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## MEMORANDA

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

MORPHINE IN URÆMIC ECLAMPSIA.
Two cases of uræmic eclampsia associated with labour have lately been recorded in the Journal, one of which proved fatal. In the following case the morphine treatment, as recommended in recent textbooks, was apparently the cause of

the patient's recovery.

Mrs. M., who had borne two children previously without mishap, was confined on May 29th at 10 P.M., the child being delivered with comparative ease. She had suffered from headache and œdema of the legs for a few weeks. Vomiting began one hour after delivery. At 7 A.M. on May 30th she had the first convulsion, and at 10 A.M. the second. Hot applications were placed on the back, and she was given a hypodermic injection of pilocarpin gr.  $\frac{1}{3}$  and morphine gr.  $\frac{1}{2}$ . Further convulsions, however, occurred, more severe and Further convulsions, however, occurred, more severe and more frequent as evening drew near, and the patient became quite insensible even between the attacks, the pupils failing to react to light. The temperature never rose above 100°, nor was the pulse increased in frequency. No nourishment had been retained when given by the mouth, so she was fed by rectal injections. At 8 P.M., after the seventh convulsion, a small quantity of urine was drawn off by catheter; it was deep orange in colour, and was rendered solid by albumen when boiled. Hot bottles were now placed round the patient in bed, and she was given a hypodermic injection of piloin bed, and she was given a hypodermic injection of pilocarpin gr.  $\frac{1}{3}$  and morphine gr. j. During the night she was comatose, with slow snoring respiration and minutely contracted pupils, but she sweated profusely, and had no more convulsions.

At 10 A.M. on May 31st she was awake and sensible, remembering nothing of what had occurred, but complaining of a sore tongue, which was found to have been bitten. She was ordered a purgative, followed by a diaphoretic mixture and milk diet. She had no vomiting, and made an uninterrupted recovery.

On June 11th there was a bare trace of albumen in the urine. No milk appeared in the breasts.

Louis A. Francis.

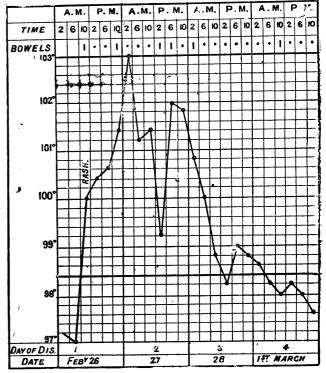
MEASLES: RASH ON FIRST DAY OF SYMPTOMS. I THINK that unusual points in ordinary illnesses—especially infective—deserve record and attention, even if not of major importance, and therefore I record a case illustrating the above still more definitely than Dr. Jarratt's, since his case was not seen until the day of rash, and there might have been slight unnoticed prodromata, whereas this one had been under skilled observation for three weeks before.

O. S., aged 5 years, was admitted to the Alexandra Children's Hospital on February 2nd, 1898, for simple fracture of the lower end of the femur under my surgical colleague Mr. H. H. Taylor, with whose permission I write. The patient had not had measles. On February 8th another child in the same ward admitted on the previous day developed measles and

was sent home at once.

The child O. S. remained with subnormal temperature (97° F.), and absolutely no prodromal symptoms until the morning of February 26th (fourteen days counted from Febmorning of February 26th (fourteen days counted from February 8th would end on February 22nd—that is, four days before the eruption, during which four days such symptoms might have been expected). At 6 A.M., the temperature was still 97°, but at 8 A.M. a discrete papular red rash was noticed on the back, then on the chest and face. At 9 A.M. the temperature was 100° F., and the child was isolated. There was no vomiting, rigor, or evident illness. By 1 P.M. the face looked heavy, the eyes suffused, with red patches on the lower lids, and the conjunctive were slightly injected. The papules, still discretive were now scattered over the face, mostly on the forehead and were now scattered over the face, mostly on the forehead and chin, the latter only suggesting measles. There were some behind the ears, a few about the upper arms and knees, none

The tongue was pale and coated. on the flexor aspects. There was no sore throat, but dusky mottling over the soft palate; no cervical or occipital glands were enlarged. By night the temperature was 103°, and by afternoon next day the rash was characteristic, with catarrh, etc., and the case followed a favourable course, with normal temperature, on March 1st.



The difficulty of early diagnosis from rötheln is self evident, but that this really was a case of measles is the opinion of all who saw it. (I am indebted to Mr. Jones, house surgeon, for some notes.)

I should like to mention another point, though perhaps fairly well known, namely, that although the temperature may be 102° on the first prodromal day, it may be normal on the next, rising again that night or next day.

EDWARD MACKEY. Brighton.

### THE DIAGNOSIS OF PYELITIS.

ALTHOUGH the Hunterian Lectures for this year are by one' of the masters of our art, and are at once a veritable storehouse of sound advice and a brilliant record of their author's work, I may yet be permitted to draw attention to what has appeared to me to be a defect.

In the technique for the operation of exploring the kidney and ureter (British Medical Journal, April 23rd, p. 1063) the author seems to throw cold water on the examination of the bladder by electric light: "It is rarely needful or helpful, and as a rule causes an unnecessary waste of time." Later on he refers to the difficulty of deciding which kidney is affected in certain cases of calculous anuria, and states that "the cystoscope is quite unnecessary in these cases." p. 939 (April 9th) he quotes a case in which his patient was passing muco-pus, but in which he was not certain which was the affected kidney; so he cut down on the wrong one. It appears to me the cystoscope would have prevented such a serious procedure as this. The following case from my own practice is in point:

A. B., about 50 years old, had been passing muco-pus and irrigating his-bladder for about five years before I saw him, his medical advisers-believing he had cystitis. What struck me at once during my examina-tion of him was his statement: "I declare I have not, nor have I ever had, pain." So it struck me that the pus was, at any rate, not cystic in origin. There was no tenderness nor enlargement of the kidneys. But-I examined him with the cystoscope, and saw the pus pouring from the

<sup>&</sup>lt;sup>1</sup> British Medical Journal, October 16th, 1897.

left ureter like thick custard. I was then obliged to leave the station, so I sent my patient home and Mr. H. Fenwick removed the calculus from the left kidney. I may add that I tried, but failed, to make out the stone with an x-ray apparatus, although the coil gave a x-inch spark.

In regard to the waste of time which Mr. Morris refers to in connection with electric endoscopy, it would appear that the time required must vary greatly; but in the case I have cureted it only took about two minutes, no anasthetic being quoted it only took about two minutes, no anæsthetic being necessary, and I do not recollect Mr. H. Fenwick ever spending more than five minutes over the actual electrical examination.

Mysore.

JOHN SMYTH, M.D., Surgeon-Major I.M.S.

SCARLATINIFORM URTICARIA.

On the night of April 27th I was called to a man supposed to be suffering from scarlatina. I found him with a red rash in patches closely clustered together, but with sound skin between these patches. The temperature was normal, the pulse 78, the tongue clean, and no sign of any febrile disturbance whatever. I decided to express no opinion till next morning. I found the symptoms the same; there was no sore throat; the bowels were well relieved; and, in fact, I could find nothing the matter except an acute urticaria of the erythematous type. I elicited that this man had freely eaten of tinned salmon and cucumber some three or four days previously; and I also discovered that he had acute gonorrhoea of about ten days' standing; and, further, that he had some "stuff from a chemist's" which proved to be a copaiba mixture; so that the case proved to be one of acute erythematous urticaria caused by copaiba.

On May 9th I examined the man, and found desquamation in little patches (scurfy), on face, hands, neck, and forearms. There was no desquamation on the legs or body, and the rash had quite gone. At no time was there rise of temperature, pulse, or any "febricula."

Certainly when I first saw the man it was very difficult to say what was wrong, but the next morning by daylight it was easy to see that the exanthem was not that of scarlatina. I based my diagnosis on the following points: The tongue was clean; there was no sore throat; the pulse was normal; the temperature was 98½. The eruption came out suddenly all over the body, and was diffused in patches, more especially on the body and legs. There was the history of a hearty meal of times and all the statements and all the statements. of tinned salmon and cucumber; and, finally, on close quesaccompanied by copaiba rash. The rash was most irritable, and the itching intense. Slight scurfy desquamation, in patches corresponding to the patches of urticaria, occurred on the seventh day.

I remember four similar cases which I saw during my medical career. They all ran a similar course, and in all there was slight peeling of the skin on the face, neck, and forearms and hands. In one case only was there any desquamation of the trunk. I can readily understand that a person who only saw my patient on the first night might easily have ordered him to hospital, for on the face and neck the eruption was very close and diffused, but a closer inspection of the arms, legs, and body revealed the real nature of the case, as well, of course, as the subsequent progress of the case.

JOHN J. A. RAYE. Banbury, Oxon.

A CASE OF POPLITEAL ANEURYSM IN A FEMALE. A WOMAN, 55 years old, came to the Hull Royal Infirmary complaining of "rheumatism" of the right knee. On examination, she was found to have a popliteal aneurysm the size of a large orange, extending up to the origin of the artery at the adductor magnus. The circulation of the leg was much interfered with, neither anterior nor posterior tibial arteries were felt, and the leg was ædematous; no disease could be detected in the other arteries. There was no history of injury, and the only fact suspicious of syphilis was that she had had three miscarriages by her second husband, who she said was not a "good man." Up to the last seven months, she had been used to sedentary occupations, but since then, owing to the husband being out of work. she had had to gain a living as a hawker, which necessitated her standing or walking for sometimes as long as eight hours. It is to this that she attributed the disease, probably with

some accuracy. The femoral artery was ligatured in Hunter's canal, and the patient left the hospital for a convalescent home in ten days. Now, six weeks after the operation, she remains perfectly well. The aneurysm is consolidated and circulation in the foot greatly improved, both anterior and posterior tibials being easily felt, and the ædema of the leg entirely gone.

Although we are told in the textbooks that aneurysms occur in females in the proportion of 1 to 13 exclusive of carotid and dissecting aneurysms, I can only find records of four cases of popliteal aneurysm in females, during the last

thirty years, in the literature at my disposal.

E. M. Hainworth, M.D., B.S.Lond., F.R.C.S.,
Assistant Surgeon, Hull Royal Infirmary.

# REPORTS

### MEDICAL AND SURGICAL PRACTICE IN THE HOSPITALS AND ASYLUMS OF THE BRITISH EMPIRE.

SHEFFIELD ROYAL HOSPITAL.

CASE OF MEMBRANOUS INFLAMMATION OF TONGUE AND MOUTH, WITH PRESENCE OF THE STAPHYLOCOCCUS PYOGENES AUREUS AND OTHER MICROCOCCI.

(Under the care of ARTHUR J. HALL, B.A., M.B.Cantab, M.R.C.P.)

[Notes by Edward W. Adams, M.B.Lond., House Physician to the Hospital.]

Mrs. J. H., aged 19, was admitted on December 31st, 1897, suffering from acute nephritis, during the course of which she developed well-marked double neuro-retinitis, with the history of which, however, we are not immediately concerned.

The first intimation of the oral affection came on the night of March 6th, 1898, when the patient complained of soreness of the right side of the tongue and cheek. In the morning the tongue was found to be distinctly, though not greatly, swollen, and more so as regards the right than the left half. A patch of whitish membrane, easily detachable, and leaving no ulceration, but merely a redness on removal, was seen about midway along the right border of the tongue. About the place where this would come into contact with the right cheek, was a similar patch. There was also a small circular patch about the size of a lentil on the inner surface of the lower right lip near the angle of the mouth. The breath was offensive, and there was salivation.

During the next few days the tongue increased greatly in size, the right half, however, always maintaining the lead. The patches became more extensive and spreading by continuity along the inner side of the anterior part of the tongue, and a similar patch keeping pace with this along the inner surface of the lip near the junction with the mucous membrane of the gum, the left border of the tongue was ultimately invaded. Salivation became excessive and the fætor of the breath very bad. No patches were seen on the fauces; there

was no difficulty in breathing and no dysphagia.

About a week from the commencement the tongue had so swollen as to fill the whole cavity of the mouth, and projected between the teeth to the extent of three quarters of an inch, or thereabouts. Movement of the organ very limited, and causing much pain. The swelling was firm and non-fluctuating. The patches increased in size, and became more fluctuating. The patches increased in size, and became more dirty-white than heretofore, while at the tip of the tongue a patch became converted into a gelatinous-looking mass. open the mouth was an impossibility.

The temperature, which was at first not raised above what was usual to the patient, now became somewhat heightened (remittent), but never reached above 101° F., which was on the fourteenth day of the affection. Externally there was considerable swelling about the face, especially of the lower lip, which was much thickened, and about the angles of the jaws, cheeks, and neck.

The affection having reached its acme, became stationary for a few days, when distinct improvement set in. The tongue of charpie, 155 gr.; maximum weight, 165 gr. The antiseptic agent used is corrosive sublimate, 1 in 1,000). Directions for use are printed upon both the outside and inside cover.

THE HEALTH OF THE ARMY AND THE FRONTIER OPERATIONS. THE inquiry into the causes which led to the invaliding of British soldiers during the late campaign and the consequent diminution of the strength of battalions on service has, says the Pioneer, proved to be most difficult. There is, however, only too good reason to suppose that venereal disease was at the bottom of the breakdown of many men who ought really never to have been sent into the field. The report will in due course be submitted to the Secretary of State for India.

THE NORTH WEST FRONTIER RISING IN INDIA.

THE Governor-General of India in Council publishes for general information a despatch from the Secretary of State, dated May 26th. The despatch speaks in the highest terms of the services rendered by all ranks during the campaign, the arduous nature of which is recognised. The Secretary of State has also sanctioned the issue of a gratuity to all officers and men engaged in the operations. A share of this gratuity is 24 rupees for British and 12 rupees for native soldiers, and is admissible to the heirs of those killed in action or who died of disease during the operations. Medical officers with the force participate as follows: Surgeon-Colonel, 4e shares; Brigade-Surgeon-Lieutenant-Colonel and Surgeon-Lieutenant-Colonel, 32 shares; Surgeon-Major, 16 shares; Surgeon-Captain 12 shares.

HONOURS FOR THE TIRAH EXPEDITION.

Our attention has been called to an error in the short statement of services of medical officers who obtained D.S.O.'s in the honours for the Tirah expedition, which appeared in the British Medical Journal of May 28th. We there noted that Surgeon-Lieutenant James H. Hugo was mentioned in Sir Bindon Blood's despatches as having "served with distinction throughout the defence of Chukdara." We are now informed that this service refers to Surgeon-Captain E. V. Hugo, a brother of Surgeon-Lieutenant J. H. Hugo; the latter officer was awarded a D.S.O. for services at Malakand, and not at the defence of Chakdara. It is noteworthy that Surgeon-Captain E. V. Hugo, I.M.S., although highly mentioned by Sir Bindon Blood in an after-despatch, is the only European officer who was in the Chakdara Fort during its defence who received no decoration. All the other officers obtained D.S.O.'s or a brevet, and the Junior Political Officer who was there a C.I.E. The omission to recognise Surgeon-Captain E. V. Hugo's services is strongly commented on by those who served on that part of the frontier.

THE VOLUNTEER MEDICAL SERVICE.

The recent army warrant dealing with the reconstruction of the Army Medical Service has given rise to the hope in some quarters that a corresponding alteration will ere long be made in the Volunteer Medical Service. With the view of discussing the position it is hoped that a meeting of volunteer medical officers may be held in Edinburgh during the meeting of the British Medical Association in that city. Further information will be obtained in the reception room.

HONOURS FOR THE FRONTIER WAR.

PUNJAB writes: Your correspondent, "Inquirer," asks why the Victoria Cross has not been granted to medical officers who were currently reported to have well earned it during the Frontier War. The following remarks may enlighten him: At the time the Chakdara Fort was relieved there were in the garrison four British officers—namely, two lieutenants in command of troops, a lieutenant acting as Political Officer, and a Surgeon-Captain. Major-General Blood recommended all of those officers for "favourable consideration," and mentioned that the Surgeon-Captain "served with distinction throughout the defence of Chakdara Fort. The result was the two Lieutenants were given the D.S.O., the Political C.I.E., and the Surgeon-Captain—nothing! All the officers who were concerned in the defence of that fort, except the Surgeon-Captain, have been either promoted or decorated. either promoted or decorated.

 $_{*}$  Our correspondent, "Inquirer" may well ask "Why?" We do not know why the Surgeon-Captain of Chakdara was invidiously treated, as stated; but if the facts are correctly given, there seems no doubt that he was so, and we should like to know whether the heads of his own department, backed up the recommendation of Sir Bindon Blood.

SURGEON-GENERAL (RETIRED) writes on the same subject: The non-recognition of acts of bravery by medical officers in the Frontier War is exciting bitter comment. Take the case of Surgeon-Captain Beyt, who saved the life of a wounded officer by carrying him and controlling hæmorrhage from an artery under a heavy fire. If such acts are to have no recognition young surgeons may well hesitate to share in the dangers of combatants.

Among those who received from the Queen at Windsor, on July 13th, the insignia of the division of the Third Class of the Order of the Bath (C.B.) was Surgeon-Lieutenant-Colonel and Commandant Arthur Trehern Norton, Volunteer Medical Staff Corps, the London Companies (Civil).

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are Dr. R. C. M. Page, Professor of General Medicine in the New York Policlinic Medical School and Hospital, sometime First Vice-president of the New York Academy of Medicine, and author of a work on Practice of Medicine and Physical Diagnosis; and Dr. Hugo Gerold, formerly Professor in the Medical Faculty of the University of Halle.

# MEDICO-LEGAL.

THE RISKS OF MEDICAL PRACTICE.

DR. SHERIDAN of Stradone, co. Cavan, was recently placed in a most unpleasant position. He was called to see a young woman, and proceeded to make a vaginal examination. While so engaged, the mother of the girl shut and locked the toor of the room, so that Dr. Sheridan could not get out, and he had to call to his servant out of the window to go for the police. On their arrival Dr. Sheridan was given into custody on the charge of rape charge of rape.

charge of rape.

He was brought before the Bailieboro Court of Petty Sessions upon the above charge on June 21st, when the magistrates present, having fully investigated the case, unanimously refused informations, the Chairman stating that all the magistrates agreed with him in saying Dr. Sheridan left the court without a stain upon his character. That their decision met with public approval is evidenced by the Nationalist and Unionist fife and drum bands of Stradone both turning out to welcome him on his return, a very remarkable incident in Ireland, where party feeling runs high. We also congratulate Dr. Sheridan on his acquittal from such a terrible charge. terrible charge.

DEATH FROM ACUTE PLUMBISM.

An inquest was held at King's Norton, near Birmingham, on July oth, on the body of a young married woman, the wife of a telegraph linesman. She had recently been temporarily insane, but recovered, and a few days afterwards died suddenly. Before death she informed he reighbours that she had, unknown to her husband, been taking diachylon made into pills to procure miscarriage. Dr. Crooke said the woman died from acute lead poisoning. Diachylon contained a large proportion of white lead. The poison at first accumulated in the system, and then exploded, as it were, with these fatal symptoms. A verdict in accordance with this evidence was returned.

CHARGE OF PROCURING ABORTION.

JOHN LLOYD WHITMARSH, registered as L.S.A.Lond., 1871, L.R.C.P.Edin., 1872, was arrested on June 5th on a charge of performing an operation upon a young woman named Alice Bailey, of Plumstead, with intent to procure a miscarriage. The woman was admitted into Charing Cross Hospital about a fortnight before her death, which took place on July 16th. The prisoner was formally charged at the Westminster Police-court on July 17th, and after formal evidence had been given the magistrate remanded the prisoner for eight days, refusing bail, and certifying for legal aid.

aid.

Mr. Troutbeck, coroner, opened an inquest into the case on July 12th.
After the mother of the deceased had given evidence, the inquiry was
adjourned until July 18th.

The entry in the Medical Directory, which has been copied into several
newspapers, states that the accused is a member of the British Medical
Association. This is incorrect, as he has not been a member of the
Association since 1889, when his name was removed from the list of
members for arrears.

POSITION OF COMMITTEE OF PERSON AND ESTATE OF LUNATIC. CONSTANT desires to know the position of a committee (of person and property) in relation to the Lord Chancellor's Visitors in Lunacy, and whether the committee is entirely under their orders, or has by law independent powers. dependent powers

\*\* The duties of the Chancery Visitors are principally directed to inquiries and investigations as to the care and treatment and mental and bodily health, and the arrangements for the maintenance and comfort and otherwise, of the lunatic; and whether the lunatic is maintained in a suitable and proper manner, having regard to the existing amount of the allowance ordered to be paid, and the existing scheme approved for his maintenance. The Visitors make reports on these subjects to the Board of Visitors, which the Board consider, and if they think fit refer to the Masters to take such steps thereon as may appear to them expedient. The Masters thereupon investigate the matters reported upon, and have power, if they deem it expedient, to summon the Committee of the person or estate before them to give explanations thereon. The Committee of the estate has certain powers which he can exercise at his discretion, and others which have to be exercised under the direction of the Masters. The Committee of the person and estate should look carefully at the bond which he has been called upon to execute. Space will not allow of our going into detail on the questions raised, but it will appear from the foregoing that the Committee is not under the orders of the Visitors in the sense to which we think the question has reference, although it would be desirable to bear in mind any suggestions the Visitors may make.

# UNIVERSITIES AND COLLEGES.

UNIVERSITY OF EDINBURGH.

The CALENDAR.—The University Calendar for 1898-99 has just been issued. The first thing that strikes one is its increase in bulk—870 pages against 876 in the previous issue. Examination papers are mainly responsible for the increase. Curiously enough, "The Bruce and John Usher Chair of Public Health" is not alluded to among the new foundations, though there are side references to it in various other parts of the Calendar. The available funds appear now to be some £25,000. It is believed that the University Court will on Monday next, July 18th, proceed to the appointment of the first professor to the new chair. Most of the changes

intimated have already been reported in the columns of the British

intimated have already been reported in the columns of the British Medical Journal.

The McCosh Bursaries.—The regulations for the McCosh Graduates' Bursary and the McCosh Medical Bursary now first appear. Each Bursary is to be tenable for one year, during which the holder must prosecute study or research in a medical school or medical schools of Europe. The Faculty of Medicine may award both bursaries to the same person. The applicants are to indicate the school or schools, the time proposed to be spent, and the nature of the study or special work to be engaged in. Bachelors of Medicine and Bachelors of Surgery shall be eligible for appointment during one year after receiving these degrees. The holders must send a three-monthly report to the Dean. The sum of £5,115 is available for endowment of the "McCosh Graduates' Bursary". Medicine; and the sum of (?) £375 for the "McCosh Medical Bursary."

The MOUAT SCHOLARSHIP.—By a bequest of the late Dr. John Frederick M. Mouat of £1,831, the already existing endowment of the "Mouat Scholarship" in Practice of Physic benefits to the extent of that sum. Graduation to Erremonial.—The present summer session ends on Friday, July 15th. The graduation ceremonial, instead of taking place as usual on the first available or lawful day in August, has, in connection with the Edinburgh meeting of the British Medical Association, been fixed for Saturday, July 30th, when honorary degrees will be conferred on several of the notable visitors then in Edinburgh. The names have not yet been made public.

not yet been made public.

UNIVERSITY OF ABERDEEN.

THE University Court of the University of Aberdeen has appointed the following to be additional examiners for degrees, each for a period of four years, from February 1st ensuing, namely:—Botany: J. Reynolds Green, D.Sc., F.R.S., Cambridge. Chemistry: John Shields, D.Sc. Edin., London. Medical Jurisprudence and Public Health: William Leslie Mackenzie, M.A., M.D., Medical Officer of Health, Leith.

ROYAL COLLEGE OF PHYSICIANS OF IRELAND.

At a stated meeting of the College, held on July 8th, R. Travers Smith,

M.D., was admitted as Member, and A. Cooper Fenn, L.S.A., as
Licentiate.

CONJOINT BOARD IN ENGLAND.

THE following gentlemen have passed the Second Examination of the Board in the subjects indicated:

Anatomy and Physiology.—A. S. Grimwade, Melbourne University and St. Thomas's Hospital; T. W. H. Downes and J. Walker, St. Thomas's Hospital; W. M. Robson, S. S. H. Shannon, R. P. Marshall, G. B. Churchill, F. M. M. Ommanney, Guy's Hospital; A. J. Courzens, C. L. Traylen, and F. J. Trimmer, London Hospital; W. G. Paget, G. M. Sedgrove, C. E. Hogan, L. E. Hughues, and V. G. Hesseltine, St. Bartholomew's Hospital; G. W. Curtis, G. F. Rugg, and F. E. Bolton, University College, London; J. McB. Ross, Melbourne University and St. Mary's Hospital; J. C. G. Kunhardt, St. Mary's Hospital; A. R. Fortescue Hubbard, Charing Cross Hospital; L. W. Shadwell, St. George's Hospital; G. P. Young, King's College, London; F. C. Jobson, Westminster Hospital; R. M. Carter, W. E. Houlbrook, K. Hart-Reeds, and J. W. S. Seccombe, St. George's Hospital; T. S. Dudding, London Hospital; J. H. Wroughton, and V. J. Duigan, St. Bartholomew's Hospital; S. H. C. Bent and F. W. Smith, Guy's Hospital; E. E. Semmence, Edinburgh University and St. Thomas's Hospital; E. E. Semmence, Edinburgh University and St. Thomas's Hospital; E. A. Houchin, Middlesex Hospital.

ROYAL COLLEGE OF SURGEONS IN IRELAND.

MR. HENNESSY, L.R.C.S. and P.I., having passed the necessary examination, has been admitted a Fellow of the College.

SOCIETY OF APOTHECARIES OF LONDON.

PRIMARY EXAMINATION, PART II.—The following candidates have

PRIMARY EXAMINATION, PART II.—The following candidates have assed in:

Anatomy.—H. H. Beale, St. Mary's Hospital; A. E. Brown, Royal Free Hospital; P. J. R. Bucknill, Manchester; P. C. Burgess, Middlesz Hospital; P. J. R. Bucknill, Manchester; P. C. Burgess, Middlesz Hospital; P. J. R. Burton, Royal Free Hospital; E. A. Dunn, Royal Free Hospital; S. de Carteret, St. Bartholomew's Hospital; C. D. A. Dowman, St. Bartholomew's Hospital; E. A. Dunn, Royal Free Hospital; J. C. Furness, Charing Cross Hospital; A. E. Gilford, Royal Free Hospital; R. Gillett, Royal Free Hospital; H. M. O. Jones, Royal Free Hospital; R. Gillett, Royal Free Hospital; G. L. Mandl, Edinburgh; L. S. Molony, Royal Free Hospital; F. M. Payne, Royal Free Hospital; W. Roper, Edinburgh; P. G. Sheppard, Cambridge and Liverpool; A. D. Sibree, Royal Free Hospital; P. S. Stokes, Sheffield; M. E. Unwin, Royal Free Hospital; G. H. Watson, St. Bartholomew's Hospital.

Physiology.—J. M. Anderson, Aberdeen; A. E. Brown, Royal Free Hospital; P. J. R. Bucknill, Manchester; T. M. Burton, Royal Free Hospital; P. J. R. Bucknill, Manchester; T. M. Burton, Royal Free Hospital; E. Courtauld, Royal Free Hospital; E. N. de V. Dawson, St. Thomas's Hospital; S. de Carteret, St. Bartholomew's Hospital; C. D. A. Dowman, St. Bartholomew's Hospital; E. A. Dunn, Royal Free Hospital; A. B. Edwards, St. Bartholomew's Hospital; J. C. Furness, Charing Cross Hospital; A. E. Gilford, Royal Free Hospital; A. B. Edwards, St. Bartholomew's Hospital; J. C. Furness, Charing Cross Hospital; F. M. O. Jones, Royal Free Hospital; A. B. Edwards, St. Bartholomew's Hospital; P. J. C. Furness, Charing Cross Hospital; F. M. Payne, Royal Free Hospital; A. F. Reardon, St. Thomas's Hospital; W. Roper, Edinburgh; P. G. Sheppard, Cambridge and Liverpool; A. D. Sibree, Royal Free Hospital; A. Whitby, Dublin; F. E. D. Woodroffe, Edinburgh, M. E. Unwin, Royal Free Hospital; G. H. Watson, St. Bartholomew's Hospital; A. Whitby, Dublin; F. E. D. Woodroffe, Edinburgh.

PRIMARY

Biology.-A. B. Gosse; E. M. Handley, Royal Free Hospital; M. S.

Biology.—A. B. Gosse; E. M. Handley, Royal Free Hospital; M. S. Jevons.
Chemistry..—G. M. Crockett, Royal Free Hospital; K. A. Dawson, Royal Free Hospital; A. B. Gosse, M. E. Martin, Royal Free Hospital; F. Murray, Royal Free Hospital; W. A. C. Niven; A. U. Parkhurst. Cardiff; T. G. Prosser, Royal Free Hospital; L. G. Simpson, Royal Free Hospital; A. Whitby, Dublin.
Materia Medica and Pharmacy.—K. A. Dawson, Royal Free Hospital; L. Demergue, Paris; L. Denny, Royal Free Hospital; P. T. Goodman, St. Thomas's Hospital; R. A. Lyster, Birmingham; F. H. Maberley, Birmingham; C. J. Marsh, University College Hospital; C. G. Meade, St. Bartholomew's Hospital; H. R. Miller, Guy's Hospital; F. Murray, Royal Free Hospital; A. U. P. Parkhurst, Cardiff; L. K. Tickner, Durham; A. Whitby, Dublin.

# PUBLIC HEALTH

### POOR-LAW MEDICAL SERVICES.

POOR-LAW MEDICAL SERVICES.

ENGLISH URBAN MORTALITY IN THE SECOND QUARTER OF 1898. [SPECIALIX REPORTED FOR THE BRITISH REDICAL JOURNAL.]

THE vital statistics of the thirty-three large English towns dealt with by the Registrar-General in his weekly returns are summarised in the accompanying table. During the three months ending June last \$3,933 births were registered in these thirty-three towns, equal to an annual rate of 30.0 per 1.000 of their aggregate population, estimated at 11,218,276 per 1.000, while it averaged 30.7 in the thirty-three towns, equal to an annual rate of 50.0 per 1.000 respectively. In London the birth-rate last quarter was \$3.5 per 1.000, while it averaged 30.7 in the thirty-three provincial towns, among which it ranged from 21.3 in Halliax, 22.1 in Huddersfield, 24.0 in Bradford, and 24.8 in Croydon to 35.0 in Wolverhampton, 35.3 in Salford, 35.6 in Gateshead, and 37.4 in Sunderland.

35.7 in Gateshead, and 37.4 in Sunderland.

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35.7 in the thirty-two large provincial towns, among which it ranged from 11.7 in Croydon, 12.1 in West Ham, 12.5 in Cardiff, 12.2 in Brighton, and 14.7 in Burnley, 10 20.0 in Manchester, 20.1 in Gateshead, 20.2 in Sunderland.

35.6 in Liverpool, 20.2 in West Ham, 12.5 in Cardiff, 12.7 in Brighton, and 12.7 in Liverpool, 22.1 in Sulford, 28.6 in Hallian, and 28.7 in Newcastle-upon-Tyne. The 5.675 deaths referred to the principal symbotic diseases, unled to the hirty-three towns last quarter included 5.2.9 in Blackending to 12.6 in Liverpool, 22.1 in Sheffeld, 22.4 in Salford, 28.8 in Hall

the Metropolitan Asylum Hospitals during last week were 152, agains 132, 125, and 119 in the three preceding weeks; and 1,006 cases under treatment in these hospitals on Saturday last, July 9th.

NURSING IN WORKHOUSES

NURSING IN WORKHOUSES.

At the Northern Poor Law Conference held at Gilsland on July 12th, Dr. Rhodes read a paper on this subject. Dr. Rhodes's views on this question are so well known that we need not repeat them. Summed up they emphasise the necessity for good nursing for the sick poor, and at the same time he warns the guardians that good nursing costs money, and more than that, thought, time. and trouble, must be expended in this cause. But—and this should be laid to heart, not only by officials, but by every ratepayer who grudges the necessary outlay—Dr. Rhodes says, "In fact, unless you have satisfactory nursing you are wasting the ratepayers' money to no purpose." Medical skill, drugs, treatment, all are ineffective without the skilled nurse to apply them. Happily the skilled nurse in the workhouse infirmary is more or less the rule by day, but the night nursing is lamentably deficient, and here Dr. Rhodes quotes from Mr. Baldwin Fleming, Poor-law Inspector, who says "nothing can be more inconsistent than to make full arrangements for good day nursing and to hesitate to do the same for night work.....as a matter of fact the good work of the day is often spoilt by the bad work of the night."

METROPOLITAN ASYLUMS BOARD.

SIR EDWIN GALSWORTHY presented his annual report as Chairman of the Metropolitan Asylums Board at an ordinary meeting of the managers held on June 19th. The chief work of the past year has been the opening of the Park Hospital and the building of the Grove Hospital, and of the diphtheria pavilions at the Western Hospital. When the latter work is completed the Board will have increased its available beds by 1,12, thus raising the accommodation at their disposal to 5,177. Eventually this number will be raised to over 6,000 by supplementary beds for 720 patients at the proposed Southern Convalescent Hospital, and by 128 additional beds at the North-Eastern Hospital, which will be available when the reconstruction scheme is carried out.

For the past year London has enjoyed its previous immunity from small-pox, while the number of cases of infectious disease notified under the Public Health Act during 1897 was 45,417, as against 49,708 in 1896. The long-delayed scheme for the infirmary for 750 imbeciles at Tooting has received the approval of the Local Government Board. Not the least interesting phase of the Board's work during the past twelve months has been the providing for the relief of certain classes of afflicted children, whose relief had previously fallen upon the several metropolitan Boards of Guardians. The results of their work in this direction has been a determination to provide isolation accommodation for about 800 children suffering from ringworm.

POTABLE WATER AT POCKLINGTON.

What we are told was a much-appreciated lecture was given to the Pocklington and Derwent District Agricultural Societies recently by Mr. Leadman, of Pocklington, on "Water Fit to Drink." As was perhaps to be expected from an antiquarian, reference to the ways in regard to these matters of the ancient Egyptians, of the Greeks, of the Romans, was not omitted. An important part of the paper, however, consisted in pointing out the dangers of contaminated waters. The lecture, to judge from the report which has reached us, was of a somewhat familiar and conversational character, and therefore more likely to be followed by the audience to whom it was addressed than a more formal and systematic treatise upon the subject. The general character of the waters from the several geological strata of the East Riding was indicated. The practice of getting medical men to lecture to the lay public on health subjects is every way to be commended. Unfortunately, in many places, the public prefer ignorance and bliss.

TRAMP-SPREAD SMALL-POX.

DR. WYNDHAM RANDALL, the health officer of Bridgend, records the instance of a man having been admitted from the tramp ward to the worknouse, and there found to be suffering from small-pox. Despite the fact that he was next day admitted to the small-pox hospital, after an interval of eleven days an immate of the "house" was found to be ill of small-pox, and two days later another inmate developed the disease. Neither of these latter had been revaccinated prior to infection by small-pox, and only one of them afterwards. The case is also mentioned of a "district surveyor" contracting small-pox in the act of disinfecting a house; and the question arises why this official was not revaccinated in view of his occupation.

WATER ANALYSES BY HEALTH OFFICERS.

D.P.H. AND M.O.H.—It will be found that the task of making an ordinary qualitative analysis of water on the part of a medical officer of health is not one imposed upon him "outside his official duties" as prescribed, but rather that the matter is one which falls within his province, and has to do with the discharge of his duties under the requirements of the regulations which govern his office. That the salary doled out to the officer is frequently only a paltry pretence at payment is too true; but this does not alter the scope of the multifarious demands which a local authority may legally make upon an ofttimes underpaid officer.

St. Patrick's (Swift's) Hospital, Dublin.—The governors of St. Patrick's Hospital have recently acquired a valuable addition to their resources. By the purchase of a large house and grounds at Lucan they have the means of establishing a country convalescent home, which ought to prove of great value to the parent institution. It will be remembered that there are in Scotland several institutions where the great value of Nature is recognised, notably the Royal Crichton Asylum, Dumfries.

### MEDICAL NEWS,

An Association of Medical Practitioners has recently been established in Portugal. The new association already has a membership of more than 200.

THE UNITED STATES PHARMACOPCEIA.—In May, 1900, the eighth decennial Convention for the revision of the *United* States Pharmacopæia will be held in Washington. All medical colleges and State medical societies will be invited to send delegates.

DENTISTS FOR THE AMERICAN NAVY.--Mr. Otey, the representative of Virginia, has introduced a Bill into the United States Congress providing for the appointment of a brigade dentist for each brigade, with the rank of major, and one for each regiment, with the title of captain.

At the general meeting of the British Balneological and Climatological Society, Dr. Fortescue Fox (Strathpeffer Spa) was elected President, Dr. Samuel Hyde (Buxton) Chairman of Council, and Mr. H. Shirley-Jones (Droitwich) and Dr. Septimus Sunderland (London) Honorary Secretaries.

A Boy who had fallen into the Thames at a point opposite the Tate Gallery was gallantly rescued from drowning on July 12th by Dr. Nitch-Smith. There were no steps down the Embankment at the point, and Dr. Nitch-Smith had to climb the wall and drop a distance of 20 feet into the shingle. The boy, who was almost dead, was resuscitated by Dr. Nitch-Smith, with the assistance of some workmen, and was removed to the Westminster Hospital.

THE NIGHTINGALE FUND.—The report of the past year's work of the Nightingale Fund shows that the excellent work which the association has accomplished in previous years is being continued. Since the opening of the school at St. Thomas's Hospital in 1860, no fewer than 1,452 candidates have been admitted, of which number 864 have, after completing a year's training, received appointments either in St. Thomas's or some other hospital. The long list of appointments received by former probationer-nurses during the year —including several matronships in provincial hospitals and other posts of equal responsibility—is the best testimony that could be paid to the character of the training given and the esteem in which it is held.

THE PURIFICATION OF THE THAMES.-Mr. Gough, Secretary of the Thames Conservancy Board, stated in the course of a speech at the annual dinner of the Epidemiological Society of London, held on June 24th, that the increased jurisdiction which the Conservancy Board now possessed had enabled them to bring about a very marked reduction in the pollution of the river. It had been shown that immediately above the intakes of the water companies the amount of organic impurity dissolved in the water was only two-thirds of that which obtained prior to 1894. Mr. Gough added that the Conservators were now bringing strong pressure to bear upon such authorities as are still in default.

The annual report of the Council of Epsom College shows that the school has continued to make most satisfactory progress, and that the number of university distinctions gained was in excess of the record of any previous year. As an evidence of the affection which Epsom is capable of arousing, it may be mentioned that Mr. P. H. Maddock, an assistant master who died recently, bequeathed a sum of £500 to the College to be used for its benefit in such a manner as the Governors might think fit. Mr. Maddock also left his pictures and books to the school and his valuable entomological collection has been presented to the College museum by his

THE CONTINENTAL ANGLO-AMERICAN MEDICAL SOCIETY .-This Society has decided to hold a special meeting on the occasion of the visit of the British Medical Association to Edinburgh. The gathering will take the form of a luncheon, to which members may invite their friends, to be held at the Balmoral Hotel on Wednesday, July 27th, at 1.15 P.M. The annual meeting of the Society will, as usual, be held in Paris in the autumn, and the meeting in Edinburgh will not con-cern itself with business, but will be entirely of a social character. Members who intend being present at the luncheon

would greatly facilitate arrangements if they would kindly intimate their intention to the honorary secretaries, at the same time mentioning how many places they wish reserved for guests. The secretaries for the luncheon are Drs. Geo. Bull and StClair Thomson, 28, Queen Anne Street, London, W.

International Congress of Applied Chemistry.—The third International Congress of Applied Chemistry will be held in Vienna from July 28th to August 2nd. In the Section of Pharmaceutical Chemistry the following questions among others will be discussed: A proposal to introduce into all *Pharmacopæias* and supplements to *Pharmacopæias* statements of the physical and chemical properties, and of the qualities requisite to establish the purity, of substances; a proposal to introduce for all countries not only uniform methods for the preparation of heroic remedies, but the employment of uniform standards to determine the potency of medicaments; a proposal to introduce uniform methods of determining the amount of active substances contained in surgical dressings; the nature of the analytical researches to be employed for estimating the value of new serumtherapeutic preparations, and the precautions to be taken before such preparations are recognised as suitable for use in medical practice; and the general qualities requisite in medicinal wines.

Presentation.—Recently, upon the occasion of his leaving Bromley, Kent, where he has practised for the past thirty years, Dr. W. T. Beeby was the recipient of a handsome chronograph gold watch and chain, and to Mrs. Beeby was presented a gold bracelet with a centre of pearls. Mr. Tindal Atkinson made the presentation in the name of a large body of subscribers, and at the same time handed to Dr. Beeby a cheque for ten guineas and a handsome album containing an address inscribed on vellum and the names of the subscribers. Mr. Atkinson, Mr. Mullen, Dr. Chatterton, the Rev. J. White, and Major C. Satterthwaite all made most kindly remarks respecting Dr. and Mrs. Beeby, Dr. Chatterton especially dwelling on the excellent feeling of comradeship and respect entertained for Dr. Beeby by all the medical men of Bromley and the neighbourhood. Dr. Beeby, in reply, thanked his many friends for their handsome gifts.

READING DISPENSARY.—The annual report of this dispensary for the year 1897, presented to the annual general meeting of 1898, shows that the dispensary is conducted mainly on provident lines, but that a respectable income from funded property permits the association of a certain amount of charity. To the provident branch there are more than 18,000 subscribers, or about one-fourth the population of the town; of these, about 2,500 joined during the year under consideration. Two points in the management of the dispensary which appear to call for special attention are the arrangements made by it for the performance of vaccination and for attendance upon midwifery. The former is paid for out of the funds of the dispensary, so that the children of subscribers obtain the benefit of free vaccination by their regular medical attendants. As a result the percentage of vaccinations to births is far higher among such children than in the rest of the population. With regard to confinements, midwives are engaged by the Committee, who are bound in cases of difficulty to call in one of the medical officers to the dispensary, who receives a moderate fee from the institution. This arrangement appears to have worked fairly well. The governors hope that with increased support district nurses may be provided, and that eventually the benefits of the provident system may be extended by the establishment of a convalescent home.

Brussels Medical Graduates' Association.—The annual meeting of this Association was held at the Café Royal, Regent Street, on July 12th. Dr. A. W. Thomas was elected President for the year in succession to Dr. C. T. Brookhouse, and Drs. Younger and Major Greenwood were re-elected to their respective posts of Treasurer and Honorary Secretary. The following gentlemen were elected Members of Council: Drs. Gabe, Achard, Snape, Naumann, Wunderlich, Haydon, Eady, Walter Smith, Edwards, and Vicars. Dr. Charles Burland was elected Vice-President, and the Honorary Secretary, in presenting the balance sheet, pointed out the satisfactory financial condition of the Association and its general

progress. After the meeting the members and their friends, to the number of 60, dined together and spent a very pleasant evening. Among the guests were Dr. F. Roberts, Dr. Heron, Mr. Joseph Smith, Mr. George Brown, Dr. Clement Godson, Mr. Howard Marsh, and Dr. Morgan Dockrell.

Appointments under the Workmen's Compensation Act.—The following gentlemen have been appointed to act as medical referees under the Workmen's Compensation Act: Dr. R. J. Banning (Shoeburyness) for County Court Circuit No. 38, Districts of Hertford, Edmonton, Grays, Thurrocks, Romford, Southend, and Waltham Abbey; Dr. G. Stokes Hatton (Newcastle, Staffs) for the districts of Longton, Stoke-on-Trent, Hanley, Burslem, Tunstall, and Newcastle-under-Lyne; Dr. J. Munro Moir (Inverness) for the district of the county of Inverness (mainland); Dr. E. S. Watling (Mansfield) for County Court Circuit, No. 18, comprising Nottingham, Newark, Mansfield, and Bingham; Mr. F. Faulder White (Coventry) for County Court Circuit No. 22; Dr. R. Wilson (Alloa) for the district of the county of Clackmannan, and to act when required in the Sheriffdom of Stirling, Dumbarton, and Clackmannan; Dr. J. Woodman and Dr. Raglan Thomas (Exeter) for the Exeter district.

OPHTHALMOLOGICAL SOCIETY OF THE UNITED KINGDOM.—At the meeting of this Society, held on July 8th, the following gentlemen were elected officers and members of the Council for the session 1898-99:—President: H. R. Swanzy. Vice-Presidents: Sir W. R. Gowers, M.D., F.R.S.; D. Argyll Robertson, M.D. (Edinburgh); R. Marcus Gunn; R. Williams (Liverpool); E. Nettleship; Henry Eales (Birmingham); \*W. A. Brailey, M.D.; \*Priestley Smith (Birmingham); \*F. R. Cross (Clifton); \*George Cowell. Treasurer: \*John Abercrombie, M.D. Secretaries: James Taylor, M.D.; \*E. Treacher Collins. Librarian: W. Adams Frost. Other Members of Council: Arthur P. L. Wells; L. H. Tosswill (Exeter); C. E. Glascott, M.D. (Manchester); Arthur W. Sandford, M.D. (Cork); Charles J. Oldham (Brighton); Howard H. Tooth, M.D.; W. A. Turner, M.D.; G. E. Wherry, M.B. (Cambridge); S. H. Habershon, M.D.; \*J. B. Lawford; \*W. J. Cant (Lincoln); \*Sydney Stephenson. The gentlemen whose names are marked with an asterisk (\*) were not in the Council, or did not hold the same office, during the preceding year.

UNITED HOSPITALS ATHLETIC SPORTS.—The thirty-second annual athletic meeting in connection with the United Hospitals Athletic Club was held at the L.A.C. Grounds at Stamford Bridge on Saturday afternoon, July oth. There was a good attendance. Of the twelve events which constituted the programme, eleven were in competition for the Challenge Shield, which went to St. Mary's with five events to their credit, Guy's and St. Bartholomew's scoring two firsts and St. George's and Middlesex one each. More than one existing record was broken, H. B. Butler improving on the half-mile time, while C. E. H. Leggatt, the ex-champion jumper, beat his previous best, 5 ft. 7 in. by a quarter of an inch. The hurdles were easily won by W. M. Fletcher, the old Cambridge blue, who also brought off the hammer, only failing to beat the existing record of 102 ft. 6 in. by half a foot. This is the third year that St. Mary's has won the shield. The 100 Yards Challenge Cup was won in 103 sec. by a yard by F. W. Sime, Guy's, while the half mile remained with A. G. Butler, the present holder of the record (2 min. § sec. in 1895). Butler had the race in hand from the start and won in 1 min. 9 sec. by half a dozen yards, thus creating a fresh record. G. E. Orme, St. George's, put the weight 34 ft.—4 ft. 3 ins. short of the record. F. Sime, Guy's, won the 220 yards by a good yard, which he had maintained all the way; and A. C. Oakley, Middlesex, getting the lead 200 yards from home, won the mile by a dozen yards in 4 min.  $48\frac{3}{5}$  sec. In the  $1\frac{1}{2}$  mile invitation handicap, Munn started very lame, and retired after going a mile. Bennett took the lead early in the fifth lap, and won easily by fully 100 yards. Had Bennett anyone to take him along in the last quarter, he would undoubtedly have beaten the record; as it was, be was ‡ sec. outside, his time being 6 min. 54‡ sec. The ¼ mile A. G. Butler, St. Mary's, won by a good yard in 523 sec., which victory won the shield for St. Mary's. In a slow-run race, R. C. Leaming, St. Mary's, won the 3 miles in 16 min. 73 sec.

Scientific Prizes.—The Istituto Veneto di Lettere, Scienze ed Arti has awarded the three Balbi-Valier prizes, which are of the value of £120 each, respectively to Senator Durante, Professor of Surgery in the University of Rome, for his treatise on General Special Surgical Pathology and Treatment; to Professor Boschetti for his work on "Tremulotherapy"; and Professor Emilio Cavazzani, Lecturer on Physiology and Pharmacology in the University of Ferrara, for his researches on the Thermogenesis, Glycogenesis, and Circulation of the Fœtus.

#### MEDICAL VACANCIES.

- The following vacancies are announced:

  BIRMINGHAM GENERAL HOSPITAL—House-Physician. Salary, £70 per annum, with residence, board, and washing. Applications to the House Governor by July 30th.

- sith.

  BISHOP'S STORTFORD UNION.—Medical Officer and Public Vaccinator for the Pelhams District. Salary, £35 per annum. Applications to the Clerk by July 25th.

  BOURNEMOUTH: BOSCOMBE HOSPITAL.—House-Surgeon. Salary, £60 per annum, with board, lodging, and washing. Applications to the Secretary by July 23th.

  BRENTFORD UNION.—Assistant Medical Officer for the New Infirmary, unmarried. Salary, £100 per annum, with turnished apartments, rations, washing, etc. Applications, on forms provided, to the Clerk, Union Offices, Isleworth, W., by July 20th.

  BRIGHTON, HOVE, AND PRESTON DISPENSARY, Queen's Road, Brighton.—House-Surgeon for the northern branch, unmarried. Salary, £140 per annum, with furnished apartments, coal, gas, and attendance. Applications to the Honorary Secretary before August 17th.

  BUSTOL: UNIVERSITY COLLEGE—Demonstratorship of Physiology. Stipend £125.

- spartners, coat, gas, and attendance. Applications to the Honorary Secretary income August 17th. VERSITY COLLEGE—Demonstratorship of Physiology. Stipend, £125. Applications to Dr. E. Markham Skerritt, Dean, by July 21st.

  BUXTON: SYONSHIRE HSPITAL—Hone-Surgeon and Assistant House-Surgeon. 20th and £30 per annum rearbitely. Thermished apartments, board, and weaking. Applications to the Secretary by July 20th.

  CAEDIFF: UNIVERSITY COLLEGE OF SOUTH WALES AND MONMOUTHSHIRE—Assistant Lecturer and Demonstrator in Anatomy. Stipend, £120 per annum. Temporary Assistant Lecturer and Demonstrator in Physiology for one year. Salary, £120. Applications to the Registrar by July 30th.

  DENTAL HOSPITAL FOR LONDON AND LONDON SCHOOL OF DENTAL SURGERY, £120. Leicester Square. Demonstrator. Honorarium, £50 per annum. Applications to the Dean by July 18th.

  DORCH ESTER: COUNTY ASYLUM.—Second Assistant Medical Officer, not over 30 years
- DORCHESTER: COUNTY ASYLUM.—Second Assistant Medical Officer, not over 30 years of age. Salary, £130, rising to £160. Applications to the Medical Superintendent by July 20th.

- of age. Salary, £130, rising to £160. Applications to the Medical Superintendent by July 20th.

  EYELINA HOSPITAL FOR SICK CHILDREN, Southwark, S. E.—Surgeon to out-patients. Applications to the Committee of Management by July 2nd.

  GLASGOW UNIVERSITY.—Lecturer on Materia Medica and Therapeutics. Salary, £150 per annum. Applications to the Secretary of the Court by July 20th.

  GERAT NORTHERN CENTRAL HOSPITAL, Holloway Road, N.—Junior House-Surgeon. Appointment for six months. Board, lodging, and washing provided. Applications to the Secretary by July 18th.

  GUY'S HOSPITAL MEDICAL SCHOOL.—Lecturer on Biology. Applications to the Treasurer by July 23rd.

  HALIFAX: ROYAL INFIRMARY.—Assistant House-Surgeon, unmarried. Salary, £50 per annum, with an extra allowance of £9 2s. 6d., with residence, board, and washing. Applications to the Secretary by July 20th.

  HASTINGS, ST. LEONARDS, AND EAST SUSSEX HOSPITAL.—Assistant House-Surgeon. No salary, but residence, board, and laundry provided. Applications to the Secretary by July 27th.

  HOSPITAL FOR WOMEN, Soho Square, W.—Registrar. Honorarium, 25 guineas. Applications to the Secretary by July 18th.

  HUDDERSFIELD INFIRMARY.— Assistant House-Surgeon. Also Second Assistant House-Surgeon Salary, £50 and £40 respectively per annum, with board, residence, and washing. Applications to the Secretary by July 18th.

  LONDON HOSPITAL MEDICAL COLLEGE.—Lectureship on Public Health. Applications to the to the Warden.
- CONDON HOSPITAL MEDICAL COLLEGE.—Lectureship on Public Health. Applications to the Warden.

- LONDON HOSPITAL MEDICAL COLLEGE.—Lectureship on Public Health. Applications to the Warden.

  MANCHESTER: OWENS COLLEGE.—Senior and Junior Demonstrator in Physiology. Stipends, £150, rising to £200; and £100, rising to £150 respectively. Applications to the Registrar by July 18th.

  MANCHESTER: OWENS COLLEGE.—Demonstrator of Anatomy. Applications to the Registrar by August 1st.

  MANCHESTER ROYAL EYE HOSPITAL.—Junior House-Surgeon. Salary, £70 per annum, with residence, board, and washing. Applications, endorsed "House-Surgeon," to the Chairman of the Board of Management by July 25th.

  MARGATE: ROYAL SEABATHING HOSPITAL.—Resident Surgeon. Salary, £100 per annum, with board and residence. Applications to the Secretary at the offices, 30, NOTINGHAM GENERAL DISPENSARY.—Senior Resident Surgeon. Salary, £170, with furnished rooms. Also Clinical Assistant for six months. Salary, £300, with furnished rooms. Applications to the Secretary.

  QUEEN'S JUBILEE HOSPITAL, Earl's Court, S.W.—House-Surgeon. Rooms and honorarium of £2.2 weekly. Applications to the Secretary by July 18th.

  ROYAL FREE HOSPITAL, Gray's Inn Road, W.C.—House-Physician. Appointment for six months. Board, etc., provided. No salary. Applications to the Secretary by July 18th.

- STANDAMS. DORIG. etc., provided. No salary. Applications to the Secretary by July ST. ANDREWS UNIVERSITY.—Professors of Materia Medica and Pathology. Applications to the Secretary of the University Court by August 31st.

  SALISBURY INFIRMARY.—Assistant House-Surgeon. Honorarium of £10 at end of six months' service, with board, lodging, and washing. Unmarried. Applications to the Secretary by July 38th.

  WAKEFIELD: WEST RIDING ASYLUM.—Pathologist. Salary, £150, increasing to £200. Applications to the Medical Director.

  WEM RURAL DISTRICT COUNCIL.—Medical Officer of Health. Salary, £50 per annum. Applications to the Clerk, 37, High Street, Wem, by July 20th.

  WESTERN GENERAL DISPENSARY, Stafford Street, Marylebone Road.—House-Surgeon, unmarried. Salary, £60 per annum, with board and residence. Applications to the Hon. Secretary by July 18th.

- WESTERN GENERAL DISPENSARY, Stafford Street, Mem, by July 20th.

  WESTERN GENERAL DISPENSARY, Stafford Street, Marylebone Road.—House-Surgeon, unmarried. Salary, £50 per annum, with board and residence. Applications to the Hon. Secretary by July 18th.

  WEST HAM UNION.—Assistant (Resident) Medical Officer for the Workhouse and School. Salary combined, £125 per annum, with usual residental allowances. Applications, on forms provided, to the Secretary by July 27th.

  WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL.—Assistant House-Surgeon. Board, lodging, and washing. Applications to the Chairman of the Medical Committee by July 18th.

  WORCESTERSHIRE for six months. Applications, endorsed "County Analyst." to the Oleri, Shirehall, Workster, by August 18th. Applications, endorsed "County Analyst," to the Oleri, Shirehall, Workster, by August 18th.

  YORK GUNTY HOSPITAL.—Assistant House-Surgeon. Salary, £60 per annum, with board, rooms, washing, etc. Applications to the Secretary by July 20th.

  YORK DISPENSARY.—Resident Medical Officer, unmarried. Salary, £150 a year, with furnished apartments, coals, and gas. Applications to Mr. W. Draper, De Grey House, York, by July 19th.

### MEDICAL APPOINTMENTS.

- COOKE, J. Benson, L.E.C.P., L.E.C.S.Edin, appointed Medical Officer to H. M. Convict Prison, Borstal, Kent. CORY, Dr. G. C., appointed Government Medical Officer at Bingara, New South Wales. COREY, William, M.D., appointed Health Officer for the Shire of Phillip Island and Woolamai, Victoria.
- COWEN, H. O., M.B., appointed Health Officer for the Borough of Reywood, Victoria.

  COX, E. O., L.R.C.P., L.R.C.S.Edin., L.F.P.S.Glasg., appointed Medical Officer for the Second District of the Cleobury Mortimer Union.
- DYEE, C. Harold, M.D.Aberd., reappointed Medical Officer of Health to the Cleckheaton Urban District Council.
- FFROST, A. E., M.B., B.S., appointed Clinical, Assistant to the Chelsea Hospital for Women. GOODMAN, Henry Cyril, M.B., B.C.Camb., M.R.C.S.Eng., L.R.C.P.Lond., appointed Resident Medical Officer to the Kasr-el-Aini Hospital.

- Medical Officer to the Kasr-el-Aini Hospital.

  HAMILTON, Dr. Partrick J., appointed Medical Officer to the Ardara Dispensary District, co Donegal, vice T. D. Sullivan, L.R.C.P., L.R.C.S.Edin.

  HARSTON, L. de Courcy, L.R.C.P. Edin., M.R.C.S.Eng., appointed Medical Officer for the Workhouse and No. 8 and 9 Districts of the Kingsbridge Union.

  HATTON, G. Stokes, M.D., M.S.Durh., F.R.C.S.E., appointed an Honorary Surgeon to the North Staffordshire Infirmary, Harshill, Stoke-on-Trent.

  HAYWARD, John W., M.R.C.S.Eng., L.S.A., reappointed Medical Officer of Health to the Whitstable Urban District Council.
- HILL, Charles A., M.B., B.C., B.A.Cantab., M.R.C.S.Eng., L.R.C.P.Lond., appointed Stipendiary Medical Officer to the Liverpool Hospital for Consumption and Diseases of the Chest.
- HUTCHINSON, Frederick Arundel Stuart, M.B., B.C.Camb., M.B.C.S.Eng., L.B.C.P.Lond., appointed Resident Surgical Officer to the Kasr-el-Aini Hospital.

  JEFFERY, E., L.B.C.P., L.B.C.S.Edin., appointed Medical Officer for the Second District of the St. Austell Union.
- LAWRENCE, H. Cripps, L.R.C.P.Lond., etc., appointed Honorary Physician to the Home for Sick Children, Cheltenham. Lawson, T. C., M.R.C.S., appointed Medical Officer for the Stogumber District of the Williton Union.
- MADDEN, Frank Cole, M.B., B.S.Melb., F.E.C.S.Eng., Medical Superintendent of the Hospital for Sick Children, Great Ormond Street, appointed Professor of Surgery at the Egyptian Government School of Medicine, and Senior Surgeon to the Kasr-el-Aini Hospital, Cairo.
- MASSIE, Thomas, M.B., appointed by the School Board for London Lecturer on Ambulance at the Evening Continuation Schools in Southwark, Walworth, Newington, and Ber-
- mondaey.

  MAY, Francis Hollingsworth, L.R.C.P.Lond., D.P.H. (Fac.P.&.S.Glasg.), appointed Medical Officer of Health to the Aston Manor Urban District Council, vice Henry May, L.E.C.P. Lond., retired.
- Lond., retired.

  MILTON, Francis Ralph Septimus, M.R.C.S.Eng., L.R.C.P.Lond., appointed Professor of Clinical Surgery at the School, and Surgeon to the Kasr-el-Aini Hospital.

  NOBLE, H. P., M.B., B.S.Lond., M.R.C.S., L.R.C.P., appointed Honorary Anæsthetist to Children's Hospital, Paddington Green.

  PALMER, G., M.B., appointed Health Officer for the Shire of Ararat, Victoria.

  POTTER, J. C., M.B., C.M. Edin., appointed Medical Officer for the Tudhoe District of the Durham Union.

- Durham Union.

  RUSSELL, E. Ussher, L.R.C.P. Edin., appointed Medical Superintendent for Insane, Newcastle, and Health Officer for the Port of Newcastle, New South Wales.

  RISKLEY, Stanley, M. D., C.M. Edin., appointed Honorary Ophthalmic Surgeon to the Sheffield Royal Hospital.

  SANDELL, H. W. A., L.R.C.P. Edin., M.R.C.S. Eng., appointed Medical Officer of Health to the Linslade Urban District Council.

  SHACKEL, George A., L.R.C.P. Lond., M.R.C.S. Eng., reappointed Medical Officer of Health to the Ludlow Rural District Council.
- to the Ludlow Rural District Council.

  SPICER, W. T. Holmes, M.A., M. B.Cantab., F.R.C.S. Eng., Ophthalmic Surgeon to the Metropolitan Hospital and to the Victoria Hospital for Children, appointed Assistant Surgeon to the Royal London Ophthalmic Hospital, Moorfields, E.C.

  STAIN, Corbet, M.B., C.M. Edin., appointed Medical Officer for the Audlem District of the Nantwich Union, vice Walter Twyford, M.R.C.S., L.R.C.P. Lond., resigned.

  STEWART, F. G., M.R. C.S. Eng., L. S.A., appointed Medical Officer of Health to the Wadebridge Urban District Council.

- bridge Urban District Council.

  SYRETT. E. F., M.D. Durh, M.R.C.S. Eng., appointed Medical Officer and Public Vaccinator for the Eighth District of the Lexden and Winstree Guardians, vice James Crooks, M.D. Toronto, L.R.C.S. Edin., resigned.

  TOLLER, Seymour Graves, M.D., M.R.C.P.Lond., M.R.C.S. Eng., appointed Professor of Clinical Medicine at the School, and Physician to the Kasr-el-Aini Hospital.

  TRUMPER, O. B., M.B., Ch.B., "appointed Medical Officer for the Market Rasen First District and the Tealby District of the Caistor Union

### 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.
- BIRTHS.

  CROSS.—July 7th, at Worcester House, Clifton, the wife of F. R. Cross, M.B., F.R.C.S., High Sheriff of Bristol, of a daughter.

  FULLER.—On July 3rd, at Fairhaven, Queen's Road, Richmond, Surrey, the wife of John Reginald Fuller, M.B., B.S., M.R.C.S., L.R.C.P., etc., of a daughter.

#### MARRIAGE.

- St. JOHNSTON—SANDERSON.—On July 6th, at Edghaston Parish Church, by the Rev. Canon Strange, M.A., George St. Johnston, M.D., son of the late James Johnston, M.B., to Caroline Lily, daughter of the late William Sanderson and Mrs. Sanderson, of Yew Tree Road, Edghaston.
- DEATHS.
- BOSWORTH.—On July 12th, 1898, at Grove End, Sutton, Surrey, Emily Sophia, wife of John R. Bosworth, M.E.C.S., etc.

  RAVERTY.—On July 11th, at 8, Chadmore Road, Upper Clapton, Dr. George A. Raverty, formerly of Evering Road, Stoke Newington, aged 55. R.I.P.

### DIARY FOR NEXT WEEK.

#### TUESDAY.

West End Hospital for Diseases of the Nervous System, 73, Welbeck Street, 4.30 P.M.—Dr. Harry Campbell: On Apoplexy and other Disorders attended by Loss of Consciousness.

#### WEDNESDAY.

5 P.M.-Mr. Percy Dunn: Ophthalmic Cases. West London Post - Graduate Course, West London Hospital, W.,

#### FRIDAY.

- British Laryngological, Rhinological, and Otological Association, 11, Chandos Street, 8 P.M.—Clinical Meet-
- ing. Cases will be shown by Drs. Dundas Grant, Middlemas Hunt, George Stoker, Furniss Potter, and others.

#### HOURS OF ATTENDANCE AND OPERATION DAYS AT THE LONDON HOSPITALS.

CANCER, Brompton (Free). Attendances—Daily, 2. Operations.—Tu. F. S., 2. CENTEAL LONDON OPHTHALMIC. Attendances.—Daily, 1. Operations.—Daily. CENTRAL LONDON OPHTHALMIC. Attendances.—Daily, 1. Operations.—Daily.
CENTRAL LONDON THEOLT, NOSE, AND EAE.—Attendances.—M. W. Th. S., 2; Tu. F.,
5. Operations.—I.-p., Tu., 230; o.-p. F., 2.
CHARING CROSS. Attendances.—Medical and Surgical, daily, 1.30; Obstetric, Tu. F., 1.30,
Skin, M. Th., 1.45; Dental, M., 9; Throat and Ear, F., 9.30. Operations.—Th. F.
S., 5.

CHELSEA HOSPITAL FOR WOMEN. Attendances.—Dally, 1.30. Operations.—M. Th. F., 2. CITY ORTHOPEDIC. Attendances.—M. Tu. Th. F., 2. Operations.—M., 4.

GREAT LONDON HOSPITAL FOR CHILDREM. Operations.—M. W. Th. F., 2.

GREAT NORTHERN CRYPALL. Attendances.—Medical and Surgical, M. Tu. W. Th. F.,
2.30; Obstatrc, 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.

a.o.; Dental, w., 2. Operations.—M. W. Th. F.

GUY'S. Attendances.—Medical, daily, 2; Surgical, daily, 1.30; Obstetric, M. Tu. F., 1.30;

Byc. M. Tu. Th. F., 1.30; Ear. Tu., 1; Skin, Tu., 1; Dental, daily, 9; Throat, F.,

2. Operations.—Tu. F., 1.30; (Ophthalmic) M., 1.30; Th., 2.

HOSPITAL FOR WOMEN, Soho. Attendances.—Daily, 10. Operations.—M. Th., 2.

RUSPITAL FOR WOMEN, SORO. Attendances.—Daily, 10. Operations.—M. Th., 2. King's College. Attendances.—Medical and Surgical, daily, 2; 0. Desetric, daily, 2; 0. P., daily, 1.30; Eye, M. W. Th., 1.30; Exr. Th., 2.30; Throat, M., 1.30, F., 2; Dentai, M. Th., 10; Skin, W., 41.30. Operations.—W. Th. F. 2.

LONDON. Attendances.—Medical, daily, 1.-p., 2, 0, p., 1.30; Surgical, daily, 1.30 and 2; Obstetric, M. Th. Th. F. 2; 0, p., W. S., 1.30; Eye, Tu. S., 9; Ear. W., 9; Skin, Th., 9; Dentai, Tu., 3. Operations.—Daily, 2.

y; Dentai, Tu., 9. Operations.—Daily, 2.

LONDON TEMPERANCE. Attendances.—Medical, M. Tu. W. Th. F., 1.30; Surgical, M. Th., 1.30. Operations.—M. Th., 4.30.

METROPOLITAN. Attendances.—Medical and Surgical, daily, 2; S., 9; Obstetric, W., 2; Eye, W., 2; Throat and Ear, Th., 2; Dentai, Tu. Th. S., 9. Operations.—Tu. W., 2.30; Th., 4.

MIDDLESEX. Attendances.—Medical and Surgical, daily, 1.30; Obstetric, Tu. Th., 1.30 o.p., M., 9; W., 1.30; Eye, Tu. F., 9; Ear and Throat, Tu. F., 9; Skin, Tu., 4; Th. 9.30; Dental, M. F., 9.30; W., 9. Operations.—Daily, 1.30.

NATIONAL ORTHOPEDIC, Attendances.—M. Tu. Th. F., 2. Operations.—W., 10.

NEW HOSPITAL FOR WOMEN. Attendances.—Daily, 2; Ophthalmic, W. S., 9.30 Opera tions.—Tu. F., 9.

NORTH-WEST LONDON. Attendances.—Medical, daily, exc. S., 2, S., 10; Surgical, daily, exc. W., 2, W., 10; Obstetric, W., 2; Eye, W., 9; Skin, F., 2; Dental, F., 9. Operations.—Th., 2.30.

ROYAL FYE, Southwark. Attendances.—Daily, 2. Operations.—Daily.

BOYAL FREE. Attendances.—Medical and Surgical, daily, 2; Diseases of Women, Tu. S.,
9; Eye, M. F., 9; Skin, Th., 9; Throat, Nose, and Ear, W., 9. Operations.—W. S., 2;
(Ophthalmio), M. F., 10.30; (Diseases of Women), S., 9.

ROYAL LONDON OFHTHALMIC. Attendances.—Daily, 9. Operations.—Daily, 10. ROYAL ORTHOPEDIC. Attendances.—Daily, 2. Operations.—M., 2.

ROYAL WESTMINSTER OFFINALMIC. Attendances.—Daily, 1. Operations.—Daily, 2. ST. BAPTROLOMEW'S. Attendances.—Medical and Surgical, daily, 1.90; Obstetric, M. W. F. 2; o.p. W. S. 9; Eye, M. Tu. W. Th. S. 2; o.p. M. Th. 9; W. S. 2, 30; Ear, Tu. F., 2; Skin, Tu. 9; Jarynx, Tu. F., 2.30; Orthopsedic, M., 2.30; Dental, Tu. F. 9. Electrical, M. Tu. Th. F., 1.30; Operations.—Daily, 1.30; (Ophthalmio), Tu. F., 2; Abdominal Section for Ovariotomy, F., 2.

amouninal section for ovariotomy, F., 2.

GEORGE'S. Attendances.—Medical and Surgical, daily, i.-p.,1; o.-p., 12; Obstetric, i.-p., Tu, F., 1.45; o.p., M. Th. 2.30; Eye, W. S. 1.30; Ear, Tu, 2; Skin, W., 2.45; Throat, F., 2; Orthopædic, F., 12; Dental, M. Tu, F., S., 12. Operations.—Daily, 1; Ophthalmic, M., 1; Dental, Th., 9.

ST. Mark's. Attendances.—Fistula and Diseases of the Rectum, males S., 2; females, W., 9.30. Operations.—M. 9; Tu, 2.30.

ST. Mark's. Attendances.—Medical and Superioral Active 145.

W., 9.30. Operations.—M. 9; Th., 2.30.
 St. Mary's. Attendances.—Medical and Surgical, daily, 1.45; o.p., 12.45; Obstetric, Tu. F., 1.45; o.p., M. Th., 10; Eye, Tu. F., 9; Bar, M. Th., 9; Throat, Tu. F., 3; Skin, M. Th., 9; Dental, W. S., 9; Electro-therapeutics, M. Th., 2.30; Children's Medical, Tu. F., 9. Operations.—M., 2.30; Tu. W. F., 2; Th., 2.39; S., 10; (Ophthalmic), F., 10.
 St. Peters's. Attendances.—M. 2 and 5; Tu., 2; W., 5; Th., 2; F. (Women and Children), 2; S., 4. Operations.—W. F., 2.
 Thowards. Attendances.—Medical and Surgical M. Tu. Th. F. 2, on. Active 120.

2; S., 4. Operations.—W. F., 2.

ST. THOMAS'S. Attendances.—Medical and Surgical, M. Tu. Th. F., 2; o.p., daily, 1,9:
Obstetric, Tu. F., 2; o.p., W. S., 1,30; Eye, Tu. F., 2; o.p., daily, 1,9:
M., 1,9; Skin, F. 1,30; Throat, Th., 1,30; Children, S., 1,30; Electro-thera-petics, o.p., Th., 2; Mental Diseases, o.p., Th., 0; Dental, Tu. F., 10. Operations.—M.
W. Th. S., 2; Tu. F., 3,30; (Ophthalmic), Th., 2; (Gynæcological), Th., 2.

SAMABITAN FREE FOR WOMEN AND CHILDREN. Attendances.—Daily, 1,30. Operations.—Gynæcological, M., 2; W., 2,30.

THEOAT. Golden Square. Attendances.—Daily, 1,30; Tu. F., 6,30. Operations.—Daily, UNIVERSITY COLUMN.

exc. M., 10.

INIVERSITY COLLEGE. Attendances.—Medical and Surgical, daily, 1.90; Obstetrics, M.

F., 1.39; Eye, M. W., 1.30; Ear, M. Th., 9; Skin, Tu. F., 2; Throat, M. Th., 9; 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., 2; Ear, Tu., 2; S. 10; Orthopædic, W., 2; Diseases of Women, W. 2; Elec
tric, M. Th., 2; Skin, M. F., 2; Throat and Nose, Tu., 2; S., 10. Operations.—Daily,
about 2.39; F., 10.

WESTINSTEE. Attendances.—Medical and Surgical, daily, 1.30; Obstetric, M. Tu. F.,
1.30; Eye, Tu. F., 9.30; Ear, Tu., 1.30; Skin, W., 1.30; Dental, W. S., 9.15. Opera
tions.—M. Tu. W., 9.30;

# 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.

ON THURBDAY 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 this 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.

TRIEGEAPHIC ADDRESS.—The telegraphic address of the EDIFOR of the EGITISH MEDICAL JOURNAL is Aitology, London. The telegraphic address of the MANAGER of the BEITISH 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.

Dr. T. Anderson Glover (Askern) desires to hear of a suitable home for a young woman who is much "run down" and hysterical. Seaside preferred. He asks also for information as to the probable cost.

IGNORAMUS will be grateful to any reader who will inform him whether there is any sign, post mortem, characteristic of death caused by an overdose of chloroform vapour. References to literature bearing on the point would be most welcome.

CHELSEA PENSIONER would be obliged for suggestions as to treatment of syphilitic primary teeth. The notches in the upper incisors are not yet apparent, but discoloration has appeared, and he wishes if possible to prevent the pathognomonic signs of the disease being developed. The subject is a healthy child aged 18 months, and has been treated to salivation with mercury. Perhaps some reader could suggest a preservative enamel or paint or could offer some other suggestion short of extraction, for what will otherwise prove an eyesore.

M. Y. asks for information of a good monthly German journal dealing with hygiene and bacteriology; also for the name, price, and publisher of a good German dictionary which would give scientific and medical

\*\*\* Our correspondent would probably find that the following would meet his wants: Zeitschrift für Hygiene und Infectionskrankheiten (Leipzig: Veit and Co.); or, dealing more exclusively with bacteriology, Centralblatt für Bakteriologie, Parasitenkunde, und Infectionskrankheiten (Jena: Gustav Fischer). A German-English Dictionary of Medical Terms, by Frederick Treves, F.R.C.S., and Hugo Lang, B.A. (London: J. and A. Churchill, 1890). A good German dictionary, such as Hilpert's (Routledge and Co.), gives most of the medical and scientific terms.

#### PHOSPHORUS NECROSIS OF JAW.

H. S. P. writes: I remember reading an extract from a French medical journal, published fifteen or twenty years ago, in one of our medical papers, that the fumes of turpentine prevented necrosis of jaw from phosphorus. Can any of your readers give further information or date of publication?

THE TREATMENT OF BROMIDROSIS.

THE TREATMENT OF BROMIDROSIS.

PUZZLED asks: Can any suggestions be given as to best remedies for this unpleasant affection in a young gentleman? Absolute cleanliness, morning bath, and sponging the feet at night, with frequent change of stockings, are scrupulously habitual; but, after the least walking, the feet become heated, perspire, and emit a most pungent odour, which is socially very disagreeable and overpowering. The sufferer is in perfect health. Any advice will be gratefully received. It is not a question of cleanliness cleanliness.

\*\* It would appear that the affection is due to an alkaline fermentation, and that, among the many cures that have been advocated, the most successful have been those which are of an acid and antiseptic nature. Cleanliness is, of course, a sine qua non, coupled with which the following have been used with varying success: As constitutional remedies, the affection being regarded as a vasomotor effect, atropine, strychnine, calomel, and compound scammony powder have been given. As local remedies, the following have been advocated: The German army surgeons, in their reports, have spoken highly of salicylic acid used as an ointment with lard in the proportion of 1 to 50. The same substance has been prescribed as a dusting powder. A curious remedy, but one that is reported to have been successful, is a piece of lead plaster cut to the shape of the sole and worn inside the sock. Diachylon ointment has also been used with satisfactory results, as has a lotion compounded of red oxide of lead and a solution of the subacetate of the same metal. Red oxide of zinc has also been used as a dusting powder, and the ointment of zinc is spoken of still more favourably. In more recent years an antiseptic treatment has been largely used. Such is the prescription to wring out the socks in, a r in 40 carbolic acid solution before wearing them, and the use of a 5 per cent. chromic acid solution as a lotion. Other reagents of a similar nature that have been used are bromo-iodine, iodol. aristol, boracic acid, etc. A lead spirit solution as follows: R. plumbi subacet. 3j; Sp. vini rect. 3ij; acet. destil. 3j; aq. ad 3xvj, is also given. Another dusting powder that is spoken of as efficacious is powdered alum. All authors insist on loose boots, woollen socks, discarding old and saturated foot gear, and of course absolute cleanliness.

#### ANSWERS.

VICTIM.—We have been unable to obtain any information about the society.

R. D. P.—Mr. E. B. Turner, F.R.C.S., in his article on Cycling for Women in the BRITISH MEDICAL JOURNAL of June 6th, 1896, p. 1399, stated as to the result of his experience that a woman should not ride during the menstrual period, during the time of pregnancy, nor for three months at least after her confinement.

VARIOLOID OR VARICELLA.

M.D.GLASG.—Our correspondent's diagnosis, confirmed as it was in consultation with a resident physician, appears to be in consonance with