

phenomenon continued and was easily demonstrated. It was first noticed when after hurrying up the stairs with some luggage he stopped to take a breath. It was still very evident when he passed from my care in the first week of May to join his friends in a different part of the country.

The patient gave no story of previous pulmonary illness, nor of diarrhoea. He had been a footman for four years, and previously had worked in the North-British Railway engine shop in Edinburgh. His family history was distinctly tuberculous. His father died at the age of 49 from "consumption," after six months' illness. His mother is alive and well at the age of 41. Of a family of seven, two died in infancy, one of "water in the head," and the other of some intestinal illness. The others are in good health.

The patient was of small stature, rather pale and thin. His expectoration was not in large quantity, but mucopurulent, and found on staining to be swarming with tubercle bacilli. Examination of the chest revealed some dullness of the left apex, where the respiratory murmur was slightly tubular, and accompanied by clicking *râles*, though there were no definite cavernous signs. Fine crepitating *râles* were found all through the left lung to the base, but the right lung was healthy. The clicking sound in the throat of which the patient complained was quite distinct, and could be easily induced. When he took a long breath and held his breath there occurred towards the end of the inspiration a clicking sound of musical quality, and synchronous with the beating of the heart. Five or six of these clicks might be got with one respiration. Each click corresponded with one beat of the heart, and could be heard at some considerable distance from the patient without the use of the stethoscope. On careful auscultation this pulsating sound was heard well at the manubrium and on either side of it, but best over the trachea, though even there as if from a distance. There was no mediastinal dullness, nor was there any pulsatile interruption of the current of air on respiration, such as is described under the name of "pulse breath." The examination of the heart revealed nothing abnormal, and the urine was normal.

The patient had been taking cod-liver oil and malt extract, and to this was added creosote in capsules. He was advised to give up his situation in the city and go to the country, or if possible gain admission to a consumption hospital. During the two or three weeks he was under my observation he improved distinctly in regard to cough and spit, and had less sweating. At the same time, the percussion dullness and the other ordinary signs of phthisis remained, though the clicking sound was noticed to be getting less distinct, and not so musical. On May 2nd it was noted that on one of the preceding days it had been gone for the whole day. In a letter to me, dated May 24th, he writes that "his cough is much better, and he spits less too," while "the ticking sound in the throat is now nearly away." An attempt was made by the kindness of Dr. John McIntyre to record the sound on the phonograph; but, unfortunately, by the time this was tried the sound was becoming less distinct, and the attempt was unsuccessful.

Cardio-pulmonary murmurs are of considerable rarity, and belong usually to one of two principal groups—either murmurs exactly like cardiac murmurs in quality and rhythm, but dependent on pulmonary, not on cardiac, disease, or simply rhythmic alterations of the respiratory murmur synchronous with the heart's sounds. The former variety usually occurs in advanced cases of phthisis with a large, thin-walled cavity in the neighbourhood of the heart, and its production is somewhat akin to that of the cracked-pot sound. During the systole of the heart some of the air of the cavity is driven out through the bronchus, with which it communicates, producing a murmur, and during the diastole the air is readmitted and a fainter murmur may occur.¹ Not unlike this is the rhythmic alteration of the respiratory murmur known as "pulse breath," which is also principally associated with air-filled cavities in the lung of considerable size, or with pneumothorax.² However, in certain cases of aneurysm of the thoracic aorta the pulsation of the sac influences the current of air in the trachea and causes a rhythmic blowing sound, as described by Dr. Drummond, of Newcastle.³ A certain amount of this pulsatile respiration can in certain circumstances be demonstrated in healthy persons.

In the case now described, however, there was a cardio-pulmonary sound quite distinct from those already referred to, and I have failed to find any case of the same recorded. The patient is suffering from phthisis, and probably has some excavation in the upper part of his left lung, though there were no definite cavernous signs. His illness was only of two months' duration, and there was certainly no large cavity and no sign of pneumothorax. But at least for a period of four weeks, when he took a long breath there was a series of musical clicks synchronous with the beats of the heart, and the probable explanation of the phenomenon is that there was some cavity in the upper part of the left lung impinged upon by the heart itself or by the aorta, and that the sound was produced by the impact thus received. To produce the musical sounds of cavity the principal physical conditions required are an air-filled cavity of suitable shape, with sufficiently smooth walls, and a proper degree of tension of the walls. In the present case there probably was a suitable cavity, and the necessary degree of tension was got by the patient breathing deeply and holding his breath, and the impinging force was then provided by the action of the

heart. This is the view that was taken of the case by Sir William Gairdner, Dr. Finlayson, and others who saw the patient with me.

REFERENCES.

¹ See a case recorded by Dr. Frederick Taylor in the *Transactions of the Clinical Society of London*, 1880, vol. xiii, p. 365. ² Dr. Finlayson, *BRITISH MEDICAL JOURNAL*, 1883, vol. i, p. 403. ³ Report of the Proceedings of the Northumberland and Durham Medical Society, 1888-89, p. 158.

MEMORANDA: MEDICAL, SURGICAL, OBSTETRICAL, THERAPEUTICAL, PATHOLOGICAL, ETC.

ARTERIAL TENSION UNDER ANÆSTHETICS.

In the recent discussion at the Society of Anæsthetists reference was made to the vascular tension under various anæsthetics. Dr. Macphail, having to give gas and oxygen for a preliminary examination, and a few days later chloroform to the same patient for an operation, asked me to take pulse tracings of the case.



Fig. 1.—Normal pulse tracing of the patient.



Fig. 2.—Gas and oxygen. Ten minutes.



Fig. 3.—Chloroform. Twenty minutes.

As seen by them the patient's normal vascular condition was one of high tension. The gas and oxygen lowered this tension, apparently by dilating the peripheral vessels, since the artery at the wrist became much larger; while chloroform had no effect at all upon the arterial tension. The pulse under the gas and oxygen, owing to the enlarged artery, was more easily felt at the wrist than normally or under the chloroform. This lowering of peripheral resistance by dilating vessels should do good by preserving the heart from strain, but I should think would tend to increase the bleeding during an operation.

Brighton.

WALTER BROADBENT, M.D., M.R.C.P.

CIRCUMCISION UNDER COCAINE.

DURING my last tour in India I performed circumcision over 100 times under the influence of this drug, and never gave a general anæsthetic for its performance. Since January last I have done it in this hospital 25 times and have never seen any bad effects.

In every case where there is a sore on the prepuce, or a long prepuce imprisoning a sore, I operate. One grain of cocaine in 20 minims is injected into the prepuce in two places; 4 grains in about 2 drachms of water are then injected between the prepuce and glans and kept there by the patient. Very little of this is absorbed. In about ten minutes a piece of drainage tube is tightly tied round the base of the organ and the operation commenced. After the skin and mucous membrane have been removed, the parts are thoroughly washed with 1 in 1,000 perchloride of mercury solution poured from a bottle. A continuous catgut suture then unites the skin and mucous membrane, and a dry dressing over oiled lint is firmly applied before the ligature is removed. I never tie a vessel, and have never had to remove a dressing on account of hæmorrhage. Even in cases in which a chancre is exposed on the glans I never get infection of the wound, and union by first intention is the rule.

I used eucaine recently in the same manner as cocaine. It produced extensive œdema of the penis, and when the cut surface was washed with the perchloride solution the tissues became very dark, and appeared as if washed with strong solution of permanganate of potash. The parts sloughed where the eucaine had been injected.

The great majority of my patients are quite unconcerned during the operation. If the mucous membrane be very thick, some slight pain is felt during suturing of the wound. Ingrowing toenails we also remove in this hospital under the influence of cocaine, and for teeth extraction I can bear personal testimony to the efficacy of the drug.

F. J. W. PORTER,
Captain R.A.M.C.

Station Hospital, Colchester.

HYPODERMIC INJECTION OF QUININE IN MALARIA. I wish to add my testimony to the efficiency of this method of treatment. I have used hypodermic injections of quinine for some time in malarial fevers, both mild and severe, and agree with the opinion of Captain Johnston¹ as to the excellent results obtainable. I have found the drug given in the form of a hypodermic injection of the soluble hydrochlorate and hydrobromate of quinine, in doses of 1 or 2 gr. daily, particularly useful in low remittent fevers in children. Under antiseptic precautions no untoward results occur, and symptoms of cinchonism are rare under this treatment.

W. YOUNG, M.B., C.M.,
Captain, I.M.S.

Hardwar, N.W.P.

ANTIPYRIN POISONING.

THE following case illustrates in a remarkable way the action of phenazone on a person who was presumably, and for a time peculiarly, susceptible to the action of that drug:

On April 21st last, my wife, aged 27, being otherwise in perfect health, complained of slight, nervous headache, unaccompanied by dyspeptic symptoms. To relieve her I gave 10 grs. of antipyrin in an ounce of water. The draught was scarcely swallowed when she began to complain of acute discomfort in the abdomen, together with a burning sensation in the mouth and throat. This was followed in about five minutes by severe emesis, with much retching. I administered hot water (about half a pint) without delay, but she found much difficulty in swallowing it, owing to the extraordinarily rapid swelling of her lips and cheeks, which quickly spread all over the face, almost closing the eyes; collapse followed the sickness, the pulse becoming imperceptible at the wrist. The patient was placed in the horizontal position and revived by the aid of ammonia inhalation, only to faint a second time, the recovery from which faint took nearly half an hour. Previous to this occasion she had never fainted. She was then put to bed, suffering from severe intestinal pain, which was relieved by brandy and hot bottles. Soon afterwards she fell asleep, and awoke fairly comfortable, except for the irritation occasioned by urticaria, that spread all over the body, and the discomfort caused by the swelling of the lips and face. The next morning the patient's condition was almost normal, except for the oedema of the face, which gradually subsided during the three following days.

Two months ago my wife had an attack of influenza, and during her convalescence she took a 15-gr. dose of antipyrin, which produced similar but less severe results, which at the time were attributed to her illness. On several occasions previous to this my wife had taken 10-gr. doses of the same drug for headache, which always relieved, and produced no such results as the above. Mr. H. S. Shorthouse, F.C.S., Member of the Society of Public Analysts, carefully tested the stock solution of antipyrin from which the dose was taken, and obtained the following results:

Percentage of antipyrin in solution—25.48 per cent.
Melting point after crystallisation—110°C.
Solubility in water—1 in 1.
A solution in water after extraction with chloroform treated with sodium nitrite, afterwards with sulphuric acid diluted—deep green reaction.
With nitric acid—yellow colour, crimson on heating.
With ferric chloride—red colour, nearly discharged by excess of dilute sulphuric acid.
With mercuric chloride—white precipitate, soluble on boiling, reprecipitated on cooling.
With litmus paper—very slightly, alkaline.
With sulphuretted hydrogen—no reaction.
With fuming nitric acid, specific gravity 1500—green colour changed to red by boiling with more acid.
Residue on ignition—nil.
With sulphuric acid and Mayer's reagent—white precipitate.
With iodine in potassium iodide solution—precipitate.
Crystallised in colourless scales—odourless and slightly bitter.
From the above results it is very certain that the bottle contained phenazone (1 in 4).

The severity of the symptoms and the extraordinary rapidity of the drug's action, together with the facts that the patient was in perfect health, that she had frequently taken antipyrin before, and that the careful analysis, which Mr. Shorthouse's courtesy enabled me to obtain, proved the purity of the drug—seem to me to make this case worthy of record.

HENRY BLAKENEY, L.R.C.P.Lond., M.R.C.S.Eng.
Edgbaston.

¹ BRITISH MEDICAL JOURNAL, May 13th, 1899.

THE USE OF SUPRARENAL EXTRACT IN CONJUNCTION WITH COCAINE TO OBTAIN BLOODLESS AND PAINLESS OPERATION.

IN addition to the hæmostatic properties of suprarenal extract, which may be best obtained by the application of a pad soaked in strong solutions 50 per cent. or less (in terms of weight of dried gland), the extract is extremely useful in operation on the nose, throat, and ear. I have given it a trial for the last six months at the Golden Square Hospital, and can thoroughly recommend it.

As I shall show elsewhere, for small amounts the limit of decided physiological effect is for suprarenal extract (in terms of dried gland) $\frac{1}{4}$ per cent., for cocaine $\frac{1}{8}$ per cent. dilution. Accordingly it is well to use an amount of suprarenal extract twice as great, or equal to that of cocaine. I find the ordinary solutions of 10 per cent. suprarenal extract and cocaine useful for the nose and pharynx, while combined 20 per cent. solutions are best for the ear and larynx. These solutions are conveniently prepared from the tabloids which Messrs. Burroughs and Wellcome have prepared at my request; each tabloid contains the soluble material of 5 grains of the dried gland. Solutions containing low percentages may also be used effectively, but the strength mentioned appears to be preferable. The solution used should contain both cocaine and suprarenal extract, and should be packed in on wool for half an hour to obtain the full effect, which, in the case of the nose, is a shrunken and white mucous membrane.

I have scraped both the inferior turbinates of such a nose and sawn off a small spur without a single drop of blood escaping. Further, in acute conditions, such as are associated with nasal and aural polypus, the use of the combined solution will allow of painless and bloodless removal. This combination diminishes poisonous effects and shock, and it greatly prolongs anaesthesia.

It must be remarked, as a rule, that bleeding sets in at the end of two hours, but this may be obviated by plugging immediately after the operation with dried cyanide gauze. The combination of cocaine and suprarenal extract may be used with success in inflammatory conditions, and operations on the eye and other regions. It reduces the tension of the eye and produces constriction of the blood vessels. The local application to acute and chronically-inflamed tissues in various parts is successful in many instances.

Cadogan Place, S.W.

E. A. PETERS, M.B., B.C.

REPORTS

ON

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

ROYAL VICTORIA HOSPITAL, NETLEY.

FAILURE OF RESPIRATION DURING ADMINISTRATION OF CHLOROFORM.

(By WILLIAM DICK, Major R.A.M.C., Assistant Professor of Clinical and Military Surgery.)

ON May 15th Sergeant D. was being operated on for the radical cure of an inguinal hernia. The administration of chloroform commenced at 11.9 A.M., and he was under its effects at 11.16 A.M.

The operation was then begun, but at 11.21, when an incision through the skin had been made, and the subcutaneous tissue divided, respiration ceased.

The patient was at once placed on the floor, the tongue pulled forward and artificial respiration performed by compression of the chest walls with the palms of the hands alternating with relaxation. This was done about sixteen times a minute. After about five minutes this was stopped to see if there was any attempt at natural breathing; as there was no sign a hypodermic injection of ether was given, the artificial respiration resumed, and the temporal artery opened. About two ounces of blood were allowed to escape, and a compress was then put on. The artificial respiration was kept up for an additional 11 minutes, that is, 16 minutes

UNIVERSITIES AND COLLEGES.

THE ROYAL COLLEGE OF SURGEONS OF ENGLAND.

THE CENTENARY AND THE REPRESENTATION OF MEMBERS.

A MEETING of Fellows and Members of the Royal College of Surgeons of England was held on July 5th at the Royal College of Surgeons, Lincoln's Inn, Sir WILLIAM MACCORMAC (President) in the chair.

The PRESIDENT, in placing before the meeting the draft petition to the Crown for power to confer diplomas of honorary Fellowship, and the draft charter embodying the powers asked for, said that the number of proposed honorary Fellows would not at any time exceed fifty. The object of the petition and charter was to enable the Council to confer the honorary Fellowship on the occasion of the centenary next year. The Council was unanimous that it would be desirable to avoid anything which might assume a contentious character, or which might be calculated to excite opposition, therefore they only ask on this occasion for this power. Contentious questions would cause delay, and the time within which these powers were wanted would expire. They knew by experience that the College could not obtain a charter if a considerable section of the Members offered a genuine opposition, and the question of the representation of Members on the Council of the College admitted of serious contention. The Fellows had decided that they did not approve of the admission of Members to the Council, and the opinion of the Fellows would have to be sought again, so that it was not possible to obtain a charter if it contained serious contentious matter.

Mr. JOSEPH SMITH then proposed the following resolution:

That this meeting of Fellows and Members summoned by the Council to consider the terms of a proposed new charter is of opinion that the powers asked for are inadequate, and that no charter should be granted which does not give to the Members some representation on the Council.

Mr. SMITH, in the course of his remarks, said that the Members of the College had no objection to the granting of honorary Fellowships to distinguished people. He compared the condition of the Members who had been for over fifteen years denied representation on the Council to the Uitlanders in the Transvaal with Sir William MacCormac as Mr. Kruger and the Council as the Volksraad, though there was the important difference that the Members had no Mr. Chamberlain to exert pressure on their behalf.

Dr. MORTON, in seconding the resolution, said that the Members could not be silent without its being thought that they were not in earnest.

Sir ROBERT CRAVEN questioned if the Members of the College cared very much for the management of that institution, but they considered that the Council did not understand the wants of the general practitioner. He would be in some difficulty in voting after what the President had said in such a pathetic and almost imploring manner. Would it not be wise for the Members to wait a little longer and not ruin the centenary?

Mr. GEORGE BROWN said that the matter had not been sprung on the College, and contended that the President's remarks contained no argument against the claim of the Members.

Dr. SNELL urged that the more worthy way to celebrate the centenary would be by terminating the warfare in the College.

Surgeon-Major INCE said it would be a sad thing if there was any split in the College over the celebration of the centenary, which would be attended by the greatest men in Europe and every part of the world.

Mr. PICKERING PICK said that all the Fellows of the College all over the world would have to be consulted if the Council were to attempt to carry out the resolution. There was no time to do this.

Dr. MORTON pointed out that the recipients of the proposed honorary Fellowship would value the honour much more if it came from a united college.

Dr. BARKER said it was inconceivable that the touting for patients by the medical aid societies would be tolerated if general practitioners were properly represented on the Council.

Mr. HORACE MANDERS said that the Fellows had great

sympathy with the Members of the College. He proposed that the Members should elect twenty-five Fellows, who would then have a right to vote, and that two of these Fellows should have seats on the Council.

Mr. JOSEPH SMITH's resolution was carried by 40 votes against 8.

Mr. W. G. DICKINSON moved the following resolution:

That this meeting requests the Council to postpone a final decision as to the terms of the new charter until a memorial which is in course of signature has been received and considered.

Dr. DANFORD THOMAS, in seconding the resolution, said that there was no intimation that if the Members did not take advantage of this opportunity their case would be considered.

Dr. W. H. DAY asked whether if Members accepted the President's advice and allowed everything to go on harmoniously, it would subsequently be urged by the Council that the Members had acquiesced in the charter.

The PRESIDENT said he had only stated the facts, and did not think that, however Members might choose to act in this matter, their case would be prejudiced.

Dr. HOUGHTON asked how many of the Council knew anything of the medical aid societies and the sweating system applied to general practitioners.

Sir THOMAS SMITH said that the Council on the matter of enlarging the franchise had consulted the Fellows on two occasions with negative results. The Council were helping the Members to obtain representation on the Council by thus consulting the Fellows.

Mr. GEORGE BROWN urged that when consulting the Fellows the Council did not put the case fairly.

Mr. DICKINSON's motion was put to the meeting and carried by 38 votes.

The proceedings terminated by the PRESIDENT stating that it would be his duty to report what had passed to the next meeting of the Council.

COUNCIL ELECTION.

The ballot for the election of two members of the Council of the Royal College of Surgeons of England took place on Thursday, July 6th, with the following result:

	Votes.	Plumpers.
Mr. HERBERT W. PAGE	286	85
Mr. THOMAS RICHARD JESSOP	233	6
Mr. J. WARD COUSINS	226	17
Mr. JORDAN LLOYD	126	7

Altogether 496 votes were recorded, 477 Fellows voting by papers, whilst 16 only voted in person; 2 votes were received too late, and but 1 paper was found to be invalid. This is the eleventh election held under the new regulations. The President declared Mr. Page duly elected, and Mr. Jessop duly re-elected.

COUNCIL MEETING.

AN Extraordinary Council was held on June 29th, 1899; Sir William MacCormac, Bart., K.C.V.O., President, in the chair. The minutes of the preceding meeting were read and confirmed.

Report of the Laboratories Committee.—The report on the work on diphtheria for the Metropolitan Asylums Board stated that since March 10th, 1899, 1,100 doses of antitoxin, each containing 4,000 units, and 4,425 doses, each containing 4,000 units, for the treatment of diphtheria in the hospitals of the Metropolitan Asylums Board, had been supplied, and all the demands fully met. During this period 19,900,000 units had been supplied. During the same period 5 doses of 4,000 units each had been supplied to medical officers of health according to instructions received from the Metropolitan Asylums Board. Under the grant from the Goldsmiths' Company 450 doses of antitoxin, containing 1,134,000 units, have been supplied to the general and children's hospitals in or near London. The report concluded with a list of those engaged in research work in the laboratories.

Giambattista Morgagni.—Two medals of Morgagni were accepted by the Council from Mr. S. G. Shattock, to whom a certain number had been given for distribution by the Italian Committee which has been formed to present a marble bust of Morgagni to the Medical School of St. Thomas's Hospital.

University of London.—A report was read, dated June 15th, from the Committee of Delegates upon the draft statute No. 1, issued by the London University Commission. This report (which is at present private) was approved, adopted, and entered on the minutes.

Regulations in regard to Registration.—A letter of June 19th from the Registrar of the General Medical Council was read calling attention to a change in the regulations in regard to registration, which is to come into operation on and after January 1st, 1900. The regulations are:

"No medical student shall be registered until he has passed a preliminary examination, as required by the General Medical Council, and has produced evidence that he has commenced medical study at a university, school of medicine, or scientific institution recognised by one of the licensing bodies, and approved by the Council."

Medical Acts.—A letter of June 16th from Sir William Turner, President of the General Medical Council, forwarding a copy of two amended clauses for the purpose of altering the Medical Acts so as to give additional disciplinary powers and asking for an expression of opinion on the clauses, was referred to the Discipline Committee.

UNIVERSITY OF CAMBRIDGE.

THIRD EXAMINATION FOR MEDICAL AND SURGICAL DEGREES.—The following candidates have satisfied the Examiners:—

Part I.—R. G. Abercrombie, B.A., Cal.; W. L. Ascherson, Non-Coll.; F. A. Bainbridge, B.A., Trin.; H. P. Bradley, B.A., Cal.; W. P. S. Branson, B.A., Trin.; W. E. Burnand, Jes.; J. P. Candler, B.A., Corp. Chr.; A. E. Carver, M.A., Cla.; H. Edmondson, B.A., Cla.; H. St. C. Elliott, Trin.; F. H. Ellis, B.A., Cal.; F. C. Eve, B.A., Emm.; L. S. Gaskell, M.A., Christ's; T. Gillespie, B.A., Joh.; D. G. HaH, B.A., Emm.; W. Hedley, M.A., King's; A. Killick, B.A., Down; J. E. Linnell, B.A., H. Selw.; T. Manners-Smith, M.A., Down; H. N. Matthews, B.A., Joh.; W. H. Maxwell, B.A., Trin.; J. A. Nixon, B.A., Cal.; S. V. Pearson, B.A., Emm.; A. C. Pearson, B.A., Sid. Suss.; J. H. Philbrick, B.A., Trin.; J. G. Taylor, B.A., King's; B. R. B. Truman, B.A., Trin. H.; E. A. Walker, B.A., Cla.; R. F. C. Ward, B.A., Joh.; D. P. Watson, B.A., Trin.; L. Wilkin, M.A., Pemb.; W. M. Willoughby, B.A., Cal.

Part II.—H. F. Bassano, M.A., Trin.; G. Browne, M.A., Cla.; H. N. Clarke, B.A., Trin.; S. E. Dore, B.A., Joh.; F. H. Ellis, B.A., Cal.; J. H. Fryer, B.A., Christ's; H. A. Gaitskel, M.A., Cla.; J. R. Garrod, B.A., Joh.; K. R. Hay, B.A., Cal.; J. E. Helm, B.A., Magd.; R. J. Horton-Smith, M.A., Joh.; E. R. Hunt, B.A., Trin.; J. K. Kemp, B.A., Cla.; E. K. Le Fleming, B.A., Cla.; T. A. Mayo, B.A., Cla.; H. F. Parker, B.A., Emm.; S. B. Reid, M.A., Joh.; F. A. Rose, B.A., Joh.; C. D. Somers, M.A., Pemb.; F. G. Stacey, B.A., Joh.; F. W. Sumner, B.A., Joh.; J. H. Tallent, B.A., Joh.

UNIVERSITY OF LONDON.

MEETING OF CONVOCATION.

AN extraordinary meeting of Convocation was held in the University Building on Tuesday, June 27th, to consider the Draft Statute No. 1, and the Draft Regulations prepared by the London University Commission. The Chairman took the chair on the completion of the quorum.

Dr. T. B. Napier, LL.D. laid upon the table the minutes of the Special Committee reappointed on January 17th, 1898, to prepare a memorandum for presentation to the Statutory Commission.

Dr. J. Rose Bradford, M.D., presented the report of the Standing Committee on the Draft Statute No. 1, and the Draft Regulations prepared by the London University Commission, and proposed that this report be received.

Dr. H. M. Murray seconded the proposal, which was carried.

Dr. Bradford thereupon moved: "That the Standing Committee be empowered to make representations to the London University Commission on the basis of the report."

This proposition was seconded by R. A. Lehfeldt, D.Sc.

It was moved as an amendment by T. B. Napier, LL.D., and seconded by Sir W. T. Thiselton Dyer, B.Sc.: "That in view of the fact that the Special Committee appointed on May 12th, 1896, and reappointed on January 17th, 1898, has been entrusted up to the present time with the duty of representing Convocation before the London University Commission, it is expedient, and it is hereby resolved that that Committee be continued with full powers from time to time on behalf of Convocation to make representations to, and to confer with the Commissioners, the Senate, and any committee thereof, and any other bodies or persons as they may think fit."

After discussion the amendment was carried, on a show of hands, by 36 against 28.

It was moved by T. B. Napier, LL.D., and seconded by J. Piper, LL.B.: "That it be an instruction to the Committee respectfully to represent to the Royal Commission the advisability of postponing the final settlement of the Statute now before Convocation until the members of Convocation shall have had the opportunity of perusing the proposed statute."

The motion was lost.

It having been announced that there were two vacancies on the Special Committee, caused by the resignation of the Chairman of Convocation and Mr. Justice Cozens-Hardy, Dr. Mears and Dr. Bradford were added to the Special Committee.

The House then adjourned.

[The result of the amendment proposed by Dr. T. B. Napier, seconded by Sir W. T. Thiselton Dyer, and carried, is that the Special Committee of Convocation, of which Dr. Napier is Chairman, is charged with the duty of representing Convocation before the London University Commission instead of its being left to the Standing Committee of Convocation to represent Convocation. We understand that the Special Committee has already met, and agreed upon representations which it considers desirable to make.]

UNIVERSITY OF EDINBURGH.

FINAL DEGREES.

DEGREES OF M.B. AND C.M., OLD REGULATIONS.—The following candidates have passed this examination:

J. Brown, D. B. Hughes, Elsie M. Inglis, D. J. M'Adam, Marion B. Marshall, L. J. van der Marwe, A. L. Owen, Esther M. Stuart, Emily C. Thomson, Addie White.

DEGREES OF M.B. AND C.M., NEW REGULATIONS.—The following candidates have passed this examination:

Ivie Aird, Tina M'Culloch Alexander (with distinction), W. J. Baird, C. A. J. Baick, W. J. Barclay, B.A. (with distinction), F. A. F. Barnardo, M.A., E. F. Bashford, J. G. Bell, P. J. Bodington, A. H. W. Boreham, C. A. Brodgen, W. J. D. Bromley, E. A. Brown, C. H. J. Brown, R. Bruce, J. M. Buist, D. A. Callender, H. G. Carlisle, J. C. Carr, M. Carthew, Lillian Mary Chesney, C. S. Clark, H. E. Coghlan, W. J. Collinson, J. D. Comrie, M.A., B.Sc. (with distinction), B. J. Courtney, R. M. Dalziel, W. Darling, M.A., S. M. Dawkins, Y. A. Djedjizian, B.A., D. Ewart, W. Ewart, W. R. Eytton-Williams (with distinction), R. R. Fasson, H. Faulkner, D. Ferrier, E. G. Ford, A.

R. Fordyce, J. J. Galbraith, A. B. George, M.A., H. A. H. Gilmer, B. K. Goldsmith, J. H. Gordon, T. B. Gornall, F. J. Gray, St. L. H. Gribben, A. H. Griffith, G. Haddow, P. W. Hampton, F. J. Hathaway, G. G. Hay, A. C. Heath, P. H. Henderson, W. E. Herbert, I. K. Hegmon, H. T. Holland (with distinction), A. M. Holmes, J. Husband, Alice M. Hutchinson, J. G. Jack (with distinction), W. T. James, R. J. Jardine, J. Jeffrey, W. J. Jones, J. W. Kerr, D. B. King, M.A., G. D. Laing, L. S. Lessing, T. H. Livingstone, E. A. Loch, J. L. Louis, J. Luckhoff, G. Lyon (with distinction), Elizabeth G. Macdonald (with distinction), J. M. Macdonald, M.A., F. H. Macdonald, P. N. M. Macdonald, W. J. M'Farlan, J. Macgregor, Robina Macgregor, W. M. Mackay, M. MacKevie, H. M. Mackenzie, T. C. Mackenzie, P. A. MacLagan, L. C. MacLagan-Wedderburn, T. D. MacLaren, G. C. M'Leary, L. W. Macpherson, A. G. Martin, E. W. Martin, J. F. Martin, Ruth Massey, J. Masson, M.A., B.Sc. (with distinction), J. W. Mathewson, B.Sc., E. T. Melhuish, E. G. D. Menzies, F. N. Menzies, G. H. Menzies, M.A., J. Miller, B.Sc. (with distinction), J. G. Mitchell, H. A. D. Moore, J. R. Munro, J. A. Murray, B.Sc., W. A. Murray, B.A., A. W. Nankervis, A. C. Neethling, T. P. Oates, J. Orr, T. S. A. Orr, W. Park, M.A., F. M. Parry, W. M. Paul, M.A., A. S. M. Peebles, E. J. Peill, A. Preston (with distinction), T. A. Price, R. N. Pringle, S. C. Pritchard, J. M. Reid, W. Reid, M.A., C. M. Robertson, T. Rogerson, R. M. Rowe, M.A. (with distinction), A. B. Shed, S. Simpson, B.Sc., W. B. Slater, V. E. Sorapure, S. Southall, H. B. Sproat, B. Stracey, A. J. Stuart, M.A. (with distinction), W. W. Thom, G. N. W. Thomas, J. A. Thompson, W. D. Thompson, G. Thomson, R. G. Thomson, A. K. Traill, R. B. Turnbull, A. Tweedie, C. S. Vartan, N. D. Walker, C. Heron Watson, M.A., C. H. J. Watson (with distinction), A. Whitmore, A. Whyte, A. S. Whytock, M.A., H. D. Wilson, A. H. Wood, and E. M. Young.

UNIVERSITY OF DUBLIN.

At the later summer commencements in Trinity term, held on Thursday, June 29th, in the Theatre of Trinity College, the following degrees were conferred:

Baccalaurei in Medicina, in Chirurgia, et in Arte Obstericia.—P. Armstrong, A. Bond, J. F. Dixon, A. C. Falkner, H. B. Garratt, W. M. G. Guinness, E. B. Knox, E. E. Parkes, H. Pringle, F. C. Purser, T. F. Smith, T. H. D. Townsend, H. A. Williams.

Doctores in Medicina.—G. Cole-Baker, J. M. Day, T. D. Good, W. M. G. Guinness, C. Gray-Edwards, H. R. L. Joy, A. C. O'Sullivan (step. cond.), E. L. Perry-Edwards, R. J. Rowlette.

Doctor in Medicina (in absentia).—H. N. A. Taylor.

At the same commencements honorary degrees were conferred on Earl Cadogan, Lord Macnaghten, Sir C. S. Scott, and Professors Tiele and Forsyth.

UNIVERSITY OF BRUSSELS.

At the June examination the following British practitioners satisfied the examiners and received the degree of M.D., namely: S. F. O. Dickens, F. C. Fosbery, Maud Langley, N. Lavers, F. Lloyd, S. Melville, H. Rubra, and J. T. Simpson. There were seventeen candidates.

CONJOINT BOARD IN ENGLAND.

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

In Anatomy and Physiology.—F. J. Stanfield, C. W. Sharples, Yorkshire College, Leeds; V. G. Maitland, Mason University College, Birmingham; S. Riley, W. Braddock, T. R. Eames, S. Spencer, W. Stansfield, Owens College, Manchester; V. N. Ouranofski, Anderson's and St. Mungo's Colleges, Glasgow; and University College, Liverpool; R. H. Sankey, Oxford University; C. Corfield, University College, Bristol; F. C. Whitmore, Royal College of Surgeons, Ireland, Guy's Hospital, and University College, Bristol; R. P. Kennedy, St. Mungo's College, Glasgow; J. W. Llewellyn, University College of South Wales, Cardiff; E. C. Williams, St. Bartholomew's Hospital; C. H. Gask, Guy's Hospital; H. E. A. Jackson, Melbourne University; S. B. Gadgil, Grant Medical College, Bombay; W. Parsons, University College, London; W. Robertson, Otago University, Dunedin, and University College, London; F. W. Jackson, A. C. Young, C. R. Keed, and C. V. Nicoll, St. Bartholomew's Hospital; G. M. Levick, University College and St. Bartholomew's Hospital; J. C. Lewis, St. Bartholomew's Hospital and Mr. Cooke's School of Anatomy and Physiology; C. E. A. Huddart, London Hospital and Mr. Cooke's School of Anatomy and Physiology; H. R. Cran, London Hospital; G. W. G. Hughes, King's College, London; W. A. G. Stevens, Guy's Hospital; R. K. G. Graves, St. George's Hospital; D. Bridges, Charing Cross Hospital.

In Physiology only.—W. Miles, St. Mary's Hospital, University College of South Wales, Cardiff, and Middlesex Hospital.

In Anatomy only.—F. J. Russell, London Hospital; and J. Sharples, Cambridge University and St. Mary's Hospital.

Twenty-seven gentlemen were referred in both subjects, 1 in Anatomy only and 1 in Physiology only.

THE NEW NAVAL HOSPITAL AT CHATHAM.—The purchase of the land for the new naval hospital on the Upberry Farm Estate at New Brompton has been completed, and the Admiralty took possession and handed over the site to the authorities at Chatham. The building operations will, therefore, it is believed, be commenced at once. According to the plans, the hospital, when erected, will form an imposing block of buildings of red brick with stone dressings. It is not known at present to what purpose the Admiralty will put the present naval hospital when the new one is completed; but it is not improbable that it may be converted into barracks for the Royal Marines.

MEDICAL NEWS.

SOCIETY FOR THE STUDY OF INEBRIETY.—Professor Sims Woodhead, who will take the chair at the meeting of this Society at the rooms of the Medical Society of London on Thursday next, at 4 P.M., will read a paper on Heredity. A vote of condolence on the death of the late President, Dr. Norman Korr, will be moved by Canon Barker.

WE are asked to state that the Chelsea Hospital for Women will be closed to in-patients from the middle of July till the end of September in order that certain improvements may be carried out, including the enlargement and modernising of the operating theatre, a new hot-water service, and the installation of the electric light. The out-patient department will be closed during August only.

At the annual meeting of the Hospital for Epilepsy and Paralysis, Regent's Park, the Earl of Hardwicke, the newly-elected President, said that the institution must leave its present premises in April, 1900, as the lease would then expire. He specially dwelt on the fact that epileptics, unless insane, could depend only upon charity. It was proposed to erect a new hospital for fifty beds on a suitable site, and a sum of £8,000 is already in hand.

CLOSING OF THE NEW YORK WOMEN'S MEDICAL COLLEGE.—The Women's Medical College of New York will, it is announced, be closed at the end of the year, when the thirty-first annual commencement will be celebrated. When the College was established there was little or no opportunity for women to secure a medical education in the United States, but John Hopkins and Cornell Universities, having admitted women to their medical schools, it has been decided that a special medical school for women is unnecessary. The infirmary for women and children will be continued, and the buildings of the College will be used for graduate work.

CREMATION IN THE UNITED STATES.—The following statistics of the progress of cremation in the United States were given at a recent meeting of the New England Cremation Society, by Mr. John Storer Cobb, one of the founders of the Society. The first organised attempt at cremation in the United States was in New York in 1874, and the first crematory was erected, privately, in Washington, Pa., in 1876. It was not until 1885 that New York finally erected a crematory. From that time, until 1897, others were erected in different parts of the country, until the total number reached 25, of which one, in Middletown, Conn., has not been put to use, and one, in Washington, Pa., has gone out of use. More than one-half of these crematories are connected with cemeteries. Undertakers control three. From 1884 to 1898 there were 8,883 bodies cremated at these crematories. Of this number 1,699 were cremated last year. There has been a slow but steady increase.

INTERNATIONAL PSYCHOLOGICAL CONGRESS.—The fourth International Congress of Psychology will be held in Paris, August 20th to 25th, 1900. There will be seven Sections, as follows: (1) Psychology in its relations with Anatomy and Physiology; (2) Introspective Psychology in its relations with Philosophy; (3) Experimental and Psycho-physical Psychology; (4) Pathological Psychology and Psychiatry; (5) Psychology of Hypnotism, Suggestion and associated questions; (6) Social and Criminal Psychology; (7) Animal and Comparative Psychology, Anthropology, Ethnology. The English, German, and Italian languages, as well as French, may be used in discussions. It is in contemplation to hold in connection with the Congress an exhibition of "documents" and instruments of precision relating to psychology. Persons wishing to take part in the Congress should communicate with Dr. Pierre Janet, 21, Rue Barbet de Jouy, Paris.

CHARING CROSS HOSPITAL.—On July 5th, Sir Robert Finlay, Q.C., M.P., distributed the prizes gained during the past session by successful students. After expressing the regret felt by all present that the absence of Lord James of Hereford, who had looked forward to be present, was due to indisposition, Sir Robert Finlay referred to the vigorous condition of the hospital and school as shown in the report read by the Dean, and said that the new and enlarged hospital

buildings which would soon appear could not fail to be a stimulus to the school and its students. He had been much interested at the time of the opening of the session, when Professor Virchow gave the Huxley Lecture. He had himself had the benefit of Professor Virchow's instruction in 1864 in Berlin, and in 1898 his teacher was so vigorous as to come and open the session at this school. Sir Robert Finlay then addressed himself to the students present, and wished them all success in the careers which lay before them. After a vote of thanks had been proposed by Sir Joseph Fayrer the proceedings terminated.

HOUSES FOR SOLDIERS.—Lord Pirbright has given a freehold site at Bisley towards the promotion of a scheme by which soldiers discharged from the service as invalids, or those who are permanently disabled, may find a home where they may be nursed till they so far recover their health as to obtain civil employment, or may be housed or cared for should their disablement be of a permanent nature. The plot of ground on which these "Cottage Homes of Rest for Discharged Soldiers" are to be erected is between five and six acres in extent. It is close to Pirbright Camp, and not far from Aldershot. The ground is very high, and in the pinewood district.

TROPICAL MEDICINE.—Mr. T. H. Hatton Richards, Colonial Secretary of the Gold Coast, in the course of a recent address at the Earl's Court Exhibition, observed that all those who hoped that the colony would develop in the future must take the keenest interest in the growth of Schools of Medicine of Tropical Diseases. He thoroughly approved of the plan, but thought that it would be greatly strengthened by the constitution of branch schools in each tropical British Colony and dependency. This would have the effect of bringing private practitioners in the colony into relation with the school. He thought that as far as the Gold Coast was concerned it would derive great benefit from the school at Liverpool, a port which received the worst cases in a comparatively short time.

ALCOHOLISM IN PORTUGAL.—The attention of the Portuguese Government has recently been called by a member of the Chamber of Deputies, Senhor Lima Duque, to the increasing prevalence of alcoholism in Portugal. He showed that crime had increased in a corresponding ratio, and he quoted statistics showing that the number of crimes in Portugal had doubled within the last few years. He urged that a Government inquiry should be made on the subject, and measures taken to check the evil. The Minister of Finance, while admitting the magnitude of the evil, pointed out that the question of legislative interference with the drink traffic presented greater difficulties in Portugal than in most other countries, for its wine exports made a constant supply of good and cheap alcohol necessary for the trade.

THE MEDICAL OFFICERS OF SCHOOLS' ASSOCIATION.—On July 1st, upon the invitation of the Headmaster, the Rev. G. H. Rendall, D.D., about a dozen members of this Association visited Charterhouse School at Godalming, and in the course of the afternoon examined two of the boarding-houses, where the dormitories, class rooms, dining rooms, and lavatories were submitted to a minute inspection; the laundry, the museum, the carpenters' shop, the swimming bath, and the old and new sanatoria were also closely examined with much interest, whilst incidentally the chapel, hall and library, cricket fields, fives, racquets, and lawn tennis courts, and the rifle range were visited in due course. The visitors were most hospitably entertained at luncheon by Dr. and Mrs. Rendall in the music room. Dr. Rendall welcomed his guests in a humorous speech, to which Mr Howard Marsh, the President of the Association, briefly replied, and the visitors then proceeded to the serious work of the afternoon, the Headmaster most courteously accompanying the visitors on their round and affording every information at each stage. After a most instructive and interesting afternoon, Dr. C. W. Haig-Brown, the Medical Officer of the School and Vice-President of the Association, who had personally taken charge of the visitors from the first moment of their arrival, and had been indefatigable in explaining everything, and to whom, aided by Mrs. Haig-Brown, the success of the meeting was so largely due, brought a most enjoyable day to a close by entertaining his colleagues at tea at his own house.

CAMBRIDGE GRADUATES' MEDICAL CLUB.—The annual dinner of this club was held at Limmer's Hotel, London, on July 3rd. The President, Dr. Dickinson, was in the chair. There was an excellent attendance of members and their guests. The Chairman, in proposing the toast of "The Club," alluded to the great loss the club had sustained by the deaths of Professor Kanthack and of Dr. Hare, one of the oldest members of the club. Dr. Church, Sir W. Mac Cormac, and Professor Sims Woodhead were the guests of the club, and each of these gentlemen was called upon to respond to the toast of "The Guests," which was proposed by Sir Michael Foster. The Chairman's health was proposed by Dr. Ewart, and the proceedings terminated.

MEDICAL VACANCIES.

The following vacancies are announced:—

BIRKENHEAD AND WIRRAL CHILDREN'S HOSPITAL.—House-Surgeon. Salary, £50, with board, residence, and laundry. Applications to the Honorary Secretary, 20, Chapel Street, Liverpool, by July 10th.

BOURNEMOUTH: ROYAL VICTORIA HOSPITAL.—House-Surgeon. Salary, £80 per annum, with board. Applications to the "Chairman of the Committee," by July 15th.

BRADFORD ROYAL INFIRMARY.—Dispensary Surgeon; unmarried. Salary, £100 per annum, with board and residence. Applications to the Secretary by July 10th.

BRIGTON, HOVE, AND PRESTON DISPENSARY.—House-Surgeon. Salary, £120 per annum, with board and residence. Applications to the Assistant Secretary, 13, Queen's Road, Brighton, by July 20th.

BRIGHTON THROAT AND EAR HOSPITAL. Church Street.—Non-resident House-Surgeon. Appointment for six months, but renewable. Salary at the rate of £75 per annum. Applications to the Secretary, 10, Black Lion Street, Brighton, by July 19th.

CARDIFF INFIRMARY.—(1) Honorary Pathologist. (2) Assistant House-Physician. Appointment for six months, but renewable. Salary at the rate of £50 per annum, with board, washing, and apartments. Applications to the Secretary by July 10th.

CENTRAL LONDON OPHTHALMIC HOSPITAL. Gray's Inn Road, W.C.—(1) House-Surgeon. Board and residence provided. (2) Assistant House-Surgeon. Salary at the rate of £50 per annum. Applications to the Secretary by July 10th and 11th respectively.

CHICHESTER INFIRMARY.—House-Surgeon. Salary, £80 per annum, with board, lodging, and washing. Applications to the Secretary by July 18th.

CHICHESTER WEST SUSSEX COUNTY ASYLUM.—Junior Assistant Medical Officer; unmarried. Salary to commence £100 per annum, with furnished apartments, board, and washing. Applications to the Medical Superintendent by July 25th.

CITY OF LONDON LYING-IN HOSPITAL. City Road, E.C.—District Surgeon. Applications to the Secretary by July 8th.

COLOMESTER: ESSEX AND COLCHESTER HOSPITAL.—House-Surgeon; unmarried. Salary, £100 per annum, with board, washing, and residence. Applications to the Secretary by July 14th.

DENTAL HOSPITAL OF LONDON AND LONDON SCHOOL OF DENTAL SURGERY. Leicester Square.—Demonstrator. Honorarium, £50 per annum. Applications to the Dean by July 24th.

DERBY: DERBYSHIRE ROYAL INFIRMARY.—Assistant House-Surgeon. Appointment for twelve months. Salary, £40 per annum, with board, residence, and washing. Applications to the Secretary by July 21st.

DUNMOW UNION. Essex.—(1) Medical Officer and Public Vaccinator for the Dunmow District. Salary, £68 3s. per annum, with usual fees. (2) Medical Officer for the Union Workhouse. Salary, £72 10s. per annum. Applications to the Clerk, Great Dunmow, by July 10th.

DURHAM COUNTY HOSPITAL.—House-Surgeon. Appointment for one year, but eligible for re-election. Salary, £100 a year, with board and lodging. Applications to the Honorary Secretary, 16, South Bailey, Durham, by July 21st.

EVELINA HOSPITAL FOR SICK CHILDREN. Southwark, S.E.—Junior Resident Medical Officer and Registrar. Salary, £50, with board and washing. Applications to the Committee of Management by July 12th.

GOVAN DISTRICT ASYLUM. Crookston, near Paisley.—Junior Assistant Medical Officer. Salary, £100 a year, with furnished rooms, board, laundry, and attendance. Applications to the Medical Superintendent by July 20th.

GREAT NORTHERN CENTRAL HOSPITAL. Holloway Road, N.—(1) Physician to Out-patients; (2) Dental Surgeon. Applications to the Secretary by July 10th.

GREAT YARMOUTH HOSPITAL.—House-Surgeon. Salary, £90 per annum, with board and lodging. Applications to Mr. Richard F. E. Ferrier, Hon. Sec., 33, Hall Place, Great Yarmouth, by July 26th.

HOSPITAL FOR SICK CHILDREN. Great Ormond Street, W.C.—House-Surgeon to Out-patients. Appointment for six months. Salary, 25 guineas. Applications to the Secretary by July 18th.

INVERNESS: NORTHERN INFIRMARY.—House-Surgeon and Dispenser. Salary, £70 per annum, with board, etc. Applications to the Honorary Secretary, 15, High Street, Inverness, by July 15th.

LEEDS PUBLIC DISPENSARY.—Junior Resident Medical Officer. Salary, £85 per annum, with board and residence. Applications to the Secretary of Faculty by July 10th.

LIVERPOOL DISPENSARIES.—Assistant Surgeon; unmarried. Salary, £100 per annum, with board and residence. Applications to the Secretary, 34, Moorfields, Liverpool, by July 18th.

LONDON COUNTY ASYLUM. Bexley, Kent.—Assistant Medical Officer, between 23 and 30 years of age. Salary, £150 per annum, with board, furnished apartments, and washing. Applications, on forms provided, to the Clerk to the Asylums Committee, 6, Waterloo Place, London, S.W., by July 18th.

MELBOURNE: ROXBURGH DISTRICT ASYLUM.—Assistant Medical Officer. Salary, £100 per annum, with furnished quarters, board, washing, and attendance. Applications to the Medical Superintendent.

NOTTINGHAM LUNATIC ASYLUM. The Coppice.—Assistant Medical Officer: unmarried, and between 25 and 30 years of age. Salary, £150 a year, with apartments, board, attendance, and washing. Applications to Dr. Tate, at the Asylum, by July 15th.

OLDHAM INFIRMARY.—(1) Senior House-Surgeon. Salary, £85 per annum. (2) A Junior House-Surgeon. Salary, £70 per annum. Board, residence, and washing in each case. Appointments for one year. Applications to the Honorary Secretary by July 10th.

PERTH ROYAL INFIRMARY.—House-Surgeon. Salary, £60, with board. Applications to P. Martin, 38, Tay Street, Perth, by July 10th.

POPPLAR HOSPITAL FOR ACCIDENTS. E.—Assistant and Second Assistant House-Surgeons. Salary, each £65 per annum, with board and residence. Applications to the House Governor by July 24th.

RAMSGATE AND ST. LAWRENCE ROYAL DISPENSARY.—Resident Medical Officer; unmarried. Salary, £100 per annum, with furnished apartments, board, and attendance. £10 allowed for substitute during annual holiday. Applications to the Secretary by July 12th.

ROCHDALE INFIRMARY AND DISPENSARY.—House-Surgeon; unmarried. Salary, £90 per annum, with board, residence, and laundry. Applications to Mr. E. W. Staw, Hon. Sec., Baersill House, Rochdale, by July 13th.

RYDE: ROYAL ISLE OF WIGHT INFIRMARY AND COUNTY HOSPITAL.—House-Surgeon. Salary, £65 per annum, with a fee of £10 10s. for lecturing to the nurses. Applications to the House-surgeon by July 15th.

ST. LUKE'S HOSPITAL, E.C.—Clinical Assistant. Appointment for six months. Board and residence provided. Applications to the Secretary at the Hospital, Old Street, London, E.C.

ST. THOMAS'S HOSPITAL MEDICAL SCHOOL.—Lecturer on Physiology. Applications to the Secretary by July 15th.

SEAMEL'S HOSPITAL SOCIETY.—Physician to Out-patients and Physician to In-patients at the Branch Hospital, Royal Victoria and Albert Docks. Appointments for twelve months, but eligible for re-election. Applications to the Secretary, Seame's Hospital Society, Greenwich, S.E., by July 10th.

SOUTHAMPTON: ROYAL SOUTH HANTS INFIRMARY.—Surgeon in Charge of Ear and Throat Department. Applications to the Secretary before July 10th.

TOTTENHAM HOSPITAL.—Junior House-Surgeon. Honorarium at the rate of £29 per annum, with board, residence, and laundry. Applications to the Chairman, Joint Committee, by July 11th.

TRURO: ROYAL CORNWALL INFIRMARY.—House-Surgeon; unmarried. Salary, £120, with furnished apartments, fire, light, and attendance. Applications to the Secretary.

UNIVERSITY COLLEGE, London.—Jodrell Professorship of Physiology. Applications to the Secretary by July 17th.

WESTMINSTER HOSPITAL.—(1) Surgeon, (2) Assistant Surgeon. Must be F.R.C.S. Eng. Candidates must attend House Committee on July 12th at 4.30 P.M.

WOLVERHAMPTON EYE INFIRMARY.—House-Surgeon. Appointment for six months, but may be extended. Salary, £70 per annum, with board, rooms, and washing. Applications to the Secretary by July 26th.

MEDICAL APPOINTMENTS.

BATTEN, R. W., M.D. Lond., F.R.C.P., late Senior Physician, appointed Consulting Physician to the Gloucester Infirmary.

BLOOD, J. F., Surgeon-Major I.M.S. (retired), M.D. Dub., M.Ch., appointed Surgeon to the Birkenhead Borough Hospital.

CHILCOTT, G. S., M.R.C.S., L.R.C.P. Eng., appointed Admiralty Surgeon and Agent for Southampton, and reappointed Medical Officer of Health for the Itchen Urban District.

COLLIER, H. Beale, M.R.C.S. Eng., D.P.H., R.C.P.S. Lond., reappointed Medical Officer of Health for the Borough of Kingston-on-Thames.

DOUGLAS, Carstairs C., M.D., B.Sc. Edin., appointed Assistant Dispensing Physician to the Samaritan Hospital for Women, Glasgow.

FORSTER, Frederick C., M.R.C.S., L.R.C.P., appointed House-Surgeon to the Royal United Hospital, Bath.

FREELAND, Ernest Harding, F.R.C.S. Eng., appointed Surgeon to the St. George's and St. James's General Dispensary.

HYLES, W. J., M.D., appointed Medical Officer of Health to the Ennistymon Union, vice Dr. McDermott.

LAWSON, T. C., M.R.C.S. Eng., L.S.A., appointed Medical Officer for the Coleford District of the Frome Union, vice J. Hickman, M.R.C.S., L.R.C.P., resigned.

MARKEY, Herbert, M.R.C.S. Eng., L.R.C.P. Lond., appointed House-Surgeon to the Chester General Infirmary.

MARTIN, F. W., M.R.C.S. Eng., L.R.C.P., L.R.C.S. Edin., reappointed Medical Officer of Health to the Eridge Town Council.

ROWLAND, F. M., M.D., B.C., B.A. Cantab., M.R.C.V., L.R.C.P., appointed Medical Officer to the Lichfield Workhouse.

WARDEN, Charles, F.R.C. Edin., late Honorary Surgeon, appointed Consulting Surgeon to the Royal Orthopaedic and Spinal Hospital and the Ear and Throat Hospital, Birmingham.

DIARY FOR NEXT WEEK.

MONDAY.

West London Post-Graduate Course. West London Hospital, Hammersmith Road, W., 5 P.M.—Mr. H. P. Dunn: Wounds of the Ciliary Region and their Treatment.

TUESDAY.

National Hospital for the Paralysed and Epileptic, Queen Square, W.C., 3.30 P.M.—Dr. Marcus Gunn: Ocular Paralysis.

THURSDAY.

British Gynaecological Society. Hospital for Sick Children, Great Ormond Street, W.C., 4 P.M.—Dr. F. G. Penrose: Demonstration of Selected Cases.

West London Post-Graduate Course. West London Hospital, Hammersmith, W 5 P.M.—Mr. McAdam Eccles: The Differential Diagnosis of Scrotal Swellings.

FRIDAY.

West London Medico-Chirurgical Society. West London Hospital, W., 5 P.M.—Annual General Meeting. Election of Officers and Council. Annual report.

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.

ROBERTS.—On June 23rd, at Eadlesmere, Eastbourne, the wife of Astley Roberts, of a son.

ROYDEN.—On July 5th, at Burgh St. Margaret, near Great Yarmouth, the wife of William Royden, M.A. Cantab., M.R.C.S., L.R.C.P., of a son.

WALTER.—On June 25th, at 22, Lytham Road, Blackpool, the wife of B. A. Walter, M.R.C.S., L.R.C.P., of a son.

MARRIAGE.

FOULDS-FOSTER.—On June 2nd, at the Parish Church, Feckenham, by the Rev. W. Manning, M.A., Vicar of St. Andrew's, Leytonstone, assisted by the Rev. A. Marshall, M.A., Vicar of Feckenham, and the Rev. W. J. Holden, M.A., Rector of Kingston, Francis Henry Foulds, M.R.C.S., L.R.C.P. Lond., second son of the late Dr. S. Foulds of Chesterfield, to Grace Maryanne, only surviving child of Mrs. and the late E. W. Webb Foster of Feckenham, Worcestershire.

DEATHS.

BAKER.—On June 30th, at 23, Church Street, Southport, in his 72nd year, John Wright Baker, formerly of Friargate, Derby, Surgeon, fourth son of the late William Baker of Derby.

DAVIES.—On July 3rd, suddenly, at Caswell Rav (t), Mumbles, Swansea, Henry Canton Davies, J.P., Surgeon, of Glyn Rhondda Road, South Wales, in his 72nd year.

HOURS OF ATTENDANCE AND OPERATION DAYS AT THE LONDON HOSPITALS.

CANCER, Brompton (Free). *Attendances.*—Daily, 2. *Operations.*—Tu. W. F., 2.
CENTRAL LONDON OPHTHALMIC. *Attendances.*—Daily, 1. *Operations.*—Daily.
CENTRAL LONDON THROAT, NOSE, AND EAR. *Attendances.*—M. W. Th. S., 2; Tu. F., 5. *Operations.*—1 p., Tu., 2.30; o.p., F., 2.
CHANCING CROSS. *Attendances.*—Medical and Surgical, daily, 1.30; Obstetric, Tu. F., 1.30; Skin, Tu. F., 1.45; Dental, M., 9; Throat and Ear, F., 9.30. *Operations.*—Th. F. S., 2.
CHURCH LANE HOSPITAL FOR WOMEN. *Attendances.*—Daily, 1.30. *Operations.*—M. Th. F., 2.
CITY ORTHOPEDIC. *Attendances.*—M. Tu. Th. F., 2. *Operations.*—M., 4.
EAST LONDON HOSPITAL FOR CHILDREN. *Operations.*—M. W. Th. 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., 2.
GUY'S. *Attendances.*—Medical, daily, 2; Surgical, daily, 1.30; Obstetric, M. Tu. F., 1.30; Eye, M. Th. Th., 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.
KING'S COLLEGE. *Attendances.*—Medical and Surgical, daily, 2; Obstetric, daily, 2; o.p., daily, 1.30; Eye, M. W. Th., 1.30; Ear, Th., 2.30; Throat, M., 1.30 F., 2; Dental, M., Th., 10; Skin, W., 1.30. *Operations.*—W. Th. F., 2.
LONDON. *Attendances.*—Medical, daily, 1 p., 2; o.p., 1.30; Surgical, daily, 1.30 and 2; Obstetric, M. Th., 2; F., 1.30; Eye, Tu. S., 9; Ear, W., 9; Skin, Th., 9; Dental, 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.
LONDON THROAT, Great Portland Street. *Attendances.*—Daily, 2; Tu. F., 6. *Operations.*—Daily, 2.
METROPOLITAN. *Attendances.*—Medical and Surgical, daily, 2; S., 9; Obstetric, W., 2; Eye, W., 2; Throat and Ear, Th., 2; Dental, Tu. Th. S., 9. *Operations.*—Tu. W. F., 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. *Operations.*—Tu. F., 2.
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 EAR, Fifth Street. *Attendances.*—M. W. F., 3; Tu. F., 9.30 and 7.30. *Operations.*—Tu., 8.
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, W., 9. *Operations.*—W. S., 2; (Ophthalmic), M. F., 10.30; (Diseases of Women), S., 9.
ROYAL LONDON OPHTHALMIC. *Attendances.*—Daily, 9. *Operations.*—Daily, 10.
ROYAL ORTHOPEDIC. *Attendances.*—Daily, 2. *Operations.*—M., 2.
ROYAL WESTMINSTER OPHTHALMIC. *Attendances.*—Daily, 1. *Operations.*—Daily, 2.
ST. BARTHOLOMEW'S. *Attendances.*—Medical and Surgical, daily, 1.30; 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; Larynx, Tu. F., 2.30; Orthopedic, M., 2.30; Dental, Tu. F., 9; Electrical, M. Tu. Th. F., 9. *Operations.*—Daily, 1.30; (Ophthalmic), Tu. F., 2; Abdominal Section for Ovariectomy, F., 2.
ST. GEORGE'S. *Attendances.*—Medical and Surgical, daily, 1 p., 1; o.p., 1.30; Obstetric, 1 p., Tu. F., 1.45; o.p., M. Tu., 2.30; Eye, W. S., 1.30; Ear, Tu., 2; Skin, W., 2.45; Throat, F., 2; Orthopedic, F., 12; Dental, M. Tu. F., S., 12. *Operations.*—Daily, 1; Ophthalmic, W., 1; Dental, Th., 9.
ST. MARK'S. *Attendances.*—Fistula and Diseases of the Rectum, males, S., 2; females, W., 9.30. *Operations.*—Tu., 2.30; Th., 2.
ST. MARY'S. *Attendances.*—Medical and Surgical, daily, 1.45; o.p., 12.45; Obstetric, Tu. F., 1.45; o.p., M. Th., 1; Eye, Tu. F., 9; Ear, 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., 2.30; S., 10; (Ophthalmic), F., 10.
ST. PETER'S. *Attendances.*—M., 2 and 5; Tu., 2; W., 5; Th., 2; F. (Women and Children), 3; S., 4. *Operations.*—W., 2.
ST. THOMAS'S. *Attendances.*—Medical and Surgical, M. Tu. Th. F., 2; o.p., daily, 1.30; Obstetric, Tu. F., 2; o.p., W. S., 1.30; Eye, Tu. F., 2; o.p., daily, exc. S., 1.30; Ear, M., 1.30; Skin, F., 1.30; Throat, Th., 1.30; Children, S., 1.30; Electro-Therapeutics, o.p., Th., 2; Mental Diseases, o.p., Th., 10; Dental, Tu. F., 10. *Operations.*—M. W. Th. S., 2; Tu. F., 9.30; (Ophthalmic), Th., 2; (Gynaecological), Th., 2.
SAMARITAN FREE FOR WOMEN AND CHILDREN. *Attendances.*—Daily, 1.30. *Operations.*—Throat—Gynaecological, M., 2; W., 2.30.
THROAT, Golden Square. *Attendances.*—Daily, 1.30; Tu. F., 6.30. *Operations.*—Daily, exc. M., 10.
UNIVERSITY COLLEGE. *Attendances.*—Medical and Surgical, daily, 1.30; Obstetrics, M. F., 1.30; 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; Orthopedic, W., 2; Diseases of Women, W. S., 2; Electro, M. Th., 2; Skin, M. F., 2; Throat and Nose, Tu., 2; S., 10. *Operations.*—Daily, about 2.30; F., 10.
WESTMINSTER. *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. *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 ON WEDNESDAY. TELEGRAMS CAN BE RECEIVED ON THURSDAY MORNING.

COMMUNICATIONS respecting Editorial matters should be addressed to the Editor, 1, Agar Street, Strand, W.C. London; those concerning business matters, advertisements, non-delivery of the JOURNAL, etc., should be addressed to the Manager, at the Office, 429, Strand, W.C. London.

ORIGINAL ARTICLES and LETTERS forwarded for publication are understood to be offered to the BRITISH MEDICAL JOURNAL alone, unless the contrary be stated.

AUTHORS desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL are requested to communicate with the Manager, 429, Strand, W.C., on receipt of proof.

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 at 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 at his private house.

TELEGRAPHIC ADDRESS.—The telegraphic address of the EDITOR of the BRITISH MEDICAL JOURNAL is *Atiology, London*. The telegraphic address of the MANAGER of the BRITISH MEDICAL JOURNAL is *Articulato, London*.

Queries, answers, and communications relating to subjects to which special departments of the BRITISH MEDICAL JOURNAL are devoted will be found under their respective headings.

QUERIES.

A. P., who has a patient of fair complexion with one eyebrow white and the other brown, asks what would be the best way to colour them so as to have both the same colour?

MOTOR would like to know if any brother practitioner has had experience of an "Ideal" motor car (Benz system) as manufactured by Hewetsons, Ltd.

T. L. asks for information as to "a sanatorium (seaside), convalescent home, or such institution, where a girl, aged about 16, could be sent, whose parents can pay from 15s. to 30s. a week; she may or may not occasionally require catheterisation; in the neighbourhood of Margate preferred."

ALUMNUS would be grateful for practical information respecting electrolysis as a depilatory, more especially as to: (a) The most suitable apparatus, and where such may be obtained; (b) The strength of current necessary; (c) The length of time the current should pass to get satisfactory results.

MOSQUITOS AND MALARIA.

MAJOR J. D. RECKITT, R.A.M.C. (Aldershot) writes: In reading over the very interesting lecture of Major Ronald Ross, I find it stated that he has known localities where, in spite of drainage and cultivation, the most virulent malaria remains. Though not in the least questioning the accuracy of the observation, I am much interested to know what particular localities are referred to, and how the ground was cultivated.

INTRODUCTION OF JUNIOR PARTNER.

A MEMBER FOR THIRTY YEARS asks for information as to the usages of the profession in introducing a young partner.

* * We are indebted to an experienced member of the Association for the following answer: Every reasonable opportunity should be taken to introduce the junior partner socially and professionally to all classes in the practice. This is necessary and just, not only to the junior, but is also conducive to the best interests of the senior partner.

ANSWERS.

I.M.S. has omitted to enclose his card.

DR. H. E. HAYNES (Evesham) writes: In answer to "A. B.'s communication in the BRITISH MEDICAL JOURNAL of June 24th: I can recommend "The Home," Greenhill, Evesham, as a suitable nursing home for a case of subacute rheumatism. The house is beautifully situated in its own grounds of several acres, and the climate is very mild. "A. B." might communicate direct with Mrs. Hoddinott, the Lady Superintendent.

T. B.—The case as put by our correspondent is not quite clear. A patient is quite at liberty to change his medical attendant, and any practitioner called in after the other has been courteously dismissed is perfectly free to take charge of the case unless there have been certain relations between the two doctors which would make this an indelicate proceeding. For instance, if A. sees a case to oblige B. as his substitute during B.'s illness or absence, A. should refuse to continue in attendance even if asked to do so.

C. S. T.—We believe that the best book on the geological and climatic conditions of the southern counties of England is *Climates and Baths of Great Britain* (written by a committee of the Royal Medical and Chirurgical Society, of which the first volume was published in 1895 by Macmillan and Co.). The second volume, which is nearly finished and will probably appear next year, includes the climates of the northern, eastern, and midland portions of Great Britain. We know of no other trustworthy work on the subject. The first volume of the above work can be had separately.

ELECTROLYSIS OF NÆVUS.

MR. SHALDERS MILLER, F.R.C.S. (Slough), in reply to "Bunsen's" query in the BRITISH MEDICAL JOURNAL of June 24th, writes: He should possess himself of some book such as the late Dr. Stevenson's on the subject, which involves too much detail for your "Answers" column. His Daniell battery is not suitable; the Bunsen battery, if in good order and the nœvus be small might answer, but all primary cells run down quickly in use through polarisation. Accumulators are much better.

REMOVAL OF SUPERFLUOUS HAIRS.

S. writes: Hair on the lip in women, when disfiguring, should be removed by means of epilation forceps. The patient should do it for herself before the looking glass. The hairs will grow again, but after the lip has once been cleared it will take very little time or trouble to keep it permanently free. The satisfaction felt by those who have been shown how to rid themselves of this annoying disfigurement in this easy way is very great.

RECURRENT SNEEZING AND NASAL CATARRH.

DR. T. AQUINO (Senior Inspecting Medical Officer, Bhusawal) writes: I would advise "Medical Correspondent" (BRITISH MEDICAL JOURNAL, May 20th, 1899, p. 1259) to try tincture of stramonium for his recurrent sneezing and nasal catarrh. This preparation has proved most efficacious in my hands; 15 minims of it will stop the sneezing and catarrh at once if taken at the commencement of the attack. The dose may have to be increased to 20 to 30 minims, as the patient becomes tolerant to its action, or it may have to be repeated twice or thrice every third or fourth hour. It should be taken in about an ounce of water. Brandy may be added to it if there should be weakness of the heart. I tried several medicines, both locally and internally, before I hit upon this