correction of distortion due to hip-joint disease, 64  
 Salaghi, the mechanical treatment of haemarthrosis of the knee, 162  
 Salicylate of methyl, local application of in rheumatism, 35; in articular rheumatism, 410  
 Saline injections in infantile cholera, 433  
 Salophen, the use of, 472  
 Salva, the visual field in toxic amblyopia, 288  
 Sanose, 476  
 Santesson, the influence of antipyrin on the hydrochlorate of quinine, 281  
 Santon, cattle malaria, 539  
 Sarbo, pruritus as a symptom of general paralysis, 338  
 Sarcoma, pelvic in an infant, 100; primary, of Fallopian tube, 190; primary of the pleura, 359; in a child, ovariotomy for, 509  
 Scanzoni, v., lithopædion, 443  
 Scarezio, injections of calomel in lupus, 76  
 Schiska, treatment of bubos with benzoate of mercury, 278  
 Schmid, the behaviour of human milk to diphtheria toxin, 307  
 Schmitt, chelidonium majus in cancer of the uterus 74

Schmorl, decidual tissue in peritoneum in normal pregnancy, 173  
 Schreiber, sanose, 476  
 Schüller, operative treatment of chronic rheumatism, 380  
 Schultze, the tongue in facial paralysis, 82; the new tuberculin, 93  
 Schulz, operative treatment of exophthalmic goitre, 65  
 Schwab, abortion and quinine, 9; sulphate of quinine in abortion, 129  
 Sclerosis, arterial, limited to female organs, 132  
 Scopolamine in mental diseases, 475  
 Segeiken, multiple myeloma, 264  
 Septum, recto-vaginal, rupture of in labour, 90  
 Serum, treatment of diphtheria by, 137, 257, 495; artificial, injection of as a means for preventing death in burns, 154; reaction from in colobacillary infection, 199; milky blood, 240; treatment of tetanus by, 330; diagnosis of scarlet fever by, 355; diagnosis of typhoid fever by, 396, 483; treatment of leprosy by, 428; treatment of relapsing fever by, 521; antistreptococcus in puerperal fever, 176; in new growths, 271; antitoxic, after-effects of, 239  
 — Maragliano's in cervical adenitis associated with phlyctenular ophthalmia, 136; clinical experience of, 195  
 Serumtherapy in surgical tuberculosis, 417; in erysipelas and pyæmia, 515  
 Shepherd, the surgery of bronchocele, 342  
 Shoulder, tuberculous osteo-arthritides of the, 83; recurrent dislocation of the, 504  
 Shulgin, chelidonium in cancer, 237  
 Sialorrhœa cured by reduction of a retroflexed gravid uterus, 511  
 Sicard, serum diagnosis of typhoid, 396  
 Sick, nerve suture, 291  
 Siegfried, the tricycle for graduated exercise, 452  
 Silk or catgut in abdominal section, 104  
 Silver irrigation, treatment of gonorrhœa with, 454  
 Singer, auto-intoxication, 1; microbes in acute rheumatism, 333; rheumatic endocarditis, 485  
 Siredry, salicylate of methyl in articular rheumatism, 410  
 Skeen, sulphate of duboisin, 193  
 Skeretecki, serumtherapy in surgical tuberculosis, 417  
 Skutsch, common abortion and tubal pregnancy, 89  
 Slawyk, the R. tuberculin, 175  
 Snow, acetanilide poisoning in a newly-born infant, 55  
 Sobernheim, anthrax serum, 496  
 Sokoloff, treatment of articular rheumatism in children by Roentgen rays, 514  
 Sommerfeld, eucasin as a children's food, 473  
 Sores, hard and soft perforating, 314  
 Sound, uterine, limitation of the use of, 11  
 Sounds, fetal (not cardiac) audible before birth, 344  
 Spasm, congenital gastric, 41  
 Spengler, R. tuberculin in phthisis, 300  
 Spina bifida and congenital prolapsus uteri, 236  
 Spine, treatment of Pott's disease of, 43; surgery of the, 208  
 Spitzer, tumour caused by caterpillar hairs, 117  
 Spleen, cavernous angioma of the, 85; extirpation of and infective disease, 200  
 Splenectomy for injury, 523  
 Staining sections of brain and spinal cord, a new method of, 372  
 Staley, dystocia from monstrosity, 446  
 Stankiewicz, hairpin swallowed and detected per vaginam, 531  
 Stassano, pathology of syphilis, 537  
 Stawell, after-effects of antitoxic serum, 239  
 Stays, deformity from, 255  
 Steiner, "rheumatic" tetanus and the antitoxic treatment, 367  
 Steinschneider, the differentiation of gonococci, 426  
 Stempel, the new tuberculin, 535  
 Stenosis, tracheal, 3  
 Sterility, primary, and gonorrhœa, 70  
 Sternum, resection of for tumours, 66  
 Sticker, leprosy, 520  
 Stoeltzner, cerebro-spinal meningitis, 378  
 Stomach, foreign bodies in the, 80; haemorrhagic erosions of the, 97; pains in the from the presence of a vaginal pessary, 110; free hydrochloric acid in the contents of, 413; polyadenoma of the, 516  
 Stomatitis, ulcero-membranous, treatment of, 369  
 "Stomoosins," 534  
 Stoufs, hernia of suppurating ovary in an aged woman, 211  
 Strontium lactate, 197

Strophanthus, clinical observations on, 14  
 Sublimate. *See Corrosive*  
 Sulphate of duboisin, 193  
 — potash and hepatic cirrhosis, 334  
 of quinine in abortion, 129  
 Sulphonal, acute poisoning by, 94  
 Surgery, osteoplastic, the Roentgen rays in, 5; abdominal preventive plugging in, 24; renal, 290  
 Sutherland, scrotal anus, 186  
 Suture of nerves, 291; marginal, cure of vesical extrophy by, 525  
 Svitalsky, ovariotomy, three other independent lesions, 276; rupture of abdominal wound from coughing, 322  
 Swoboda, teratoma of the neck simulating cystic bronchocele, 146  
 Sympathotomy, the operation of, 466  
 Syphilis, inherited, feeding in, 77; insontium, 145; and pregnancy, 169; hereditary, 185; cerebral, treatment of, 194; in pregnancy, 234; laryngeal, intramuscular, injections in, 259; cutaneous, local treatment of, 304; duration of the period of contagion in, 379; injection of calomel in, 513; pathology of, 537  
 T.  
 Tabes and aortic disease, 501  
 Taillefer, a vaginal cyst, 492  
 Taillefer, the after-history of radical cases of hysteria, 341  
 Tannin and its derivatives in infantile diarrhoea, 258  
 Tattooing, corneal, 383  
 Tece, musical murmurs in heart disease and angina pectoris, 158  
 Temperature, effect of change of on the blood, 374; influence of on infective inflammation, 480  
 Teratoma of the neck simulating cystic bronchocele, 146; of the hard palate, 268  
 Testes, tuberculous, operative treatment of, 294  
 Tetanus, the serum treatment of, 330; "rheumatic" and the antitoxic treatment, 367; puerperal, 507; antitoxin. *See Antitoxin*  
 Tetany of gastric origin, 397  
 Thayer, veratrum viride in puerperal convulsions, 150  
 Thiele, lumbar puncture, 285  
 Thilges, a bean in the left bronchus of a child, 480  
 Thomson, congenital gastric spasm, 41  
 Thoracic organs, radioscopy of the, 459  
 Thrombosis, coronary, 118  
 Thurnim, the x rays in obstetrical diagnosis, 468  
 Thyroid gland, lesions produced by extract of, 153; treatment by as a means of consolidation in fracture, 229  
 Tison, traumatal, 303  
 Tissue, decidual, in peritoneum in normal pregnancy, 173  
 Tomasini, scopolamine in mental diseases, 475  
 Tommasoli, injections of artificial serum as a means of preventing death in burns, 154  
 Tongue, the, in facial paralysis, 82  
 Tonsils, hypertrophied, blastomycetes in, 478  
 Townsend, precocious maturity, 215  
 Toxins and antitoxins, a new theory of, 78  
 Trachoma, solutions of iodine in, 16  
 Trapp, spinal surgery, 208  
 Traumatal, 303  
 Tremors, pseudospastic paresis with, 124  
 Tricycle, the, for graduated exercise, 452  
 Triples and fibroids of the uterus, 366  
 Troisfontaines, feeding in inherited syphilis, 77  
 Trojanoff, chelidonium in cancer, 237  
 Trunzbeck, paroxysmal haemoglobinuria, 20  
 Trunzbeck, arsenous acid in epithelioma, 15  
 Tube, Fallopian, primary sarcoma of the, 190  
 Tubercle, surgical, guaiacol injections in, 196  
 Tuberculin, the action of, 134; the diagnosis of tuberculosis by, 182; as a diagnostic agent, 262  
 — Koch's, new, 54, 93, 152, 175, 277, 300, 535  
 Tuberculosis, and herpes, 21; primary of the female external genitalia in the adult, 107, 168; of the ovary, 149; the diagnosis of by tuberculin, 182; pulmonary, action of x rays on, 370; surgical, serumtherapy in, 417  
 Tubes, Fallopian, primary cancer of the, 449  
 Tuffier, foreign bodies in the peritoneum, 260  
 Tumour, caused by caterpillar hairs, 117; cystic of the clitoris, 329  
 Tumours, resection of the sternum for, 66; mixed of the soft palate, 127; of the kidney, the etiology of, 138; cerebral, the surgery of, 462  
 Turner, chelidonium in cancer, 237

Turrazza, the treatment of varicose ulcers, 506  
 Twin, fleshy-mole, 364  
 Twins, one-yolk, and hydramnion, 352  
 Twombly, myomectomy vaginal, 88  
 Typhilitis, actinomycotic, 184  
 Tyrosin in the urine, 538

## U.

Ulcer, perforating gastric, closure of by omentum, 102; gastric, the surgical treatment of, 126; gastric in a child 4 months old, 455  
 Ulcers, varicose, treatment of, 506  
 Uræmia in retroversion of gravid uterus, 52  
 Ureter, the surgery of the, 103  
 Urine, treatment of prosthetic retention of, 4; in the osteomalacia, 66; retention of and pregnancy at the fifth month, 151  
 Uterus, diagnosis and treatment of rupture of, 8; deformed, requiring operation, 30; effect of caustics on the, 48; latent rupture of in labour, 49; gravid, retroversion of, uræmia, recovery, 52; pregnancy and labour after ventrification of the, 69; chelidonium majus in cancer of the, 74; origin of adenomyoma and cystadenoma of, 130; submucous fibroid of, operation under grave conditions, ultimate recovery, 170; congenital absence of, 213; darning needle in, 232; congenital prolapse of and spine bifida, 236; labour in a case of fixed latero-flexion of cervix of, 254; artificially inverted, vaginal amputation of after Cæsarean section, 298; reel in, the vesico vaginal fistula, 325; labour in a case of elongation of the vaginal portion of the cervix of, 326; triplets and fibroids of the, 366; pregnant fibroid extirpation of, 386; senile involution of and the menopause, 405; treatment of hemorrhage from lacerations of cervix of, 406; fatal inversion of in labour, 460; foreign bodies in, 510; gravid, retroflexed, sialorrhœa cured by reduction of, 511; acquired atresia of cervix of in labour, 528; fatal inversion of from traction on cord, 532

## V.

Vaccari, large osteoma of the rectus femoris, 464  
 Vacher, oxygenated water in eye affections, 219  
 Vagina, the, is it aseptic in normal pregnancy? 171; congenital absence of, 213; treatment of congenital absence of, 233; excision of the rectum through the, 463; hairpin swallowed and detected through the, 531

Valentine, irrigation in gonorrhœa, 36

Valude, hard chancre of the ocular conjunctiva, 209

Vamossy, iodothyroin, 37; opium alkaloids, 114; anesies, 302

Varices, the internal saphena vein, 486

Variot, Addison's disease in childhood, 376

Varnier, symphysiotomy, 466

Vas, iodothyroin, 37

Vedeler, primary sterility and gonorrhœa, 70

Vein, the internal saphena and varices, 486

Venute, airo in diarrhoea, 75

Veratrumin viride in puerperal convulsions, 150

Vertugradof, chelidonium in cancer, 237

Vetlesen, iodide of potassium in phthisis, 411

Vignat, vaccinia psoriasis, 228

Vinay, the pneumococcus in pregnancy, 35; swollen leg after labour, 404

Viscera, complete transposition of, 119; labour in a case of complete transposition of, 167

Voigt, fleshy-mole twin, nervous cough in pregnancy, 364

Vogt, hysteria in the male, 122

Vomiting, uncontrollable, of pregnancy, treatment of, 68

Voss, v. spinal cord disease in pernicious anaemia, 284

Vreden, chelidonium in cancer, 237

Vubbotin, chelidonium in cancer, 237

Vulliet, treatment of penetrating wounds of the abdomen, 247

## W.

Waldvogel, sanose, 476

Walk, reel in the uterus, vesico-vaginal fistula, 325

Walsh, antistreptococcus serum puerperal fever, 176

Wanoff, phagocytosis in re-apsing fever, 394

Water, oxygenated, in eye affections, 219

Watkins, primary cancer of the Fallopian tubes, 449

Weil, elephantiasis oedema of lower limbs, 320

Whitman, fracture of the neck of the femur in childhood, 45

Whooping-cough, bacteriology of, 498

Widal, the serum reaction in colobacillary infection, 199; serum diagnosis of typhoid, 396

Wiktor, stomach pains from the presence of a vaginal pessary, 110  
Wilcox, strophanthus, 14  
Willems, Calot's operation without anaesthesia, 340  
Wilms, spinal puncture, 357  
Winkler, free HCl in the stomach contents, 413  
Winter, chelidonium majus in cancer of the uterus, 74  
Wölffer, the use of gloves in practical surgery, 505

Wörner, the R. tuberculin, 175  
Woman, aged, hernia of, suppurating ovary in an, 211; healthy, morbid milk in a, 471  
Women, gonorrhœal cystitis in, 13; young, the ascites of, 51  
Wound, penetrating, of the heart, 399  
Wounds, penetrating, of abdomen, treatment of, 247  
X.

Y.  
Young, general paralysis of the, 99  
Z.  
Zelenski, airol and its disadvantages, 216  
Zenenko, chelidonium in cancer, 237  
Ziemacki, antistreptococcus serum in new growths, 371  
Zinc chloride. *See* Chloride.

## WORKERS OF THE THIRD STAGE OF PUTREFACTION.

Ammoniacal Fermentation.

## AMERICA.

## Coleoptera.

## EUROPE.

Silphidae.

Silpha sp.  
Histeridae sp.  
Hister sp.Anthomyidae.  
Ophyra leucostoma Wied.  
Thyreophoridae.

Lonchaeidae.

Phoridae.  
Phora sp.

## Diptera.

Necrophorus humator.  
Silpha littoralis.  
", obscura.  
Hister cadaverinus.  
Saprinus rotundatus Kug.Ophyra cadaverina Megnin.  
Thyreophora cynophila Panz.  
", furcata Fabr.  
", anthropophaga Desv.

## Lepidoptera.

Lonchaea nigrimana Meig.

## Trineura aterrima Fabr.

## Acarina.

Tyroglyphus longior.  
", siro.  
Trachynotus cadaverinus Megnin.  
Glyciphagus cursor.  
", spinipes Ch. Rob.  
Coepophagus echinopus Ch. Rob.

## CONSUMERS OF THE DRIED TISSUES.

## AMERICA.

## EUROPE.

Pyralidae.

Tineidae.  
Tinea sp. (?)Dermostidae.  
Anthrenus sp.

## Coleoptera.

Aglossa cuprealis Hubn.

Tinea pellionella.  
Tincola biselliella.

## Coleoptera.

Anthrenus museorum Linn.  
", dubius.  
Attagenus pellio Linn.

## CONSUMERS OF THE REMAINS OF THE OTHER WORKERS.

## AMERICA.

## EUROPE.

## Coleoptera.

Tenebrio obscurus Fabr.  
Ptinus brunneus Duft.

It is true of all the cadaver diptera that from the time of depositing the egg through the larval and pupal stages to the appearance of the perfect insect, about four weeks are necessary. Empty pupa-cases of diptera, therefore, if found on a cadaver, show that life has been absent about four weeks at least. Since insect life ceases when the air temperature falls below 43° F., it follows that in our climate no insect destruction of dead bodies takes place during winter; but since bacterial action and desiccation do go on during winter, it also follows that certain groups of the cadaveric fauna may be absent, or very sparsely represented. If the latter condition exists, either their work was interrupted by the advent of winter, or that stage of putrefaction was nearly ended when spring came. In the one case the pupae found would be mostly dead, in the other they would be mostly empty.

The author then proceeded to discuss points strictly entomological, and attempted such a characterisation of the diptera of the cadaver, that anyone with a little knowledge of entomology might be able to determine them.

## MEMORANDA:

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

## ALCOHOL INJECTIONS IN CANCER.

In the BRITISH MEDICAL JOURNAL of September 25th there is an extremely interesting report of the progress and results of a case of scirrhus of breast treated for ten weeks with repeated multiple injections of a 40 per cent. solution of pure alcohol in water. Then, unfortunately, before the sequel could be observed rapidly fatal secondary hepatic infiltration cut short the case, not, however, before the enlarged and infiltrated breast and axillary glands had dwindled away so as to be barely perceptible.

Whether *post mortem* as regards the treatment is hardly decided by the *post mortem* examination, since the presence (on microscopic examination of the breast and hepatic tissues) of similar collections of interstitial tissue and epi-

thelial cells in both raises a doubt in Professor Delépine's mind. It does, however, seem probable that the atrophic process—normal in some forms of scirrhus, though not initiated, was greatly accelerated by the alcohol injected *in situ*.

Whether the effects, beneficial or otherwise, are limited to the area of injection, or are general and widespread also, need not now be discussed. Dr. Yeates remarks that, after the immediate pain of injection had subsided, the patient felt more comfortable generally. This is a sensation often experienced by those who imbibe alcohol.

In support of the thesis that the injections around the tumours accelerated the atrophic process, I may mention a case of genuinely "atrophic" scirrhus in my own practice. The patient, a lady aged 69, when first seen, now eight years ago, presented the appearance of 60, with all her teeth, and feeling—as she had always done—remarkably well. The breasts were still large and fleshy, the right normal, the left containing a lump as big as a walnut, not painful, or but slightly, except on pressure, with nipple normal and no large glands to be felt in axilla. There was a vague recollection of a slight injury, but no other suspicious circumstance, except that shortly before the son had died of cancer of tongue, two years and three-quarters after supposed complete removal thereof, recurrent or revivit in the glands and jaw. Moreover, both mother and son were of the type that is shown by Mr. Roger Williams to be prone to malignant neoplasms; and in this case the diagnosis of scirrhus was confirmed by Mr. G. A. Wright, who advised removal without delay. Operation was declined, and a speedy spread of the mischief anticipated. Whether, however, in spite of or on account of non-interference, no further change occurred, except gradual dwindling of the breast and tumour, finally to the state that Dr. Yeates speaks of in his case, with retracted nipple, for six years, locally or generally. Only after this, during the last year of her life, when now 76, did cachexia supervene, a marked emaciation with muscular weakness, anorexia, extreme sensitiveness to cold, and dryness of skin (suggestive of diabetes; a suspicion not confirmed), but without enlargement of glands, or evidence of deposit in internal organs, till two months before death, when she took to bed, and there appeared in the right loin, higher than the usual site of "decubitus," a hard mass (size of palm) involving skin, and gradually causing it to ulcerate into a foul, discharging sore. This one thought (the breast being now dry and dwindled, and the glands free) might be regarded, situated as it was on the right side, as away and apart from the original deposit, as a terminal but not secondary manifestation (? sarcoma) of the malignant habit of the patient. However that may be (and the objection after as before death to all "cutting" renders this account necessarily incomplete), here was a case of, I think, undoubtedly atrophic scirrhus that underwent changes similar to those described by Dr. Yeates, and Mr. Windsor, and Professor Delépine, but with this difference, that six years was occupied in the process, whereas the injection of alcohol reduced the process to about ten weeks. Whether the natural process (of shrinkage) when it occurs is the safer one as regards secondary deposits or other remote effects, is perhaps worth considering. One has to reckon with the age and habits of the patient, and if there is aught in recent researches, with the possible presence of an excess of glycogen in the tissues in cancer. I may add that on and off for about one of the six years of "shrinkage," there was slight oozing of serum from a sinus which had formed, but this sinus had closed of itself some time before cachexia, etc., set in.

It seems to be allowed that "atrophic" scirrhus of the breast is both less painful and less often disseminated, and hence, one would presume, more radically removable by the knife, but in cases where operation is declined, it becomes a nice point whether to trust to Nature—slow, and not quite certain to cure—or to resort to some such expeditious (if risky) method as this employed by Dr. Yeates.

T. CARTER BOOTH, M.D.Durh., M.R.C.S.  
Manchester.

PRESENTATION.—At a large and representative meeting of the Parsee community in Bombay a presentation of silver vases was made to Dr. K. N. Bahadurji for services rendered to the community during the time the plague was raging.

loopholes of escape. A coroner should certainly be vigilant in his calling, but at the same time, as "Jervis on Coroners" says: "he should exercise his duties within the limits of a sound and reasonable discretion." In the present case it may be questioned whether the coroner did exercise a sound discretion in refusing to hold an inquest. If a coroner systematically neglects his duties anyone can call the attention of the Lord Chancellor to the fact, but before doing so the complainant should well satisfy himself that any alleged neglect in holding inquests is prejudicial to the security of life, or contrary to the duties of the office as defined by statute law or established custom.

## UNIVERSITIES AND COLLEGES.

### UNIVERSITY OF CAMBRIDGE.

THIRD EXAMINATION FOR MEDICAL AND SURGICAL DEGREES.—Part I: The following candidates have satisfied the Examiners:—

W. C. Ambrose, M.A., Clas.; Brincker, B.A., Joh.; Carsberg, B.A., Gonv. and Cai.; F. P. Cayley, B.A., Trin.; Collingwood, B.A., Gonv. and Cai.; Corner, B.A., Sid. Suss.; Delbrück, B.A., King's; E. R. Hunt, B.A., Trin.; M. B. Johnson, B.A., Trin. H.; E. K. Le Fleming, B.A., Gonv. and Cai.; Levick, B.A., Jes.; Lidderdale, Trin.; C. S. Myers, B.A., Gonv. and Cai.; Peatling, B.A., Magd.; Percival, B.A., Joh.; Reissmann, B.A., Joh.; Sandilands, B.A., Trin.; Sargent, B.A., Joh.; Tucker, B.A., Gonv. and Cai.

SECOND EXAMINATION FOR MEDICAL AND SURGICAL DEGREES.—The following candidates have satisfied the examiners:—

Part I. *Pharmaceutical Chemistry*.—H. Ackroyd, Gonv. and Cai.; Barton, B.A., Pemb.; Beckett, B.A., H. Selw.; Burroughes, Trin.; Butler, B.A., Emm.; H. J. Cardew, Clas.; Carey, B.A., Emm.; F. J. Child, B.A., Christ's; Cooper, Jes.; Crowther, Joh.; Dally, Joh.; Davies-Colley, B.A., Trin.; Dodd, Gonv. and Cai.; Dudley, H. Selw.; Elliott, Emm.; W. I. Evans, Joh.; Freshwater, Trin.; Geoghegan, B.A., Gonv. and Cai.; Goss, Jes.; Goyder, Joh.; Greene, Down.; C. H. Gregory, Emm.; Guthrie, King's; Harnett, Joh.; A. W. Harvey, Joh.; H. G. L. Haynes, Down.; Henderson, B.A., Gonv. and Cai.; Hocken, Clas.; Holtzman, Christ's; A. C. Ingram, Joh.; E. G. Kellgren, Trin.; Kidd, Trin.; Ledward, Trin.; Leighton, Joh.; Leveaux, Joh.; Lloyd-Jones, Joh.; Loveday, Gonv. and Cai.; Lucas, Gonv. and Cai.; Matthews, Down.; Murray, B.B., Joh.; Muspratt, Christ's; Nicholson, King's; Norman, B.A., Joh.; Paton, B.A., Gonv. and Cai.; Pellier, B.A., Clas.; Rickett, King's; Riddle, Pet.; H. J. Robinson, Joh.; Rolfe, Clas.; R. N. Salaman, B.A., Trin. H.; Scarborough, Joh.; C. A. St. J. Scott, B.A., Trin.; Sephton, B.A., Gonv. and Cai.; Simpson, King's; Snell, Gonv. and Cai.; B. Spearman, Gonv. and Cai.; Spurrier, Gonv. and Cai.; W. M. Strong, B.A., Trin.; Tuck, Emm.; Ward, Clas.; L. Wigram, Trin.; A. G. E. Wilcock, Gonv. and Cai.; H. C. Williams, B.A., Pemb.; H. M. Wilson, Trin. H.; Woolley, King's; Wylie, Pemb.

FIRST EXAMINATION FOR MEDICAL AND SURGICAL DEGREES.—The following candidates have satisfied the Examiners:—

Part I. *Chemistry and Physics*.—Aldridge, Christ's; Armitage, Emm.; Beddoe, Christ's; Bulley, Emm.; Butterworth, B.A., Christ's; Causton, B.A., Emm.; Cleminson, Gonv. and Cai.; Collingham, King's; Coit, Sid. Suss.; Cooper, Emm.; Cotes-Preedy, Emm.; Cutler, B.A., Clas.; S. Dixon, Trin.; Drapes, Sid. Suss.; R. S. Drew, Pemb.; Droop, Trin.; Ellett, Cath.; Ellis, Down.; H. Falk, King's; Franklyn, Emm.; D. H. Fraser, Gonv. and Cai.; Gardner-Medwin, Trin.; Ghosh, Joh.; Gibbs, Sid. Suss.; M. F. Grant, Trin.; E. Harrison, Trin.; P. Harrison, B.A., Christ's; Harry, Jes.; A. G. Harvey, B.A., Joh.; Heath, Trin.; W. R. Higgins, Gonv. and Cai.; Horsley, Gonv. and Cai.; Kerr, Christ's; Luker, Pemb.; O. May, Joh.; Mollison, King's; Muil, B.A., Gonv. and Cai.; Murphy, Joh.; Neatby, M.A., Joh.; Owen, Gonv. and Cai.; Page, Corp. Chr.; Plowright, Joh.; R. M. Ranking, Pemb.; G. L. Ranking, Pemb.; Rees, Down.; Slade, Clas.; Thresher, Gonv. and Cai.; Ticehurst, Joh.; Toppin, Gonv. and Cai.; A. C. Warren, Emm.; West, Joh.; Western, Pemb.; Wiltshire, Clas.

Part II. *Elementary Biology*.—Akerman, Gonv. and Cai.; Bacon, Christ's; Bulley, Emm.; Butterworth, B.A., Christ's; J. G. Castellain, Trin.; Cleminson, Gonv. and Cai.; Coit, Sid. Suss.; Crowthorne, Emm.; Curl, Christ's; Day, Gonv. and Cai.; Donnell, Gonv. and Cai.; Drapes, Sid. Suss.; Ellett, Cath.; Fox, B.A., Emm.; D. H. Fraser, Gonv. and Cai.; Ghosh, Joh.; Gibbs, Sid. Suss.; Graham, Jes.; M. F. Grant, Trin.; Griffin, Pet.; Hall, Pemb.; P. Hardy, Trin. H.; Harris, Christ's; P. Harrison, B.A., Christ's; Hepburn, Pemb.; W. H. Hills, Pemb.; Hirst, Gonv. and Cai.; Hudson, Clas.; Irving, Joh.; Leech, Clas.; Leslie, Pemb.; Littlejohns, Gonv. and Cai.; C. G. Martin, Down.; O. May, Joh.; Molteno, Pemb.; Newton, Gonv. and Cai.; Page, Corp. Chr.; Panton, Trin.; Patrick, Christ's; Pellow, Joh.; Pope, Trin.; Prince, Emm.; Skene, Joh.; Toppin, Gonv. and Cai.; Western, Pemb.; C. F. O. White, Trin. H.; E. K. Williams, Gonv. and Cai.; W. V. Wood, B.A., Clas.; Worthington, Clas.; S. L. O. Young, Christ's; Young, B.A., Emm.

### UNIVERSITY OF DUBLIN.

At the Winter Commencements in Michaelmas Term, held on Friday, December 17th, 1897, in the Theatre of Trinity College, the following degrees in Medicine, Surgery, and Midwifery were conferred:

*Bacalaurei in Medicina, in Chirurgia, et in Arte Obstetricida*.—G. J. S. Archer, F. B. Counihan, E. M. Fannin, T. E. Fielding, G. Glynn, A. M. MacLaughlin (B.Ch., *stip. cond.*), G. E. P. Meldon, W. F. Moore, T. Neill, J. W. J. Scott, W. B. A. Smith.

*Bacalaurei in Medicina*.—W. A. Higgins.

*Doctores in Medicina*.—C. Brew, F. H. M'C. Chetwode-Crawley, R. L. S. Donaldson, W. I. Donaldson, R. A. G. F. Dowdall, A. C. Duffey, R. Friel, J. Henderson, R. P. Hetherington, R. H. Kennan, H. E. Rutherford, W. Shackleton, S. H. Sharpe, J. Winder.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.  
THE following gentlemen having passed the necessary examinations, and conformed to the by-laws and regulations, have been admitted Fellows of the College:

E. H. Freeland, L.R.C.P.Lond., L.S.A.Lond., Middlesex Hospital; C. S. Blair, M.D.Durh., Durham University and St. Bartholomew's Hospital; J. E. S. Barnett, L.R.C.P.Lond., Charing Cross Hospital; W. F. Cholmley, L.R.C.P.Lond., St. Bartholomew's Hospital; C. H. D. Morland, M.B., B.S.Durh., L.R.C.P.Lond., Durham University and St. George's Hospital; G. E. Manning, M.D.Lond., Guy's Hospital; A. E. Martin, M.D.Durh., L.R.C.P.Lond., Durham University and London Hospital; W. A. Bowring, L.R.C.P.Lond., St. Thomas's Hospital; A. Strange, L.R.C.P.Lond., London Hospital; G. C. Hayes, L.R.C.P.Lond., Melbourne University and King's College Hospital; L. C. P. Phillips, M.B., B.C., M.A. Cantab., L.R.C.P.Lond., St. Bartholomew's Hospital; H. B. Dickinson, M.B.Lond., M.B., Ch.B.Vict., L.R.C.P.Lond., University College and Royal Infirmary, Liverpool, and St. Bartholomew's Hospital; L. J. Miskin, M.B., B.S.Lond., L.R.C.P.Lond., St. Thomas's Hospital; M. G. Pearson, M.B., B.Sc.Lond., L.R.C.P.Lond., St. Bartholomew's Hospital; W. C. G. Ashdowne, L.R.C.P.Lond., St. Mary's Hospital; A. H. Evans, M.B.Lond., L.R.C.P.Lond., Westminster Hospital; B. Dyball, M.B.Lond., L.R.C.P.Lond., St. Thomas's Hospital; J. P. Maxwell, L.R.C.P.Lond., St. Bartholomew's Hospital; J. Smith, M.B., B.C., M.A.Cantab., L.R.C.P.Lond., Cambridge University and St. Thomas's Hospital; J. B. Christopherson, M.B., B.C.Cantab., L.R.C.P.Lond., Cambridge University and St. Bartholomew's Hospital; H. S. Pendlebury, M.A.Cantab., L.R.C.P.Lond., Cambridge University and St. Bartholomew's Hospital.

Three other gentlemen passed the examinations, but not having yet attained the legal age of 25 years will receive their diplomas as Fellows at future meetings of the Council.

Thirteen gentlemen were referred for six months and 6 for one year. The following gentlemen having passed the necessary examinations have been admitted Licentiates in Dental Surgery:

J. U. Alder, University College, Royal Infirmary and Dental Hospital, Liverpool; C. Ashby, Charing Cross and the Dental Hospital of London; G. O. Betts, Guy's Hospital, Dental Department and School; E. Bevington, University College, Royal Infirmary and Dental Hospital, Liverpool; F. Billing, Charing Cross and Dental Hospital of London; S. Bonnallie, Charing Cross and Dental Hospital of London; S. Bradford, Charing Cross and Dental Hospital of London; T. W. Bromley, Guy's Hospital, Dental Department and School; H. A. G. Butler, Guy's Hospital, Dental Department and School; H. A. E. Canning, Guy's Hospital, Dental Department and School; J. K. Clark, Guy's Hospital, Dental Department and School; J. M. P. Crombie, M.B. and B.S.Aberd., Guy's Hospital, Dental Department and School; H. L. Dorrell, Guy's Hospital, Dental Department and School; E. B. Dowsett, Guy's Hospital, Dental Department and School; A. Drake, University College, Royal Infirmary, and Dental Hospital, Liverpool; H. H. Gudgeon, Middlesex Hospital and National Dental Hospital; A. H. Harris, Middlesex Hospital and National Dental Hospital; J. W. Hislop, Charing Cross and Dental Hospital of London; S. J. Holford, Charing Cross and Dental Hospital of London; T. H. Hulme, London Hospital and the National Dental Hospital; E. Joseph, Charing Cross and Dental Hospital of London; A. M. Kempe, Guy's Hospital, Dental Department and School; A. Ken-drew, Guy's Hospital, Dental Department and School; H. Kenyon-Jeffs, Charing Cross and Dental Hospital of London; R. H. Manning, St. George's and Dental Hospital of London; G. Marshall, Guy's Hospital, Dental Department and School; T. H. Miller, M.B., Ch.B.Vict., Owens College, Royal Infirmary, and Victoria Dental Hospital, Manchester; N. Miller, Charing Cross and Dental Hospital of London; R. H. Moore, Charing Cross and Dental Hospital of London, and Meath Hospital, Dublin; H. J. Morris, Charing Cross and Dental Hospital of London; J. M. Murphy, Charing Cross and Dental Hospital of London; E. H. Musgrave, Guy's Hospital, Dental Department and School; A. H. Parnott, Mason College, Queen's and General, and the Dental Hospital, Birmingham; A. G. Peck, Charing Cross and Dental Hospital of London; G. A. Pedley, M.R.C.S.Eng., St. Mary's, National Dental, and Guy's Hospital, Medical Department and School; J. B. Petley, Charing Cross and the Dental Hospital of London; C. H. Preston, F.R.C.S.Eng., Owens College, Royal Infirmary, and Victoria Dental Hospital, Manchester; S. J. Redpath, Guy's Hospital, Dental Department and School; J. C. Round, M.R.C.S.Eng., St. Thomas and National Dental Hospital; W. A. Schlesinger, Charing Cross and the Dental Hospital of London; E. T. Shields, University College, Royal Infirmary, and the Dental Hospital, Liverpool; V. G. Smith, Guy's Hospital, Dental Department and School; C. B. Stainer, Guy's Hospital, Dental Department, and School; G. W. Storey, Middlesex and the National Dental Hospital; B. J. Sumerling, Guy's Hospital, Dental Department, and School; C. B. Thomas, Middlesex and the National Dental Hospital; E. Tilley, Middlesex and the National Dental Hospital; W. J. Trem-bath, Dental Hospital and School of Ireland, and Royal College of Surgeons, Dublin; E. E. Turner, Mason College, Queen's and General and the Dental Hospital, Birmingham; A. William Walker, Guy's Hospital, Dental Department, and School; A. West Walker, Mason College, Queen's and General and the Dental Hospital, Birmingham; F. Ward, Guy's Hospital, Dental Department, and School; M. White, Charing Cross and the Dental Hospital of London; W. Wilmore, Guy's Hospital, Dental Department, and School; J. C. Wing, Middlesex and the National Dental Hospital; C. C. Wood, Mason College, Queen's and General and the Dental Hospital, Birmingham.

Twenty gentlemen were referred back to their professional studies for six months, and 1 for one year.

ROYAL COLLEGE OF SURGEONS OF EDINBURGH.  
THE following gentlemen, having passed the requisite examination, were yesterday duly elected Fellows of the College:  
B. H. Navavatty, L.R.C.S.E.; J. Gray, M.B., C.M.Edin.; H. Bramwell, M.D.Edin.; W. D. Barrow, M.B., C.M.Edin.; R. S. Story, L.R.C.S.E.; P. E. Giles, M.R.C.S.Eng.; H. G. Thomasz, L.R.C.S.E.; and H. G. Parker, L.R.C.S.E.

## SOCIETY OF APOTHECARIES OF LONDON.

PASS LIST: December, 1897. The following candidates passed in:

*Surgery*.—M. E. Bennett (Section 1), Royal Free Hospital; J. C. R. Curtis, University College Hospital; R. H. Hill, New York and Middlesex Hospital; E. J. Jennings, Edinburgh; P. D. Pywell, St Thomas's Hospital.

*Medicine*.—F. M. Aldred, Liverpool; C. J. Barnes, King's College Hospital; A. L. Bartram, Cambridge; M. E. Bennett (Section 1), Royal Free Hospital; A. D. Evans, Edinburgh; J. H. C. Fegan, Charing Cross Hospital; B. Lewitt, St. Mary's Hospital; P. C. Maitland, Middlesex Hospital; G. L. Meredith, London Hospital; H. Munro, Guy's Hospital; G. C. Walker, Liverpool.

*Forensic Medicine*.—C. J. Barnes, King's College Hospital; A. L. Bartram, Cambridge; M. E. Bennett, Royal Free Hospital; A. D. Evans, Edinburgh; J. H. C. Fegan, Charing Cross Hospital; B. Lewitt, St. Mary's Hospital; P. C. Maitland, Middlesex Hospital; G. L. Meredith, London Hospital; H. Munro, Guy's Hospital; B. J. Nolan, Dublin; A. H. Turner, London Hospital; G. C. Walker, Liverpool.

*Midwifery*.—A. D. Evans, Edinburgh; J. H. C. Fegan, Charing Cross Hospital; E. J. Jennings, Edinburgh; G. L. Meredith, London Hospital; B. J. Nolan, Dublin; C. C. Pratt, St. George's Hospital and Bristol; G. C. Walker, Liverpool.

The diploma of the Society was granted to Messrs. R. H. Hill, E. J. Jennings, G. L. Meredith, P. D. Pywell, and A. H. Turner.

## PUBLIC HEALTH AND POOR-LAW MEDICAL SERVICES.

## HEALTH OF ENGLISH TOWNS.

IN thirty-three of the largest English towns, including London, 6,638 births and 4,252 deaths were registered during the week ending Saturday last, December 18th. The annual rate of mortality in these towns, which had been 19.8 and 20.8 per 1,000 in the two preceding weeks, declined again to 20.6 last week. The rates in the several towns ranged from 14.1 in West Ham, 14.2 in Croydon, 14.4 in Cardiff, and 14.6 in Portsmouth, to 24.0 in Birmingham, 25.3 in Sunderland, 26.2 in Blackburn, and 27.9 in Norwich. In the thirty-two provincial towns the mean death-rate was 20.4 per 1,000, and was 6 below the rate recorded in London, which was 21.0 per 1,000. The zymotic death-rate in the thirty-three towns averaged 2.7 per 1,000; in London the rate was equal to 3.4, while it averaged 2.1 per 1,000 in the thirty-two large provincial towns, among which the highest zymotic death-rates were 3.4 in London and in Bristol, 3.7 in Sunderland, 4.2 in Swarsea, and 5.2 in Blackburn. Measles caused a death-rate of 1.8 in Oldham, 2.9 in Bristol, 3.2 in Blackburn, and 3.6 in Swarsea; and whooping-cough of 1.1 in Sunderland and 1.9 in Norwich. The mortality from scarlet fever and from "fever" showed no marked excess in any of the large towns. The 94 deaths from diphtheria in the thirty-three towns during the week under notice included 63 in London, 6 in Liverpool, 4 in Birmingham, and 3 in Leeds. No fatal case of small-pox was registered during last week, either in London or in any of the thirty-two large provincial towns: and no small-pox patients were under treatment in any of the Metropolitan Asylums Hospitals. The number of scarlet fever patients in these hospitals and in the London Fever Hospital, which had been 3,818, 3,812 and 3,806 at the end of the three preceding weeks, had further declined to 3,733 on Saturday last, December 18th; 260 new cases were admitted during the week, against 375, 328, and 319 in the three preceding weeks.

## HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday last, December 18th, 912 births and 606 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had increased from 18.5 to 20.2 per 1,000 in the four preceding weeks, further rose to 20.3 last week, but was 0.3 per 1,000 below the mean rate during the same period in the thirty-three large English towns. Among these Scotch towns the death-rates ranged from 13.6 in Perth and 15.2 in Leith to 21.0 in Glasgow and 31.3 in Greenock. The zymotic death-rate in these towns averaged 2.4 per 1,000, the highest rates being recorded in Glasgow and Greenock. The 289 deaths registered in Glasgow included 8 from measles, 6 from scarlet fever, 16 from whooping-cough, 21 from "fever," and 5 from diarrhoea. Three fatal cases of scarlet fever and 2 of diphtheria were recorded in Edinburgh; and 3 of measles and 8 of whooping-cough in Greenock.

## DIPHHTHERIA IN LONDON.

THERE was a further increase in the mortality from diphtheria in London last week. The fatal cases of this disease, which had been 63, 52, and 58 in the three preceding weeks, further rose to 63 during the week ending Saturday last, December 18th, and were 12 above the corrected average number in the corresponding periods of the ten preceding years. Of these 63 deaths, 9 were of persons belonging to Hackney, 9 to Camberwell, 5 to Islington, 5 to Lambeth, and 4 to Wandsworth sanitary areas. The number of notifications of diphtheria in London, which had been 293, 263, and 301 in the three preceding weeks, declined again to 288 during the week ending Saturday last. Compared with the preceding

week, there was an increase in the prevalence of diphtheria in North and South London, but a decline in West, Central, and East London. Among the sanitary areas of West London there was a slight further increase in the number of new cases in Fulham, but elsewhere there was a general decline. In the principal sanitary areas of North London there was a marked increase in the prevalence of diphtheria, especially in Hackney, where 28 new cases were notified, against numbers steadily increasing from 14 to 19 in the four preceding weeks. In East London, however, the prevalence of the disease showed a marked decline, which was most marked in Poplar, where only 7 new cases were recorded, against 16, 14, and 23 in the three preceding weeks. In most of the sanitary areas of South London there was an increase in the prevalence of diphtheria, especially in Newington, Lambeth, Camberwell, and Greenwich. In the last-mentioned sanitary area 22 new cases were notified, against 11 in each of the two preceding weeks. In Battersea and Wandsworth, however, there was a marked decline in the prevalence of the disease; in the latter district the new cases, which had been 12, 15, and 28 in the three preceding weeks, declined to 17 last week. The admissions of diphtheria patients into the Metropolitan Asylums Hospitals during last week were 164, against 157, 145, and 165 in the three preceding weeks; and 1,102 patients remained under treatment in these hospitals on Saturday last.

## RESIDENCE OF DISTRICT MEDICAL OFFICER.

C. D. writes to ask whether it is legal for a Board of Guardians to appoint to a district a medical officer who is not resident in the parish, and by so doing pass over the claims of a fully-qualified man who is a resident there.

\* \* \* A Board of Guardians is not bound to appoint a resident as district medical officer, but in the event of a non-resident being appointed by them when a medical man residing in the district has been an applicant for the vacancy, the Local Government Board, before confirming the appointment, will require satisfactory reasons for the rejection of the resident candidate.

## EXTRAS ORDERED BY MEDICAL OFFICER AND NOT SUPPLIED BY RELIEVING OFFICER.

B. states that he ordered extras for a pauper child which were not supplied by the relieving officer, and that he made an entry in his report to the guardians that these "had been refused by the relieving officer." The guardians having investigated the matter, decided that the relieving officer did not refuse to give the extras in question, and they have called upon our correspondent to expunge the entry. He asks whether they can compel him to do this.

\* \* \* It would appear that our correspondent made his report to the guardians simply on the statements of one or more paupers, and without any further corroborative evidence that the relieving officer did refuse to give the extras he recommended. His report would have been more accurate if he had stated that he had been informed that the relieving officer had refused to give these extras, and it would then have been strictly correct and would have required no alteration, whatever might have been the verdict of the guardians in reference to the action of the relieving officer. As the case now stands, B.'s report appears to be of doubtful accuracy, and if so it had better be expunged in accordance with the request of the guardians.

## REMUNERATION FOR MEDICAL ATTENDANCE ON PATIENTS IN ISOLATION HOSPITALS.

INQUIREE, who is a Poor-law district medical officer, writes to ask what the custom is in reference to payment for medical attendance on patients in an isolation hospital of a rural sanitary authority to which both paupers and non-paupers are admitted, and this when the medical officer of the district in which the hospital is situated is also the medical attendant of all the cases therein.

\* \* \* We believe that the custom varies much throughout the country in reference to this matter, and the fact of both paupers and non-paupers being admitted to the same hospital seriously complicates the question. The claim for medical attendance on non-paupers appears to us to be on the sanitary authority of the district for which the hospital is provided, and it is certainly so when the patients are removed to the hospital on a magistrate's order. In ordinary cases not of this latter class it is now very generally held that it is not advisable for any claim to be made by the sanitary authority on the patients or their friends for repayment of any expenses incurred by hospital treatment of infectious cases, as this would certainly tend to prevent many cases of this class being removed to hospital for treatment. The remuneration for attendance on pauper cases would probably be included in our correspondent's salary, as he would by law be compelled to attend all paupers in his own district when properly called upon to do so, whether suffering from infectious or any other disease.

AMONG the latest contributions received in aid of the Prince of Wales's Hospital Fund of London are £1,000 from the Fishmongers' Company, being the first annual instalment of £5,000 which the Company have agreed to give in five years. The Worshipful Company of Clothworkers have voted an annual subscription of £1,000 until further orders to the fund.

## MEDICAL NEWS.

THE Local Government Board has, by a circular addressed to guardians of the poor outside London, called attention to the Act of last session "to Amend the Law for the Better Protection of Infant Life." The Act will come into operation on January 1st, 1898.

THE Council of the Yorkshire College have, on the recommendation of the Board of Medicine and Senate, created a Professorship of Public Health. Mr. R. N. Hartley, M.B., previously lecturer on the subject, has been appointed to the chair.

AT a meeting of the Metropolitan Asylums Board on December 18th a report of the Children's Committee, recommending the purchase of a site comprising 49 acres at Swanley for the erection thereon of a school for children suffering from ophthalmia at a cost of £5,050, was adopted.

OWING to the resignation of Professor Kelly there is a vacancy in the Chair of Hygiene of King's College, London. It is stated that the candidates at present are Dr. Thresh, M.O.H. to the Essex County Council; Dr. Allen, M.O.H. to the Strand District; and Dr. Bushell Anningson, M.O.H. for Cambridge.

THE dispute between Mr. E. T. Hooley and the Hospital Fund Committee at Nottingham has been amicably settled. At a meeting on December 18th it was stated that Mr. Hooley had paid over £7,221, and had instructed his bankers to pay over the remainder of the £10,000 as soon as a like amount was collected by the working men.

"KISMET."—Dr. Browne, of Brynmawr, lately stated to his authority that, when visiting a case of measles, three neighbours came, infants in arm, to help him, and were highly indignant at being turned out. To attempt to prevent children from taking measles they regard as trying to be wiser than Providence. Is it not worth while to try to convince such people that if they can merely postpone the attack of measles on their little ones for a few years they double the chance of their recovery?

METHYLATED SPIRIT DRUNKENNESS.—For some years past intoxication with methylated spirit has been steadily increasing in London, though it does not prevail to any great extent. An old man was charged at Worship Street Police-court only last week with being drunk and disorderly and assaulting a constable. Methylated spirit was found on him, and the evidence disclosed the fact that the prisoner had frequently been charged before for offences committed while labouring under this form of drunkenness. He was sent to gaol for a month with hard labour.

LIVERPOOL NORTHERN HOSPITAL DINNER.—The dinner of the residents, past and present, of the old Liverpool Northern Hospital will be held in the Exchange Hotel on Saturday, January 22nd; Dr. Frederick Roberts, of London, a former resident in the Northern Hospital, will take the chair. A large number of old residents, members of the Committee, and others who have been in various ways associated with the hospital, have promised to be present, and it is expected that the gathering will be a highly successful one, and a pleasant *réunion* of former friends and colleagues. Great credit is due to the present resident staff, to whom the happy idea presented itself of holding this dinner, and giving the old residents a chance of visiting the old building once more before it is pulled down to make way for the new one.

HOMES FOR THE FEEBLE-MINDED.—The Duchess of Sutherland makes an appeal for a sum of £2,000 in furtherance of the plans of the National Association for Promoting the Welfare of the Feeble-minded. The Association, founded about two years ago, claims that it has done good service, both in forming new homes for young persons of deficient intellect and co-ordinating those previously existing. The Society has now the opportunity of acquiring on advantageous terms the occupation free of rent of a block of cottage homes near London. The premises include a steam laundry and other accessories, which would render them suitable not only for the maintenance and education of the feeble-minded, but

also for the training of matrons and teachers who would be available for other homes. It may be remarked that the Lunacy Commissioners, in their last report, refer approvingly to "suitable provision for an extensive and necessitous class of persons who are known as 'the feeble-minded.'" With due regard to the discrimination of appropriate cases as distinguished from certifiable idiots and imbeciles, we think that the new departure is likely to be of benefit to the community and worthy of the support of charitable persons. The Honorary Secretary of the Association is Miss F. A. Cooper, 49, Victoria Street, London, S.W.

OBSTETRICAL SOCIETY OF LONDON.—The election of officers for 1898 will take place on Wednesday, February 2nd, 1898. The following is the balloting list recommended by the Council:—*President*: C. J. Cullingworth, M.D. *Vice-Presidents*: W. Duncan, M.D., J. H. Galton, M.D., \*W. R. Dakin, M.D., J. B. Hurry, M.A., M.D. (*Reading*). *Treasurer*: \*J. Watt Black, M.D. *Chairman of the Board for the Examination of Midwives*: Percy Boulton, M.D. *Honorary Secretaries*: J. Phillips, M.A., M.D., \*H. R. Spencer, M.D. *Honorary Librarian*: \*Amand Routh, M.D. *Other Members of Council*: \*A. H. F. Barbour, M.D. (*Edinburgh*). J. Walters, M.B. (*Ruge*), J. Thompson (*Nottingham*). \*G. F. Blacker, M.D., A. Nicholson, M.B. (*Brighton*), R. Pinhorn (*Dover*), T. W. Eden, M.D., \*J. Dysart McCaw, M.D., F. J. McCann, M.B., C.M., W. Gandy, G. H. Pedler, \*A. W. Addinsell, M.B., C.M., \*J. Ford Anderson, M.D., \*A. E. Giles, M.D., Angus Fraser, M.D. (*Aberdeen*), H. A. Des Voeux, M.D., C. H. Roberts, M.D., \*G. E. Herman, M.B. Those gentlemen to whose name an asterisk is prefixed were not on the Council or did not fill the same office last year.

QUARANTINE OF PERSONS EXPOSED TO YELLOW FEVER AT JAMAICA.—A singular account appeared in the *Jamaica Daily Gleaner* of November 25th of the way in which ten persons were shut up in the post office at Shooter's Hill, where the assistant postmistress had died of yellow fever. The original statements were somewhat modified in the next issue, and amount to the detention, on medical advice, of the eight persons in the house, and the disinfection of the house and destruction of the bush around the building. The fatal case, it seems, was regarded as one of bilious remittent fever till shortly before death. Since the inmates were liberated from their ten days' quarantine several of them have been taken ill, two in the post office at Shooter's Hill, two at Santa Cruz, and one who left for May Pen after her illness commenced. One of the two remaining in the house died of yellow fever. It is not easy to ascertain from the accounts sent us how far the district medical officer may have been justified in his action, and how far, if quarantine was attempted, he may have been wise in granting *pratique* so early. The direct evidence of a near neighbour shows that great kindness was shown and every attention rendered to the sufferers both by Dr. Cook and by Dr. Beckwith. Yellow fever is one of those infectious diseases in the causation of which local conditions play an important part; and it is always desirable, if a period of isolation is to be insisted upon for those exposed to the infection, that such probationary period should be passed under the best sanitary conditions, and these are not necessarily to be found at the place where the disease has first manifested itself. With efficient and plentiful isolation hospitals, the rapid removal of patients to them and medical inspection of persons exposed to infection, quarantine might probably be entirely dispensed with. Dr. Cargill is said to be still optimistic as to the future of the outbreak.

TOYNBEE HALL.—"The impression left by the year's experience," writes the Warden of Toynbee Hall (the Rev. Canon Barnett) in his introduction to the thirteenth annual report of the Universities Settlement in East London for the year ending June 30th, 1897, "is like that left by a prosperous voyage through a cold zone. The measurable gain has been large, but it has been made in an atmosphere unwarmed by the fire of enthusiasm." From this we gather that the work of "Toynbee" has during the last year been progressing steadily along lines previously laid down, but that no startling fresh developments have been made. And this is just what the report tells us. The manifold branching to which the educational work has now extended is slowly

but surely bearing fruit and making a little summer of interest in the monotony of the labour life of the East End of London. Even "Toynbee" cannot expect to introduce startling innovations every year. On looking over the long list of authorities who have, on one subject or another, given lectures or otherwise assisted in the work of the institution, one cannot help being struck with the solidity of their subjects and with the eminence of the lecturers. When we read that lectures on *Eschylus*, *Sophocles*, Hebrew literature, economic literature, Browning, and practical biology and physiology have been largely attended, and that large audiences have freely come to listen to such men as Professor Clifford Allbutt, Mr. W. H. Preece, Mr. Victor Horsley, and Professor Flinders Petrie, we feel that the experiment of giving mental rather than bodily luxuries to the labouring man has indeed been justified.

### MEDICAL VACANCIES.

The following vacancies are announced:

**ABERDEEN: UNIVERSITY OF.**—Two additional Examiners: (1) *Materia Medica* for a period of three years; (2) *Medical Jurisprudence and Public Medicine* for a period of one year. Applications to Robert Walker, Secretary, by January 4th, 1898.

**BATH ROYAL UNITED HOSPITAL.**—Resident Medical Officer; must be M.R.C.S., and either L.R.C.P. or L.S.A. Appointment for three years. Salary, £100 per annum, with board, lodging, and washing. Also House-Surgeon, must be M.R.C.S. Eng. Appointment until October 1st, 1898. Salary at the rate of £60 per annum, with board, lodging, and washing. Applications to W. Stockwell, Secretary, for the former by December 28th, and for the latter by December 20th.

**BOURNEMOUTH ROYAL VICTORIA HOSPITAL.**—Ophthalmic Surgeon; must be F.R.C.S. Applications to the Secretary by February 1st, 1898.

**BRIGHTON, HOVE, AND PRESTON DISPENSARY,** Queen's Road, Brighton.—House-Surgeon to the Western Branch. Unmarried and doubly qualified. Salary, £140 per annum, with furnished apartments, coals, gas, and attendance (no board). In the event of a House-Surgeon for any of the other Branches being elected, the vacancy so caused will be open to such candidates as may apply in the alternative for the same. Salary at Northern Branch £140, with furnished apartments, coals, gas, and attendance (no board). Applications to the Assistant Secretary before January 1st, 1898.

**BRIGHTON: SUSSEX COUNTY HOSPITAL.**—House-Physician. Doubly qualified; unmarried, and when elected under 30 years of age. Salary, commencing at £50 per annum, with board and residence in the hospital. Applications to the Secretary by January 12th, 1898.

**CARDIFF PROVIDENT DISPENSARY.**—Additional Members to the Medical Staff. Applications to the Honorary Secretary, Herbert M. Thompson, Whitley Batch, Llandaff, by December 31st.

**CHELSEA, BROMPTON, AND BELGRAVE DISPENSARY,** 47, Sloane Square, S.W.—Honorary Visiting Surgeon to the Western District. Applications to Austin E. Cooper, B.A., M.D., Secretary, by December 31st.

**FROME UNION.**—Medical Officer and Public Vaccinator for the Nunney District. Salary £60, midwifery 10s. per case, certifying lunatics 10s. per case, vaccination 1s. 6d. to 3s. per case. Applications to Geo. W. Bradford, Clerk, Public Offices, Frome, by January 1st, 1898.

**HALIFAX ROYAL INFIRMARY.**—Assistant House-Surgeon; unmarried, and doubly qualified. Salary, £50 per annum, with residence, board, and washing. Applications to Oates Webster, Secretary, by December 29th.

**HARTSHILL, STOKE-ON-TRENT: NORTH STAFFORDSHIRE INFIRMARY AND EYE HOSPITAL.**—House-Physician. Salary, £100 per annum, increasing £10 per annum, with furnished apartments, board, and washing. Applications to the Secretary by January 20th, 1898.

**HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST,** Brompton, S.W.—Resident House-Physicians. Applications to William H. Theobald, Secretary, by December 29th.

**HOSPITAL FOR EPILEPSY AND PARALYSIS AND OTHER DISEASES OF THE NERVOUS SYSTEM,** 32, Portland Terrace, Regent's Park, N.W.—Physician to out-patients. Applications to H. Howgrave Graham, Secretary, before January 1st.

**JERSEY, STATES OF THE ISLAND OF.**—Medical Superintendent for the Jersey Public Lunatic Asylum. Appointment for three years at a salary of £300 per annum, with house (and garden) in which the person appointed will be required to reside. Sealed applications to the President of the Committee of the Public Lunatic Asylum, Greffe Office, Jersey, by January 5th, 1898.

**LEEDS, THE GENERAL INFIRMARY AT.**—Resident Casualty Officer. Salary, £100 per year, with board, lodging, and washing. Applications to the Secretary of the Faculty, General Infirmary, Leeds, by January 8th, 1898.

**LEICESTER INFIRMARY.**—Surgical Dresser. Term six months. Board and lodging provided. Applications to T. A. Wykes, Secretary, The Infirmary, Leicester, by December 27th.

**NEW ABBEY, DUMFRIES, PARISH OF.**—Medical Officer and Public Vaccinator. Salary, £50 per annum. Applications to the Chairman, Captain Stewart, of Shambellie, by January 1st, 1898.

**NORFOLK AND NORWICH HOSPITAL.**—Surgeon and Assistant Surgeon to the Honorary Staff. Applications to Poole Gabbett, Secretary, fourteen days before the election, which takes place on January 8th, 1898.

**NORTH-WEST LONDON HOSPITAL,** Kentish Town Road, N.W.—Assistant Physician. Must reside within three miles of the hospital and within the four-mile cab radius. Applications to Alfred Craske, Secretary, by January 7th.

**OLDHAM, COUNTY BOROUGH OF.**—Medical Officer of Health for the Borough, and Medical Director and attendant of the Infectious Diseases Hospital of the Corporation. Salary for the first year will be £400, increasing by annual increments of £20 to a maximum of £500. Must remain in the service of the Corporation for a period of five years. Applications, endorsed "Medical Officer," to A. Nicholson, Town Clerk, Town Hall, Oldham, by December 31st.

**PERSHORE UNION.**—Medical Officer for the Eckington District, for the Flodbury District, and for the Upton Snodsbury District. Salaries, £65, £50, and £50 per annum respectively, exclusive of vaccination and extra medical fees. Applications to Joseph Martin, Clerk to the Guardians, Union Office, Pershore, by December 31st.

**PLYMOUTH, SOUTH DEVON, AND EAST CORNWALL HOSPITAL.**—House-Surgeon. Salary, £100 per annum, with board and residence. Applications to H. H. Shanks, R.N., Honorary Secretary, by December 31st.

**ROYAL COLLEGE OF PHYSICIANS.**—Milroy Lecturer for 1899. Applications to the Registrar, Royal College of Physicians, Pall Mall East, by January 10th.

**SALFORD ROYAL HOSPITAL.**—Honorary Surgeon. Must reside within two miles of the hospital. The present Honorary Assistant-Surgeon is a candidate, and in the event of his being appointed there will be a vacancy for an Honorary Assistant Surgeon. Applications to the Secretary by January 2nd, 1898.

**SHANGHAI.**—Medical Officer of Health; doubly qualified and hold a Diploma of Public Health. From 25 to 30 years of age. Salary, Taels 4,500 (about £600) a year. Appointment in the first instance for three years. Unfurnished quarters, consisting of bed room, bath room, and sitting room. Means of conveyance provided. First class passage to Shanghai provided by the Municipal Council, and if the officer returns at the end of three years the homeward passage will also be paid. Applications to G. Sims Woodhead, M.D., Examination Hall, Victoria Embankment, London, W.C. (who will supply further particulars), by January 1st, 1898.

**STOCKTON UNION.**—Medical Officer and Public Vaccinator for the Medical District of Stockton, and Medical Officer for the Stockton Workhouse. Remuneration, £170 per annum as Medical Officer for the District, £130 per annum as Medical Officer for the Workhouse, together with usual vaccination fees. Applications to Thos. E. Jobson, Clerk to the Guardians, Union Offices, Stockton-on-Tees, by December 28th.

**WALTHAMSTOW URBAN DISTRICT COUNCIL.**—Medical Officer of Health. Salary, £120 per annum. Applications, endorsed "Medical Officer," to E. J. Gowen, Clerk to the Council, Town Hall, Walthamstow, by January 11th, 1898.

### MEDICAL APPOINTMENTS.

**ARBUCKLE, Hugh W.**, M.D.Aberd., L.R.C.P. Edin., D.P.H.Camb., reappointed Medical Officer of Health of the Thorne Rural District Council.

**BOUSTEAD, R. J.**, L.R.C.P., L.R.C.S. Edin., D.P.H., reappointed Medical Officer of Health to the Hexham Rural District Council.

**BURLAND, Dr.**, appointed Medical Officer of the Cottage Home of the Kettering Union at Burton Latimer.

**BURTON, C. G.**, M.R.C.S., L.R.C.P., appointed House-Surgeon to the North-Eastern Hospital for Children, Hackney Road.

**FOSTER, J. J.**, M.R.C.S., L.R.C.P., appointed House-Physician to the North-Eastern Hospital for Children, Hackney Road.

**FRASER, P.**, M.D., appointed Medical Officer of Health to the Llanrwst Urban District Council.

**GERVIS, Charles B.**, M.R.C.S. Eng., L.R.C.P. Lond., appointed Assistant Medical Officer at Colne Hatch Asylum.

**MACLAURIN, Charles**, M.B., C.M., appointed Assistant Surgeon to the Prince Alfred Hospital, Sydney.

**MATHEW, G.**, Porter, M.B., B.C.Cantab., L.R.C.P. Lond., M.R.C.S. Eng., appointed Registrar to the Chelsea Hospital for Women.

**RICHMOND, J. R. M.**, appointed Medical Officer of Health to the Overton (Flints) Rural District Council.

**SIMPSON, Reginald P.**, M.D.Durh., M.R.C.S. Eng., reappointed Medical Officer of Health to the Weymouth Port Sanitary Authority.

**WILSON, George R.**, M.B., C.M. Edin., appointed District Medical Officer and Public Vaccinator for No. 1 District of the Blackburn Union, vice T. W. Gregson, M.B., C.M., deceased.

**SMITH, H. Lionel**, M.R.C.P., L.R.C.S. Irel., appointed District Surgeon at Bulawayo.

### 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 insure insertion in the current issue.

#### BIRTH.

**WRIGHT.**—December 11th, 1897, at 35, Deane Road, Bolton, the wife of J. Farrall Wright, M.R.C.S. Eng., L.R.C.P. Lond., of a daughter.

#### DEATH.

**ROBERTS.**—On December 11th, at the Beeches, Lowestoft, Reginald George Haselwood, elder son of Reginald J. Roberts, M.B., aged 55 years.

## 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.  
**CENTRAL LONDON THROAT, NOSE, AND EAR**.—*Attendances*.—M. W. Th. S. 2; Tu. F. 3. *Operations*.—Daily.  
**CHANCERY CROSS**. *Attendances*.—Medical and Surgical, daily, 1.30; Obstetric, Tu. F. 1.30; Skin, W. Th. 1.45; 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 OPHTHALMIC**. *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*.—M. W. Th. F.  
**GUY'S**. *Attendances*.—Medical and Surgical, daily, 1.30; Obstetric, M. Tu. F. 1.30; Eye, M. Tu. Th. F. 1.30; Ear, Tu. 1; Skin, Tu. 1; Dental, daily, 9; Throat, F. 1. *Operations*.—(Ophthalmic) M. Th. 1.30; Tu. F. 1.30.  
**HOSPITAL FOR WOMEN SOHO**. *Attendances*.—Daily, 10. *Operations*.—M. Th. 2.  
**KING'S COLLEGE**. *Attendances*.—Medical, daily, 2; Surgical, daily, 1.30; Obstetric, daily, 1.30; o.p. M. Tu. W. F. 1.30; Eye, M. Th. 1.30; Ophthalmic Department, W. 2; Ear, F. 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, Tu. M. Th. 1.30; o.p. W. S. 1.30; Eye, Tu. S. 9; Ear, W. 9; 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. W. 1.30; Eye, Tu. F. 9; Ear and Throat, Tu. 9; Skin, Tu. 4; Th. 19.30; Dental, M. W. F. 9.30. *Operations*.—W. 1.30; S. 2; (Obstetric), Th. 2.  
**NATIONAL OPHTHALMIC**. *Attendances*.—M. Tu. Th. F. 2. *Operations*.—W. 10.  
**NEW HOSPITAL FOR WOMEN**. *Attendances*.—Daily, 2; Ophthalmic, W. S. 9.30. *Operations*.—Tu. F. 9.  
**NORTH-WEST LONDON**. *Attendances*.—Medical and Surgical, daily, 2; Obstetric, W. 2; Eye, W. 9; Skin, F. 2; Dental, F. 9. *Operations*.—Th. 2.30.  
**ROYAL EYE**, Southwark. *Attendances*.—Daily, 2. *Operations*.—Daily.  
**ROYAL FREE**. *Attendances*.—Medical and Surgical, daily, 2; Diseases of Women, Tu. S. 9; Eye, M. F. 9; Skin, Th. 9; Throat, Nose, and Ear, S. 3; Dental, Th. 9. *Operations*.—W. S. 2; (Ophthalmic), M. F. 10.30; (Diseases of Women), S. 9.  
**ROYAL LONDON OPHTHALMIC**. *Attendances*.—Daily, 9. *Operations*.—Daily, 10.  
**ROYAL ORTHOPAEDIC**. *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, F. 2; Skin, F. 1.30; Larynx, F. 2.30; Orthopaedic, M. 2.30; Dental, Tu. F. 9. *Operations*.—M. Tu. W. S. 1.30; (Ophthalmic), Tu. Th. 2.  
**ST. GEORGE'S**. *Attendances*.—Medical and Surgical, daily, 12; Obstetric, M. Th. 2; o.p. Eye, W. S. 2; Ear, Tu. 2; Skin, W. 2; Throat, F. 2; Orthopaedic, W. 2; Dental, Tu. S. 2. *Operations*.—M. Tu. Th. F. 1.  
**ST. MARK'S**. *Attendances*.—Fistula and Diseases of the Rectum, males S. 3; females; W. 9.45. *Operations*.—M. 2; Tu. 2.30.  
**ST. MARY'S**. *Attendances*.—Medical and Surgical, daily, 1.45; o.p. 1.30; Obstetric, Tu. F., 1.45; o.p. M. Tu. W. F. 1.30; Eye, Tu. F. 1.30; Ear, M. Th. 1.30; Skin, M. Th. 1.30; Orthopaedic, W. 2; Diseases of Women, Tu. 1.30; Electro-therapeutics, Tu. Th. 2.30; Dental, W. S. 9.30; Children's Medical, Tu. 9.15; Children's Surgical, S. 9.15. *Operations*.—M. 2.30; Tu. W. F. 2; Th. 2.30; S. 10; (Ophthalmic), F. 10.  
**ST. PETER'S**. *Attendances*.—M. 2 and 5; Tu. 2; W. 5; Th. 2; F. (Women and Children), 2; S. 4. *Operations*.—W. 1.2.  
**ST. THOMAS'S**. *Attendances*.—Medical and Surgical, M. Tu. Th. F. 2; o.p. daily, 1.30; Obstetric, Tu. Th. 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*.—M. F. 1.30; Th. 2; Mental Diseases, o.p. Tu. 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*.—Gynaecological, M. 2; 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. F. 1.30; Eye, M. W. 1.30; Ear, M. Th. 1.30; Skin, Tu. 1.30; F. 2; Throat, M. Th. 3; Dental, Tu. F. 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. 3. *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. Th. 9.30; Skin, W. 1; Dental, W. S. 9.15. *Operations*.—M. 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*.

TELEGRAPHIC ADDRESS.—The telegraphic address of the EDITOR of the BRITISH MEDICAL JOURNAL is *Artiology, London*. The telegraphic address of the MANAGER of the BRITISH MEDICAL JOURNAL is *Articulate, London*.

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

## QUERIES.

INKPOT asks the name and price of a good book, not too voluminous, on Heart Affections, the work to be up to date; and also the same on Kidney Disease.

\*\* We refer our correspondent to the review of Sir William Broadbent's book on *Heart Disease* (London: Baillière, Tindall, and Cox, 1897, 10s. 6d., published in the BRITISH MEDICAL JOURNAL of October 30th, 1897, page 1268, and also to the review of Dr. Robert Saundby's book on *Renal and Urinary Diseases* (Bristol: John Wright and Co., 1897, 10s. 6d.), published in the BRITISH MEDICAL JOURNAL of January 9th, 1897, page 86.

## EXCISE DUTY ON CARRIAGES.

SPERO inquires whether he is entitled as a medical practitioner to keep a pony and four-wheeled carriage without paying a tax thereon.

\*\* We are advised that he is not entitled to keep such a carriage without paying the tax, which, if the carriage in question is drawn or adapted or fitted to be drawn by one horse only, would be the sum of £1 1s., payable on January 1st in each year.

## CIRCULATION OF REPRINTS.

AB OMNI PECCATO asks whether there is anything professionally objectionable or wrong in a specialist sending reprints of published articles to general practitioners with whom he is personally unacquainted, provided that such published articles are of practical use to the general practitioner.

\*\* We have on several occasions in the past received letters from general practitioners in various parts of the country protesting against the course mentioned as one savouring of self-advertisement.

## FEES AT SMALL HOSPITALS.

S. A. C. writes: Can I charge a fee for giving chloroform at a small general hospital? I was called by mistake to see a railway servant who had been run over by a train. He was taken to this hospital, where I met the surgeon to the railway, and passed the case on to him. He then asked me to give chloroform whilst he amputated the arm at the shoulder. This I did, the operation lasting two hours, and so detaining me from my work, which was very inconvenient for me. I am not on the staff of this hospital, although my partner is, and I do as much work there as he does. I have sent in a claim to the Railway Company for £2 2s., being my fee for giving up the time to see the patient. I should like to know if it would be honourable to send in a further fee for £2 2s.

\*\* The rule as to honorary service is so widely recognised in regard to the larger general hospitals that we do not think that such a claim as is here suggested would be entertained.

## THE DIAGNOSIS OF SCARLET FEVER.

M. B. was consulted at home by a patient with sore throat, and temperature 102°. She returned twelve days later, both hands desquamating, and acknowledged to having had a rash. He then pronounced the case scarlet fever, advised her to stay at home eight weeks, and reported the case to the medical officer. The patient's father is denouncing him as not knowing a case of scarlet fever when he sees it. M. B. asks what shelter he has from this, and what powers the local authority has to deal with what he regards as deliberate concealment of a case.

\*\* Prosecution for concealment would probably fail. M. B. could perhaps sue for slander, but proof would be difficult, and unless he is a member of a medical defence society he would probably suffer less in the long run by allowing the matter to blow over. In cases of suspicious sore throat it is well to insist on paying a confirmatory visit, as the positive diagnosis of scarlet fever and diphtheria in an early stage may often be quite impossible.

## THE WARMING OF DWELLING HOUSES.

M. D. asks for information as to books or source of information dealing with the heating of houses by a stove or otherwise, situated in the basement or cellar. He has already an air-heating gas stove in the lobby, but t is not sufficient.

\*\* A good deal of information on the subject will be found in Dr. Billings's book on *Ventilation and Heating* (New York, 1893). The work is certainly worth reading, as showing the difficulties which attend any attempt to supply warmth in such a manner to an ordinary house.

As a means of ensuring ventilation and preventing the chilliness of the draughts produced by all purely natural methods, it is certainly a good plan to place a good "cockle" or gill stove, of which there are many forms, in the basement if care is taken to ensure a very free supply of air from a pure source to pass over the stove before entering the house.

It must be remembered, however, that air is a bad carrier of heat, and that to attempt to warm the unused part of a house by warm air from a ventilating stove in the basement is a somewhat wasteful proceeding. The proper use of such a stove is as a means of warming the incoming air required for the ventilation of the house. But even that is a much less simple affair than at first sight it appears if the house is a high one. Theoretically, the fresh air enters into the stove chambers