His mother died, aged 52 years, from some form of malignant disease, which was said to have "run into consumption." one sister died of consumption at the age of 21, the other has suffered for twenty years from what is most likely disseminated sclerosis. The father is living, and is quite robust.

No post-mortem examination was obtainable unfortunately, neither were any special observations made respecting cranial or jaw enlargement; the thyroid body was unaltered. no observations of anything abnormal connected with the thyroid body, of the presence of homonymous hemianopia, nor of optic neuritis. The important feature of this case seems to be its bearing on the causation of the acute malignant form of acromegaly, the duration of which—three to four years—is nevertheless longer than in this case. It may fairly be assumed that there were secondary deposits involving the pituitary body which gave rise to enlargement of the hands. In the case of Caton and Paul, Hansemann, Mosse and Daunic, Pincles, Uhthoff, and Wolf the clinical aspects were somewhat similar, and in all sarcoma involved the hypo-

REFERENCES.
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Woch., 1897. 8 417. Bull de la Soc. Anatom. de Paris, 1895, p. 633. Wien. Med.
Club, June 12th, 1895, etc.

MEMORANDA

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

CASE OF INVERSIO UTERI.
On June 26th I was summoned by a midwife to visit Mrs. L., just confined of her sixth child, as "something very unusual had come away." On arrival I found the woman pale and collapsed, with a large bleeding substance lying in a pool of blood between the legs. I first injected about a drachm of ether hypodermically, and made her swallow two tablespoonfuls of brandy in cold water. On examining the "substance" I found the uterus with the placenta adherent all over its interest of the state of the st verted surface. Knowing that the peeling off of the after-birth has been strongly condemned by some high authorities, I tried first to reduce the organ en masse, but found it impossible so to do. I then separated the secundines completely (hæmorrhage ceasing immediately), grasped the cervical end of the womb. Kneading the organ gradually and firmly up until I was satisfied that it was well above the brim. I then generally an approximation of the secundary and the property of the property of the secundary and the property of the secundary and the secundary fied that it was well above the brim, I then screwed up my

an unmistakable flap.

I bound the legs firmly together, applied a binder and pad, and gave a large dose of ergot. The woman's recovery has been in every way satisfactory; the temperature never rose above 101°, and that only on the eighth day. On July 13th she was quite convalescent. I have attended some 2,000 cases of midwifery, but never experienced so untoward an accident before. I am satisfied that no blame whatever attached to the midwife, who is a most capable woman.

fingers, and pressed persistently on the inverted fundus, when in about three minutes I was rewarded by its reduction with

D. M. McVEAGH, M.K.Q C.P., etc.

DARK SCLEROTICS AND FRAGILITAS OSSIUM Arthelast annual meeting of the Dermatological Society of Great Britain and Ireland I showed a young woman suffering from eczema who had remarkably dark sclerotics. When she first consulted me on account of her eczema, a fortnight before the meeting of the Society took place, my attention was arrested by the extraordinary transparency of the whites of her eyes, which allowed one to see the dark pigmentation of the choroid underneath. I asked her if she had ever had any bones broken, and she told me she had had several times, on one occasion when she had merely fallen on the bed. She also told me that her father's eyes were like hers, and that he had several times broken his bones, and that only recently he had broken an arm by putting his coat on.

My reason for putting the questions to the girl was that when in general practice twenty years ago I met with a little

boy who during the two years that I was his medical attendant suffered from no fewer than nine independent fractures. He fractured his arms four times and thighs and legs five times, in addition to a slight green-stick fracture of the tibia which his mother treated herself by binding the limb at the seat of the fracture with a necktie. This child had the darkest sclerotics which I ever remember to have seen. From inquiries that I have made from several well-known surgeons this association of dark sclerotics and fragility of bones has not been recognised. Treves, in his well-known work on Surgery (1895) says that we had better admit that we know nothing about the cause of this condition in bones. This being the present state of our knowledge 1 think my observation is worth publishing. I would suggest that the transparency of the sclerotics indicates a want of quantity or quality of the fibrous tissue forming the framework of the various organs of the body, and probably explains the want of spring or toughness in the bones of these peculiar individuals.

Wimpole Street, W.

ALFRED EDDOWES, M.D.

HYSTERIA IN A MALE.

F. H., a chairmaker, a stout, strong-looking young man, aged 26, usually in good health, had, however, an ingrowing toenail on the left great toe, but, as a rule, suffered little inconvenience from it. On July 14th he had walked more than usual, and complained of shooting pains from the toe, which he said, affected his heart, so that he begged an acquaintance to pluck it (the heart) out, as he could not stand the pain of it any longer. Soon afterwards he was seen to slide from the chair on which he was sitting to the ground, and then began to throw himself about in violent paroxysms, striking the back of his head against the ground, and snapping with his teeth at the friends who were trying to hold him down. The spasms, which at first were extremely violent, appeared to come from the affected toe, and he soon became unconscious, but not to the same extent as an epileptic, for he occasionally sat up, stared at his friends, and called one or two of them by name; his face was red, not pallid; nor did he void urine or fæces. He acted exactly like a woman in a fit of hysteria. One peculiar feature of the case was the violent action of the abdominal muscles, which moved up and down rapidly for at least a minute, while all the other muscles of the body were still, and there were also severe spasms of the diaphragm, during which the patient would exclaim, "My heart! my heart!" but neither palpation nor the stethoscope gave any confirmatory evidence of cardiac disturbance.

I had him carried indoors and laid on a mattress on the floor, where the paroxysms continued as before until a morphine powder I had shaken dry into his mouth overpowered him and he fell asleep, to wake up next morning very stiff and sore from his unusual muscular exertions, but without any pain in his toe which appeared to be the hysterogenic spot. During the paroxysms the patient moaned a good deal and gnashed his teeth, but his tongue was not bitten, though he caught the neck of his shirt in his mouth and tore it. On recovery he

had no recollection of what had taken place.

I may add that the man is very muscular, especially in the upper part of the body, that he weighs is stone 7 lbs., and is 5 feet 7 inches in height. He had never been affected in the same way before, so that his attack may be put down to nervous exhaustion arising from the pain caused by the ingrowing toenail, which was unduly irritated by a long walk in very hot weather, in a pair of brown leather tightly-fitting

High Wycombe, Bucks.

W. T. GREENE, M.D.

FIBROMYOMA OF THE VAGINA.

G., aged 40, multipara, a Rajputin, came under my care at the Raghoraj Singh Hospital, Sutna, Central India, in the end of 1899, complaining of what she described as a prolapsed womb.

Outside the vulvar cleft was a tumour the size of a large cocoanut, which further examination proved to be a sessile tumour originating from the upper part of the anterior vaginal wall. On emerging from the vulva, which event was dated about a year before the patient consulted me, the tumour brought down with it the urethra, part of the bladder, and the anterior vaginal wall, and the os uteri could be felt behind the tumour just inside the vulvar opening. The tumour was readily enucleated, and, redundant capsule having been removed, the cavity left was stuffed with iodoform and the edges brought together. The uterus having been replaced in its normal position, iodoform-glycerine plugs were used as a vaginal dressing, and the wound rapidly healed. The patient was discharged cured on the eighth day after operation. The case is of interest on account of its rarity.¹

PAT. A. Weir, M.A., M.B., C.M.,

Sutna, Central India. Lieutenant-Colonel, I.M.S.

REPORTS

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

CHICHESTER INFIRMARY.

CASE OF IDIOPATHIC TETANUS: DEATH IN THIRTY-SIX HOURS FROM ONSET OF SYMPTOMS.

(Under the care of A. E. BUCKELL, M.D.Lond.,

Honorary Physician to the Hospital.)
[Reported by David Ewart, M.B., Ch.B.Ed., House-Surgeon.] THE patient, a boy, aged 12, was in his usual health on April 23rd last, and attended school, but about 1 A.M. on April 24th he complained of "face ache." At 7 A.M. he found he could not get out of bed on account of stiffness and pain in the neck and back. Solid food was offered to him, but he could not take it on account of difficulty in mastication; he, however, swallowed fluids fairly well. During the morning the symptoms became more marked, and a medical man was sent for. Dr. A. E. Buckell saw the case in the afternoon and advised immediate recognition. advised immediate removal to this infirmary, where he was admitted at 6 P.M. His temperature was then 98°, his pulse 96, and his respirations 22. There was no history of any injury, nor was there any evidence of a wound old or recent. The muscles of the neck and back were quite rigid. The head was retracted and there was opisthotonos; the jaws could be separated about a quarter of an inch only. Risus sardonicus was well marked. The muscles of the extremities were not involved in the rigidity. The superficial and deep reflexes were much increased. His intellectual faculties were unimpaired, but he spoke only in monosyllables. There was profuse perspiration. Crepitations were audible all over the chest.

The rigidity of the muscles of the face, neck, and back was continuous until death. From the first paroxysms of increased rigidity of these muscles were frequent. Whilst the patient must be these mustles were request. Whilst the patient was in the infirmary seventy-five paroxysms were noted. Most of them were only momentary, especially in the earlier part of the illness. The more severe, which became increasingly frequent, lasted from one to two minutes. During them the patient groaned, the head became more retracted. the back more arched, and the "risus" more marked.
ally the fingers of one or both hands were clenched. lower limbs were sometimes extended, whilst at others one knee was drawn up. Such contractions of the muscles of the extremities seemed to be rather an expression of pain due to the spasm than a part of the rigidity. The pulse-rate and respirations also became much more rapid during the spasms, and perspiration was profuse. It was only during the spasms, and perspiration was profuse. It was only during the later paroxysms that the respiratory movements were absolutely checked for any appreciable length of time.

During the night the patient had occasional short periods of sleep. Even then slight contractions of the facial muscles occasionally occurred. The temperature kept steadily rising; at 2 A.M. on April 25th it was 100°, at 6 A.M. 100°, at 10 A.M. 100.6°, and shortly before death, which occurred at 1 P.M., it was 103°.

In regard to treatment the patient was put on full doses of potassium bromide and chloral hydrate. On the evening of admission 20 c.cm. of antitetanus serum were injected subcutaneously, this being all that was then available. An attempt was made to control the more severe paroxysms by chloroform, but they returned shortly after its withdrawal. None of these measures seemed to have any favourable influence whatever on the course of the disease. Rectal feeding BRITISH MEDICAL JOURNAL, February 4th, 1899, paper by Dr. Philipps.

was resorted to, as it was found impossible to administer nourishment by the mouth. A post-mortem examination was made when a further search was made for any wound or abrasion of surface, but none was found. In regard to the internal organs no naked-eye pathological change was found except considerable congestion of both lungs.

REPORTS OF SOCIETIES.

EDINBURGH OBSTETRICAL SOCIETY.

R. MILNE MURRAY, M.D., F.R.C.P.E., F.R.S.E., President, in the Chair.

Wednesday, July 11th, 1900.

THE TREATMENT OF DYSMENORRHEA.

Dr. Haultain, in opening a discussion on this subject, defined dysmenorrhea as "pain associated with and dependent upon menstruation of such severity as to interfere materially with the sufferer's performance of her usual duties." As a rule the pain was local and pelvic. Pain of the character defined was to be considered at all times pathological, and was usually due to local abnormal conditions. The causes of dysmenorrhœa were inflammatory and obstructive, alone or combined. The inflammatory variety embraced congestive and inflammatory conditions of the uterus and its appendages. The "obstructive" variety was necessarily confined to morbid states of the uterus alone. A rational explanation of the pain in the latter was that the blood which escaped from the capillaries of the uterine mucosa was impeded in its escape from the uterus. This might be by a temporary state of spasm, or by a permanent blocking of the uterine canal through flexions, new growths, or developmental stenosis. The obstructed flow naturally caused distension of the uterus from retention of blood, which might or might not coagulate in the retenies experience of the state in the uterine cavity, and which stimulated forcible contrac-tion of the organ for its expulsion. As the result of uterine distension and contraction pain was complained of. When the pain was inflammatory it was due to the vascularity which occurred before menstruation still further congesting the already inflamed tissues. The discomfort was necessarily diminished after the depletion which occurred during the flow. From a clinical standpoint dysmenorrhoea might be considered as of two main types—menstrual and premenstrual. Both might be present. When obstruction alone existed the pain occurred at the time of, or immediately before, the flow; while in the inflammatory variety the pain would be most pronounced during the period of congestion before the actual flow occurred. If the inflamed organs were only the appendance of flow occurred. If the inflamed organs were only the appendages, the depletion acquired by the flow occurring necessarily gave considerable relief; thus the so-called ovarian or tubal dysmenorrhea was mainly premenstrual in its character. On the other hand, in uterine inflammation, such as endometritis, the pain, though premenstrual, might be continued through the period by the contractions of the tender uterus, or by the thickened and swollen diseased mucosa offering a block to the easy exit of the menstrual blood. In the same way concepted or inflamed overies with blood. In the same way congested or inflamed ovaries, with endometritis, gave rise to the combined types of premenstrual and menstrual dysmenorrhoea. The obstructive or menstrual variety greatly preponderated as the initial type in the proportion of quite 10 to 1. The primarily purely obstructive tended in due course to become associated with the premenstrual or inflammatory, the latter being a secondary result of the former—primary obstruction, secondary endometritis, and perhaps ovaritis. As to treatment: (1) Was it possible to cure or ameliorate the condition? If so, how? (2) Was it justifiable to adopt local treatment with the methods at our disposal? The former inquiry might be answered in the affirmative. The different causes of the symptom had to be inquired into, and action taken accordingly. Stenosis and flexions were the most common causes, congenital ante-flexion with stenosis. To remedy this dilatation might be forcible or gradual. Dr. Haultain had found the use of the tent, or the forcible dilatation by bougies up to 15 French or 10 Hegar most efficacious. In the majority of aggravated cases there was a coincident endometritis, which curettage with subsequent hot vaginal douching materially assisted in effecting a more rapid and permanent cure. Incision of the

aggressive, tyrannical. As for the non-smoker, much as he may long for a breath of air pure and undefiled, he is called a churl if he says aught but "Oh, no, I don't object; pray please yourself."—I am, etc.,

Bradford-on-Avon, July 7th.

JOHN BEDDOE.

THE JOINT COMMITTEE TO OPPOSE MIDWIVES' REGISTRATION.

Srr,—I would suggest to any who may propose to themselves to contribute to the funds of the Joint Committee to Oppose Midwives' Registration that they should first apply to the Honorary Secretaries for copies of the documents for the distribution of the distribution of the distribution of the secretaries for copies of the documents for the distribution of the secretaries for copies of the documents for the distribution of the secretaries for copies of the documents for the distribution of the secretaries for copies of the documents for the distribution of the secretaries for copies of the documents for the distribution of the secretaries for copies of the documents for the distribution of the secretaries for copies of the documents for the distribution of the secretaries for copies of the documents for the distribution of the secretaries for copies of the documents for the distribution of the secretaries for copies of the documents for the distribution of the secretaries for copies of the documents for the distribution of the secretaries for copies of the documents for the distribution of the secretaries for copies of the documents for the distribution of the secretaries for copies of the documents for the distribution of the secretaries for copies of the documents for the secretaries for copies of the documents for the secretaries for copies of the secretaries fo tribution of which to the public under professional auspices they would thus become directly responsible. These consist of a Report and Measures in Progress, dated April 26th, 1900; a Memorial by Constituents, the last three foolscap pages of which are occupied with Considerations of Public Safety and Public Faith opposed to the Registration of Midwives; attached to the last, instructions as to the use of the memorial, addressed "To the Constituent who kindly takes charge of this Memorial;" and a Copy of Parliamentary Whip referred to in accompanying Address, upon which is printed an abstract of the Considerations above mentioned.

If intending supporters decide, upon perusal of these documents, that the Committee's "literature" merits to the full my criticism of it in the British Medical Journal of July 7th-of which the Committee have deemed it wiser to take no notice, and there at least I am inclined to agree with them then I trust they will save the profession from being more widely discredited by the same means.—I am, etc., Barrow-on-Humber, July 18th. Thos. M. WATT.

CO-OPERATION AS APPLIED TO MEDICAL AND SURGICAL REQUIREMENTS.

SIR,—I notice that in the BRITISH MEDICAL July 14th a correspondent signing himself "Birmingham," controverts a statement of mine in a letter I sent on the

above subject a few weeks ago.

Your correspondent is quite correct in his assertion that a traveller representing the Surgical Supply Association may have called on him last year. I find from the office that the Association gave up all their travellers last year, and my statement referred to the present time. For the first two years the Association, I suppose, found it necessary to employ these agents to initiate and establish the business on a sound footing, but I am now informed by the secretary that to save expense and to carry out the aims of the Association, the Board, who are all medical men (with the exception of the managing director) and general practitioners, decided during last year to dispense with all travellers, and to ask all members and customers to send their orders direct to the head office. If "Birmingham" sends his to 35, Market Street in future, instead of waiting for someone to call and solicit him, he will find that they will be promptly attended to as mine have

I notice that "Birmingham" holds the same views as I do as to the annoyance and loss of time that travellers occasion to medical men, because he says in his last sentence that "he gave the traveller an order to get rid of him." I have often done the same thing with the same object, and occasionally have written afterwards to rescind the order. The Secretary of the Surgical Supply Association has told me that very often (during their employment of travellers) medical men have afterwards repudiated either the items or the amount of the order which the traveller has handed in. This unpleasantness is avoided by the course I suggest.—I am, etc.,
July 16th.

Another M.D., M.S.

July 16th. Another M.D., M.S.

** We shall not be able to insert further letters on this subiect.

MEMORIAL TO THE MILITARY AND CIV MEMBERS OF THE MEDICAL PROFESSION WHO HAVE LOST THEIR LIVES IN THE SOUTH AND CIVIL AFRICAN WAR.

SIR,—The Princess Christian Convalescent Homes for Soldiers and Sailors, now in course of erection at Bisley, will soon be available for use. Many of the beds have already been endowed. The Queen has given two, the Duke and Duchess

of York one bed for a soldier or sailor, the Princess Christian one for the King's Royal Rifles, and Princess Victoria of Schleswig-Holstein and Princess Aribert of Anhalt one bed for

"greenjacket," etc.
Princess Christian has suggested to me her wish that a bed should be endowed for the sole use of the non-commissioned officers and men of the Royal Army Medical Corps. I proposed that the bed should be endowed as a memorial to the members of the medical profession, both military and civil, who have lost their lives in the war in South Africa. The ready response which I have received from a few friends to whom I applied privately encourages me to hope that the scheme will commend itself to the medical profession generally. The amount required for the permanent endowment of a bed is £600, and towards this the Committee of the R.A.M.C. South Africa Fund has voted £200. From other sources I have received £125, and I now venture to appeal to the medical profession to make up the amount required (£275). I append a first list of subscriptions. Cheques or postal orders should be made out to Mrs. Meredith, and crossed "Barclay and Co. Princess Christian Bed." The fund, when completed, will be handed over to the trustees appointed for all the endowed beds.—I am, etc.,
21, Manchester Square, W., July 23rd. CAROLINE S. MEREDITH.

LIST OF SUBSCRIPTIONS.

	£	s.	d.		£	s.	d.
R.A.M.C. South Africa				Lady Vaughan Williams	5	c	o,
Africa Fund	200			Mrs. Lang Elder	5	5	o.
Sir William Broadbent	20	0	0	Mr. Charters Symonds	3	3	o,
Sir R. Douglas Powell			О		3	3	0
Dr. Church	10	10	0	Mrs. Wickham Flower	2	2	O.
Dr. Buzzard				Mrs. Barlow	2	2	٥.
Mr. Alfred Cooper, F.R.C.S.				A Friend	2	2	0
	10	0	0	Mr. Alfred Willett, F.R.C.S.	2	0	ο.
Sir Lauder Brunton		5			2	0	0
Dr. Barlow		5		Mrs. Johnson	1	О	o.
Mr. H. T. Butlin, F.R.C.S	5	ō	0	Mrs. Fletcher	1	0	0
Dr. Playfair	5	0	0	_			
Lady Broadbent	5	0	0	£	326	7	C.

UNIVERSITIES AND COLLEGES,

UNIVERSITY OF LONDON.

INTERMEDIATE EXAMINATION IN MEDICINE (HONOURS).—The following: candidates have satisfied the Examiners in the subjects undernoted.

Anatomy.—First Class: J. E. Adams, St. Thomas's Hospital; M. A. M. Fitzmaurice-Kelly. St. Mary's Hospital; C. W. Forsyth, Owens College; H. A. Lyth (Exhibition and Gold Medal), University College; R. P. Rowlands (Gold Medal), Guy's Hospital; A. R. Short, B. Sc., University College, Bristol. Third Class: A. Hamilton, St. Bartholomew's Hospital; Constance Brodribb Slater, London School of Medicine and Royal Free Hospital; J. H. Watson, University College of Liverpool and King's College.

Physiology and His:ology.—First Class: P. R. Bolus (Gold Medal), Guy's Hospital; E. H. B. Milsom, Guy's Hospital; A. R. Short, B.Sc. (Exhibition and Gold Medal), University College, Bristol. Second Class: Helen Chambers, London School of Medicine and Royal Free Hospital; H. E. Corbin, B.Sc., St. Mary's Hospital; M. A. M. Fitzmaurice Kelly, St. Mary's Hospital; E. G. Goldie, Guy's Hospital; H. A. Lyth, University College; Constance Brodribb Slater, London School of Medicine and Royal Free Hospital. Third Class: D. H. De Souza, B.Sc., University College; H. R. Kidner, St. Bartholome's Hospital; C. E. W. Lyth, University College, Sheffield; N. I. Spriggs, Guy's Hospital.

Hospital; C. E. W. Lyun, University Concess, Statement, Guy's Hospital.

yanic Chemistry.—First Class: H. E. Corbin, B.Sc. (Exhibition and Gold Medal), St. Mary's Hospital; *M. Culpin, London Hospital.

Third Class: P. R. Bolus, Guy's Hospital; E. H. B. Milsom, Guy's

Gold Medal), St. Mary's Hospital; *M. Culpin, London Hospital. Third Class: P. R. Bolus, Guy's Hospital; E. H. B. Milsom, Guy's Hospital; A. R. Short, B.Sc. (Exhibition and Gold Medal), University College, Bristol; †Constance Brodribb Slater, London School of Medicine and Royal Free Hospital. Second Class: T. P. Baldwin, St. Bartholomew's Hospital; H. S. Brown, Guy's Hospital; M. A. M. Fitzmaurice-Kelly, St. Mary's Hospital; C. C. Robinson, St. Bartholomew's Hospital; H. E. Corbin, St. Mary's Hospital; D. H. De Souza, University College.

*Obtained number of marks qualifying for the Exhibition.
†Obtained number of marks qualifying for the Medal.
INTERMEDIATE EXAMINATION IN MEDICINE: PASS LIST.—The following candidates have satisfied the Examiners:
Entire Examination.—First Division: J. Brainwaite, Guy's Hospital; W. A. Brend, B.Sc., King's College; G. H. Brown, Owens College; H. B. Day, King's College; J. A. Drake, King's College; H. C. Lees, St. Mary's Hospital; Agnes Agatha Parson, London School of Medicine for Women; R. Phillips, Middlesx Hospital; D. Sewell, Owens College. Second Division: J. B. Albury, St. Mary's Hospital; F. H. Alexander. University College; G. F. H. Arkey, King's College; G. E. Aubrey. St. Bartholomew's Hospital; Anne Thompson Barnard, London School of Medicine for Women; Ruth Levy Cecilia Bell, London School of Medicine for Women; Ruth Levy

Bensusan, London School of Medicine for Women; G. A. Bosson, University College; W. F. Box, Guy's Hospital; S. A. Boyd, Charing Cross Hospital; W. Briggs, Owens College; Agnes Maud Brown, Queen Margaret College, Glasgow, and London School of Medicine; G. L. Bunting. Westminster Hospital and Birkbeck Institute; J. Burfield, St. Bartholomew's Hospital; J. H. Burgess, St. Mary's Hospital; H. De Vine, University College, Bristol; J. T. D'Ewart, Owens College; A. D. Edwards, University College, Cardiff; F. W. Fawssett, Guy's Hospital; A. F. Forster, St. Bartholomew's Hospital; J. G. French, St. Mary's Hospital; P. W. Gillitt, Middlesex Hospital; J. G. French, St. Mary's Hospital; P. W. Gillitt, Middlesex Hospital; J. G. French, St. Bartholomew's Hospital; Elizabeth Hill, London School of Medicine for Women; Ethel Florence Iredell, B. A., London School of Medicine and Royal Free Hospital; S. Johnson, St. Mary's Hospital; I. D. Jones, Middlesex Hospital; W. R. Kirkness, King's College; R. Larkin, Guy's Hospital; A. Lewthwaite, University College; G. B. Mokean, University College; L. H. Moiser, Guy's Hospital; G. P. Mosscrop, London Hospital and Alwyne Institute; A. C. Motta, St. Mary's Hospital; Mary Townsend, London School of Medicine for Women; Laura Sobey Veale, London School of Medicine and Royal Free Hospital; B. Wedd, Guy's Hospital; E. C. Whitehead, Westminster Hospital; Hidda Kate Whittingham, London School of Medicine for Women; Excudding Physiology—First Division: G. C. Adeney, St. Thomas's Hospital; C. D. Pye-Smith, Guy's Hospital; E. W. Strange, Guy's Hospital; C. D. Pye-Smith, Guy's Hospital; E. W. Strange, Guy's Hospital; C. D. Pye-Smith, Guy's Hospital; E. W. Strange, Guy's Hospital; Ruby Ellen Glanville, London School of Medicine for Women; H. M. Goldstein Guy's Hospital; C. B. F. Churchill, Guy's Hospital; C. D. Pye-Smith, Guy's Hospital; C. Mary's Hospital; H. B. Simpson, University College; M. W. S. Smith, University College; J. B. Stephens, St. Mary's Hospital; R. A. S. Sunderland, St. Bartholomew'

of Edinburgh.

of Edinburgh.

Physiology snly.—Second Division: H. E. Barnes. St. Mary's Hospital;
F. A. Beattie, Guy's Hospital; A. H. Bradley, Mason University
College; J. D. Bridger, Guy's Hospital and Alwyne Institute;
A. Cameron, Middlesex Hospital: D. C. Evans, St. Bartholomew's
Hospital; J. Evans, Guy's Hospital; J. W. Fox, London Hospital;
D. S. Graves, Guy's Hospital; Helen Moore, London School of Medicine and King's College; Marie Louise Pethick, London School of
Medicine and Royal Free Hospital; G. S. Robertson, Guy's Hospital; A. R. Schofield, London Hospital; W. B. Vaile, London Hospital.

UNIVERSITY OF EDINBURGH.
FIRST PROFESSIONAL EXAMINATION FOR THE DEGREES OF M.B., CH.B.
-The following candidates have passed this examination in the subjects

FIRST PROFESSIONAL EXAMINATION FOR THE DEGREES OF M.B., CH.B.—The following candidates have passed this examination in the subjects undernoted:

*Physics.—T. Addis, F. Aitken, M. I. Ali Khan, J. Allan, W. Anderson, M. Ashruff, C. T. Ayana, E. A. Aylward, J. W. H. Babbington, C. R. M. Baker, J. M. Barkley, J. R. Bartholomew, W. J. E. Bell, I. W. Brebner, D. Bremner, T. Campbell, T. F. Campbell, T. E. Carlyle, V. T. Carruthers, D. M. C. Church, J. Clarke, M. L. Cohen, J. G. Craig, P. Donald, E. J. Elliot, W. H. Forsyth, O. M. Gericke, H. V. Goldstein, Eleanor A. Gorrie, W. Grant, J. Green, C. O. Griffith, E. J. C. Groves, J. T. Gunn, G. Hadden, F. A. Hanan, J. D. Harmer, P. A. Harry, G. W. Harty, K. U. A. Inniss, J. P. S. Jamieson, J. Jardine, R. L. Jones, H. H. Joubert, G. P. Joy, A. G. Leitch, J. Lindsay, S. M. Livesey, W. L. Locke, W. Lumsden, S. A. M'Clintock, J. S. MacDonald, H. J. M'Grath, J. Mackenzie (Westhall), J. Mackenzie (Lochrin), W. MacLaren, A. C. M'Master, H. G. Marshall, W. Martin, L. S. Milne, C. E. S. Mitchell, J. S. Mitchell, P. R. S. Muir, Anna M. Mulholland, W. M. Mumby, A. W. Neill, G. P. Norman, H. J. Norman, R. G. S. Orbell, A. Pampellonne, J. S. Peebles, A. C. Pickering, Florence M. S. Price, D. S. Rao, J. W. N. Roberts, T. Robertson, J. Robinson, T. Scoresby-Jackson, J. Scott, A. I. Shepheard-Walwyn, D. W. Sibbald, E. M. Simmers, W. H. Simpson, F. R. Sinton, E. H. Smith, S. A. Smith, R. A. L. van Someren, G. Stewart, H. G. Sutherland, F. J. G. Tocher, Rose C. Townsend, G. H. Ussher, R. W. H. Wallace, T. Wallace, T. Walls, H. E. A. Washbourn, J. D. Wells, W. H. Welsh, R. M. Wishart, T. Wright, and J. T. D. Young.

**Botany.—T. Addis, F. Aitken, M. I. Ali Khan, J. C. D. Allan, D. I. Anderson, D. W. Anderson, W. Anderson, M. Ashruff, C. T. Ayana, E. A. Aylward, J. W. H. Babington, F. Baillie, C. F. Bainbridge, C. R. M. Baker, J. M. Barkley, R. B. Barnetson, J. R. Bartholomew, W. J. Basson, B. Baty, W. P. Beattie, M. M. Sujjad Beg, D Bell, W. L. Cathels, R. A. Chapman, J. Chisholm, D. M. C.

HARTY, G. W. Harty, Ada Hatchard, A. W. Hogg, Jane S. Hogg, J. Ings, K. U. A. Inniss, D. S. M. Izatt, Ada Jackson, Annie Jackson, J. P. S. Jamieson, J. Jardine, W. Jarvis, W. W. Johns, R. L. Jones, J. H. H. Joubert, G. P. Joy, S. F. Jung, J. S. Kinross, G. F. S. Landen, F. E. Larkins, S. W. S. Leary, A. J. Lewis, C. W. Lewis, J. Lindsay, A. A. Little, W. L. Locke, W. Lumsden, D. H. C. M'arthur, A. D. M'Cullum, S. A. M'Lintock, W. M'Conaghy, J. W. M'Ewan, P. M'Ewan, J. P. M'Gowan, H. R. M'Intyre, J. Mackenzie, J. Mackenzie, Amy M. Mackintosh, N. M'Leod, A. C. M'Master, C. M'Neil, A. MacRae, N. N. G. C. M'Vean, W. Magill, A. Malseed, M. M. Mamourian, Ada E. Milier, L. S. Milne, J. S. Mitchell, K. A. Moody-Stuart, H. B. Morris, D. L. Morrison, W. M. Munby, D. S. Murray, J. K. Murray, A. R. C. S. Orbell, Ethel. A. Orchard, G. Ormrod, W. Batton, D. H. Paul, A. C. Pickering, A. M. Pirrie, Agnes E. Porter, D. S. Rao, W. E. Reynolds, C. S. U. Rippon, H. D. Robb, T. E. Roberts, Margaret H. Robertson, T. Robertson, J. Robinson, S. C. Roy, C. S. Ryles, W. K. Sanderson, Elsie B. Saunders, H. M. Sauzier, T. Scoresby-Jackson, J. Scott, J. G. B. Shand, E. Sharpe, A. I. Shepheart-Walwyn, D. W. Sibbald, E. M. Simmers, W. H. Simpson, F. R. Sinton, L. H. Skene, C. J. Smith, E. H. Smith, G. M. Smith, S. A. Smith, W. T. Smith, D. M. Y. Sommerville, P. Steele, G. Stewart, H. G. Sutherland, H. M. Thompson, F. J. G. Tocher, Rose C. Townend, Nettice B. Turnbull, Caroline Twigge, G. H. Ussher, F. L. de Verteuil, W. Waddell, Frances M. Wakefield, R. C. Walker, F. E. Walt, T. Walsh, D. R. P. Waither, H. E. A. Washbourn, B. H. Watt, R. H. Wait, J. R. P. Weit, H. M. Whittell, A. Wight, Elsie B. Wilkie, T. Waish, D. R. P. Waither, H. E. A. Washbourn, B. H. Watt, R. H. Wait, J. R. P. Drope, F. J. C. Tarruthers, Mildred M. Cathels, A. G. Coullie, P. Donald, S. E. Douglas, J. J. M. Falconer, G. H. Fitzwilliams, V. R. Gorakshakar, T. Gowans, T. Grant, W. Grant, E. J. C. Groves, Elizabeth C. Gunn, Jane S. Hogg, J. H. Hume, J. M. Johnston, G. P. J

UNIVERSITY OF GLASGOW.

UNIVERSITY OF GLASGOW.

SUMMER GRADUATION CEREMONY.

THE Graduation in Medicine, which marks the close of the summer session, took place in the Bute Hall on July 19th. Principal Story presided, and there was a large attendance of the friends of the successful students. The Dean of the Faculty of Medicine, Professor McCall Anderson, presented the graduates, seven of whom were ladies, who were received with loud cheering. Professor Robert Muir, of the Chair of Pathology, gave the usual graduation address, in the course of which hofered some words of advice to those who were leaving the University. He impressed on them the importance of thoroughness, patience, and honesty in all their work. In no profession was the element of trust more outstanding that in that of medicine, and he urged all to strive to be worthy of the trust put in them. He referred also to the importance of cultivating habits of careful and systematic observation, and of storing the results, whether they happened to be engaged in practice or in original research. Their work would be worth doing, and it was worth while to do it well.

The following degrees were conferred:

Doctors of Medicine (M.D.).—*J. F. Gemmill, M.A., M.B., C.M. (Thesis—A Teratological Study); †J. Adam, M.A., M.B., C.M. (Thesis—A Teratological Study); †J. Adam, M.A., M.B., C.M. (Thesis—A Teratological Study); †J. Adam, M.A., M.B., C.M. (Thesis—Butter and Treatment of Asthma); †W. C. Allan, M.B., C.M. (Thesis—On the Mental Deterioration in Epilepsy and Hemiplegia); B. Buttercase, M.B., C.M. (Thesis—Appendicitis, with Cases).

Bachelors of Medicine and Masters in Surgery (M.B., C.M.).—J. Lunn, A. M'D. Nevin, J. J. Robertson, J. W. Shane, A. Stevenson.

Bachelors of Medicine and Bachelors of Surgery (M.B., Ch.B.).—

**Tic. C. Cuthbert, M.A., †A. M'Kendrick, †L. Findlay, †A. Wilson, †E. W. Sharp, †A. R. Maclurkin, †J. F. Bennett, †A. Mair, †W. B. I. Pollock, M. Aikman, M.A., G. Arthur, G. Barbour, T. T. Bathgate, A. Binning, A. Birch, H. E. Brown, J. D. Brownlie, T. Curruthers, M

follows:-

Annabella Murdoch Clark, B.Sc., J. T. Clark, R. Clark, A. W. W. Davidson, F. L. Dickson, D. C. Douglas, J. P. Duncan, B.Sc.; A. Fraser, M.A., Lizzie Thomson Fraser, G. Garrey, W. Gibson, E. Gillespie, W. Girvan, Helen Mary Gordon, C. A. Gourlay, M.A., J. Gracie, C. H. Gunson, A. W. Harrington, I. M. Huey, T. Inglis, P. Jones, W. B. Kerr, J. D. Laidlaw, J. F. Lambie, N. M. Leys, Mary Forbes Liston, J. Lockhart, A. Logan, D. Longwill, J. Mackinnon, G. T. Maclean, M.A., B. M'Phee, R. MacN. Marshall, A. Martin, M.A., B. W. Minne, A. R. Moir, A. Munro, R. Rennie, J. D. Richmond, Margaret Mitchell Ritchie, D. Russell, J. Scott, M.A., J. Shearer, D. Ap Simon, C. C. W. Smith, J. J. Smith, J. S. Smith, A. Stewart, Gertrude Florence Fleetwood Taylor, R. Taylor, T. R. Tierney, J. C. Turnbull, W. D. Walker, G. White, M. W. Williams, T. W. Wilson, H. P. Wright.

*With Honours, † With Commendation.

UNIVERSITY OF ABERDEEN.

THE following degrees and diplomas were conferred at the graduation ceremony on Wednesday, July 18th:

Degree of Doctor of Laws (LL.D.).—Major David Prain, M.A., M.D.,

I.M.S., Director of the Botanic Gardens, Calcutta (honoris causa, in absentia)

Degree of Doctor of Laws (LLD).—Major David Prain, M.A., M.D., I.M.S., Director of the Botanic Garlens, Calcutta (honoris causal, in absential).

Degree of Doctor of Medicine (M.D.).—C. G. Cowie, M.A., M.B., C.M. (Thesis—Movable Kidney); W. S. Geddie, M.B., C.M. (Thesis—The Apparently Notable Increase in the Number of Cases of Cancer in Queensland and the Probable Causes); A. B. Lyon, M.B., C.M. (Thesis—The Theory and Practice of Counter-irritation); *A. H. Mackie, M.A., M.B., C.M.; (Thesis—A Macroscopic and Microscopic Comparison of the Vertebrate Brain, with Cases of Brain Lesion in the Human Subject.)

*Worthy of "Commendation."

Degrees of Bachelor of Medicine (M.B.) and Master in Surgery (C.M.) (Old Ordinances).—A. A. Hingston, B.A.

Degree of Bachelor of Medicine (M.B.) and Bachelor of Surgery (Ch.B.) (New Ordinances).—A. Bisset, W. F. Bisset, A. J. Craigen, W. F. Croll, M.A., A. Davidson, J. A. S. Grant, M.A., H. Johnstone, J. Macfarlane, Myra Mackenzie, C. F. Marr, H. P. Sheppard, H. W. M. Strover, F. H. Wessels, B.A., J. Wilson, C. M. Young.

Diploma in Public Health.—D. H. Ainslie, M.B. Aberd., A. V. Anderson, M.B. Aberd., † T. Fraser, M.A., M. B. Aberd., N. J. Sinclair, M.B. Aberd., D. Sivewright, M.A., M.B. Aberd., N. J. Sinclair, M.B. Aberd., † With credit.

The John Murray Medal and Scholarship and the Alexander Anderson Scholarship have been awarded to Mr. H. Fraser, M.B., Ch.B.

A distinguishing feature of the graduation ceremony lay in the conferring of the degree of M.B., Ch.B. on Miss Mackenzie, the first lady medical graduate of Aberdeen University.

UNIVERSITY COLLEGE, CARDIFF.

At the recent examinations in the University of Wales, A. D. Edwards completed the examination for the B.Sc. degree in Physiology, Anatomy, and Organic Chemistry.

CONJOINT BOARD IN IRELAND.

THIRD PROFESSIONAL EXAMINATION.—Candidates have passed this Examination as undernoted:

Examination as undernoted:

Honours, in Order of Merit.—J. P. Byrne, A. H. B. Hartford, J. M. S.

Levis, J. F. L. Keegan.

In All Subjects.—P. L. Crosbie, A. Ellenbogen, E. Glenny, P. J. Hanafin,
M. J. Johnston, Cecil R. Millar, C. J. O'Connell, W. H. M'M. Phelan,
R. A. Ross, Mary J. Shire, R. C. Vernon, J. White, T. J. Wright.

Completed the Examination.—R. Allison, S. W. Cumming, J. R. Magee,
J. F. Peart.

FINAL EXAMINATION.—Candidates have passed this examination as undernoted:

In All Subjects.—*†Miss A. M. Treasury Wala, *¡A. La Touche Darley, ¡M. Ballasby, ¡W. N. L. Cherry, ¡S. W. Cumming, ¡W. Davis, ¡H. Graff, ¡C. W. Holden, ¡J. J. O'Halloran, ¡C. J. Sullivan, ¡H. H.

Gran, 10. W. Avidas, 12. Swanzy.

Completed the Examination.—†L. A. Hare, R. G. Mostyn, IJ. L. Gilmartin, IR. A Johnston, ID. J. F. O'Donoghue, ID. Power, IA. B. Stephenson.

* With Honours. † Four Years' Scheme. † Five Years' Scheme.

SOCIETY OF APOTHECARIES OF LONDON.

PASS LIST, JULY, 1900.—The following candidates passed in:—

Surgery.—H. C. Cooper, St. George's Hospital; H. S. A. Davies (Section II), Michigan; C. J. E. Edmonds (Section I), St. Thomas's Hospital; E. Evans (Sections I and II), Middlesex Hospital; T. B. Haig (Section II), St. Bartholomew's Hospital; B. K. K. Haslam (Section I), Royal Free Hospital; H. N. Horton (Section I), Middlesex Hospital; J. Klein (Sections I and II), St. Mary's Hospital; R. Lamort, Bordeaux; R. A. Lyster, Birmingham; C. J. Marsh, University College Hospital; W. T. Meagher, Cork; R. E. Roberts (Sections I and II), St. Thomas's Hospital; F. Robinson (Sections I and II), Royal Free Hospital; E. F. Rose (Section I), St. Bartholomew's Hospital; W. C. Stanham, London Hospital; M. H. Style (Sections I and II), Royal Free Hospital; C. W. St. M. W. Toke, St. George's Hospital; E. Tyson, St. Bartholomew's Hospital.

Medicine.—P. J. R. Bucknill (Section I), Manchester; F. P. Bush, Guy's Hospital; C. W. Gibson, Guy's Hospital; J. S. Goodall (Section II), Middlesex Hospital; T. B. Haig (Sections I and II), St. Bartholomew's Hospital; J. N. K. K. Haslam (Section I), Royal Free Hospital; D. E. Lockwood (Section I), Royal Free Hospital; P. Roberts (Sections I and II), St. Thomas's Hospital; F. Roberts (Sections I and II), St. Thomas's Hospital; H. F. Wollington, Manchester.

Forensic Medicine.—F. P. Bush, Guy's Hospital; C. W. Gibson, Guy's

Hospital; T. B. Haig, St. Bartholomew's Hospital; R. E. Roberts, St. Thomas's Hospital; F. Robinson, Royal Free Hospital; J. Waters, Middlesex Hospital; A. J. Watson, St. Mary's Hospital.

Midwifery.—C. H. G. Atkyns, Birmingham; R. V. Cowey, Edinburgh and St. Mary's Hospital; A. McC. Dallas, Guy's Hospital; H. F. Willington, Manchester.

The diploma of the Society was granted to F. P. Bush, H. C. Cooper, A. McC. Dallas, H. S. A. Davies, E. Evans, J. S. Goodall, T. B. Haig, J. Klein, R. A. Lyster, W. T. Meagher, W. C. Stanham, M. H. Style, C. H. St. M. W. Toke, and F. Tyson.

ROYAL NAVY AND ARMY MEDICAL SERVICES.

THE BRITISH-INDIAN CHINA FIELD FORCE. We are informed that the medical officers detailed for the field force despatched from India for service in China is as

P.M.O., Colonel Bookey, I.M.S.

1st Madras Pioneers: Lieutenant-Colonel Esmond White, I.M.S.

1st Bengal Lancers: Major Mould, I.M.S.

24th Punjab Infantry: Captain Whitchurch, I.M.S.

1st Sikhs: Captain Henrick, I.M.S.

7th Rajputs: Captain Walton, I.M.S.

22nd Bombay Infantry: Captain Price, I.M.S.

No. 39 Native Field Hospital: Major W. W. White, I.M.S. (in charge), Captain Hamilton, I.M.S., Lieutenant McCay, I.M.S., Lieutenant Stewart, I.M.S.

No. 42 Native Field Hospital: Major Marshall, I.M.S. (in charge), Captain Harris, I.M.S., Captain Moorhead, I.M.S., Lieutenant Gidney, I.M.S.

1.M.S. No. 43 Native Field Hospital: Major Wyville Thomas, I.M.S. (in charge), Captain Carr, 1.M.S., Lieutenant Meakin, I.M.S., Lieutenant Willmore,

I.M.S.

No. 47 Native Field Hospital: Major Fooks, I.M.S. (in charge). Captain Jenney, I.M.S., Lieutenant Condon, I.M.S., Lieutenant Stewart, I.M.S.

Native General Hospital of 4co beds: Lieutenant-Colonel Waddell, I.M.S. (in charge), Major Burton, I.M.S., Lieutenant Fenton, I.M.S., Lieutenant Megaw, I.M.S.

One section No. 22 British Field Hospital: Lieutenant-Colonel Rainsford, R.A.M.C. (in charge), Major Cree, R.A.M.C.

Lord George Hamilton stated in the House of Commons on Luly 22rd that there is a good hospital at Wei-Hai-Wei and

July 23rd that there is a good hospital at Wei-Hai-Wei, and good stone barracks which could be converted to hospital use if required. The Government of India, which has already provided a hospital ship, is prepared to supplement it by converting three transports into hospital ships. The American ship Maine has been placed at the disposal of the British Government to be used at one of the Chinese ports, and the Maharajah Scindhia of Gwalior has offered a fully-equipped hospital ship, upon which he is willing to spend 20 lakhs of rupees.

ROYAL NAVY MEDICAL SERVICE.

ROYAL NAVY MEDICAL SERVICE.

THE following appointments have been made at the Admiralty:—Samuell W. Vaser, Fleet Surgeon to the Centurion, July 20th; James McC. Martin, Staff-Surgeon, to the Barfleur, July 20th.

Deputy-Inspector-General Rinso R. Siccama died at Weymouth on the 19th inst. He was appointed Surgeon, September 22nd, 1859; Staff-Surgeon, July 6th, 1868; Fleet-Surgeon, July 8th, 1878; and Deputy-Inspector-General, June 18t, 1886, and retired from the service September 30th, 1890. He was Staff-Surgeon of the Modeste during the operations in the Malay Peninsula in 1875-6, receiving the medal. He was Fleet-Surgeon of the Northumberland during the Egyptian war of 1882, and landed in medical charge of the Suez Canal Guard (medal and Khedive's bronze star). He was Fleet-Surgeon in charge of the Royal Naval Hospital at Chatham from February, 1888, to October, 1890.

ROYAL ARMY MEDICAL CORPS.
LIEUTENANT-COLONEL J. McNamara, now at Malta, has been appointed Principal Medical Officer at Cork, vice Colonel W. E. Riordan, who has

Principal Medical Omeer at Cork, **ne** Colonel W. E. Riordah, who has retired.

Brigade-Surgeon Thomas Wright died at Vanbrugh Park, Blackheath, on July 2cth, at the age of 63. He entered the service as Assistant Surgeon. April 21st, 1854; became Surgeon, June 2cth, 1865; Surgeon-Major, March 1st, 1873; and Honorary Brigade-Surgeon on retirement, May 7th, 1884. He served in the Eastern campaign in 1854-5 with the 2cth Regiment, and was at the battles of Alma and Inkerman, and at the siege of Sebastopol (medal with three clasps, and Turkish medal); in the Indian Mutiny campaign from November, 1857, with the 38th Regiment, including the capture of Meangunge and the siege and capture of Lucknow (medal with clasp), and in the Afghan war in 1878-80 (medal).

Surgeon-Major Arthur Croker died at Scaford, Sussex, on July 181h, in his 69th year. He was first appointed to the Army Medical Department, June 16th, 1854, but resigned December 26th, 1856, and was reappointed May 7th, 1858; he became Surgeon-Major, April 1st, 1873, and retired from the service, November 17th, 1877.

The following are returning from South Africa invalided: Majors Green and Anderson, R. A.M.C., Surgeon-Captain Morris, Militia Medical Staff. Civil Surgeon D. M. Adams is reported dangerously ill at Bloemfontein. Major C. G. Woods, Lieutenant J. W. H. HOUGHTON, and Lieutenant R. D. Jephson have been discharged from hospital to duty.

the wounded, was highly valued. In Aberdeen Dr. Rodger held the post of Demonstrator of Anatomy under the late Professor Struthers, and for some seventeen years was Pathologist to the Royal Infirmary. In 1897 he retired from the active staff of that institution, becoming Honorary Consulting Physician. Besides his work at the Infirmary, Dr. Rodger was for several years Physician to the General Dispensary, and was appointed by the University Court to the post of Examiner in Anatomy, Pathology, and Medicine for medical degrees.

Taking an active part, as he did for many years, in the medical societies in Aberdeen, and keenly interesting himself in the medical side of the Volunteer movement, Dr. Rodger was known to a large circle, not only as a physician of wide knowledge, but as a man of much sound judgment and common sense. His loss will be much felt.

MR. W. C. Storer Bennett, F.R.C.S., L.R.C.P., L.D.S., who died quite suddenly on July 19th, at the early age of 48, had always taken an active part in the advancement of dental surgery. At the time of his death he was President of the Representative Board of the British Dental Association; his presidency of the Odontological Society had only lately expired, and he had been very recently appointed Examiner in Dental Surgery by the Royal College of Surgeons of England. Always fond of teaching, he devoted to it a great deal of time and pains, and occupied for a considerable period of years the posts of dental surgeon and lecturer on dental surgery both at the Middlesex Hospital and the Dental Hospital. As time went on, hisabilities and his personal qualities had won for him a steadily growing appreciation at the hands of his professional brethren, by whom his loss will be much felt. In the direction of scientific work his communications were not very numerous, but the painstaking care which he devoted to such matters rendered what he wrote or said always deserving of careful consideration. For some time past he had suffered from severe attacks of cardiac distress, and he was fully cognisant that his hold upon life was very precarious. He accepted the position with quiet courage, and, although living carefully and compelled to give up active exercise, was unwilling to dissociate himself from his interests outside actual practice, preferring to continue to hold offices more or less of a public nature, so long as he might be able to do so. Mr. Bennett was not married, but he had adopted two cousins, whose home was with him.

We regret to record the death at Bloemfontein of urgeon Lieutenant-Colonel William Wellington Lake, Militia Medical Staff Corps. He was educated at St. Thomas's Hospital. He took the diplomas of L.S.A. in 1876, and of M.R.C.S. in 1877. He was formerly Obstetric House-Physician at St. Thomas's Hospital and House-Physician at the City of London Hospital for Diseases of the Chest. In later years he devoted himself to sanitary science, took the Diploma of Public Health at Cambridge, and was elected a Fellow of he Society of Medical Officers of Health and a member of the Sanitary Institute. He contributed several articles on sanitary science to the St. Thomas's Hospital Reports, to the Public Health Journal, and to our own columns. He was highly popular in Guildford, where he was Medical Officer of Health, Medical Officer of the Isolation Hospital, and Deputy-Coroner for West Surrey. The present war was not his first experience of active service, for during the Russo-Turkish war in 1878 he served as Surgeon in the Ottoman army, and was award the medal and the Fourth Class of the Mejidjieh. He was appointed Surgeon-Major in the Militia Medical Staff Corps in 1898. Early in the present year he volunteered for service in South Africa. He was gazetted Surgeon-Lieutenant-Colonel on February 14th, and was appointed Officer in charge of No. 10 General Hospital, which was stationed at Bloemfontein, where his death occurred on July 13th from Bright's disease.

The death has been announced of Dr. Dennis Barry O'Flynn, M.A., who after a very promising career as a student, discharged for nearly half a century with much energy and devotion the duties of a medical practitioner in Carrignavar and Glanmire, county Cork. Dr. O'Flynn was an energetic man, and though he worked in a quiet and unostentatious

way, giving much time and labour to his patients, he was ever ready to take part in any movement for the relief of the poor, and for the improvement of their social and sanitary condition. He will be long remembered in Glanmire for deeds of charity to the poor, and acts of self-abnegation in their interests, and his successful efforts to overcome the prevalence of enteric fever in his district by obtaining a proper water supply were much appreciated in the county of Cork. He was President of the Poor-law Medical Officers' Association of Cork, and Certifying Factory Surgeon.

The news has just been received in England of the death, last May, of Miss ALICE MARSTON, L.R.C.P.I., and L.M. She had only just left Pekin, and was on her way home on furlough. The cause of her death was cerebral hæmorrhage, brought on apparently by sea-sickness, which she had much dreaded, knowing that she was the subject of Bright's disease. She was taken on shore at Nagasaki, and died in the Bishop's house there. Miss Marston was in charge of an important mission hospital in Pekin, where she had done excellent work in connection with the Society for the Propagation of the Gospel and the North China Mission. She qualified in 1881, and has worked in Pekin ever since.

Dr. Ashhurst, jun., who died at Philadelphia on July 7th, was born in Philadelphia in 1839, and took his degree in the University of Pennsylvania in 1860. After serving as an assistant surgeon throughout the Civil War, he became a member of the staffs of several hospitals in Philadelphia. In 1877 he was appointed Professor of Clinical Surgery in the University of Pennsylvania, and in 1888 he was elected to the John Rhea Barton Chair of Surgery. This position he resigned a few months ago. Dr. Ashhurst was the author of numerous contributions to professional literature, and his name was well known as the editor of the International Encyclopædia of Surgery. He was also prominent in charitable and Church work.

Among the medical victims of the Pekin massacre it is probable that Dr. J. J. Matignon, Physician to the French Legation, must be included. He was well-known for his writings on Chinese medicine and similar subjects. He was born in Eyenesse in the Gironde in 1866, and took the degree of doctor of medicine at Bordeaux in 1892. He then entered the service of the French army, attaining the rank of Médecin-Major de 2me classe in 1899. He had been attached to the French Legation since 1894. Dr. Matignon's wide scientific knowledge and professional skill and his personal character had gained for him the esteem and confidence of the whole European colony. He was about to be made Knight of the Legion of Honour, for which distinction he had been recommended no fewer than four different times.

Dr. J. J. Skene of Brooklyn, who died recently, was a native of Scotland, having been born at Fyvie in Aberdeenshire in 1838. At the age of 19 he went to the United States, and soon after his arrival there he entered the University of Michigan as a student of medicine. After a time he migrated to the Long Island College Hospital in Brooklyn, where he graduated in 1863. He served as a surgeon in the Civil War, after which he returned to Brooklyn, when he became Adjunct Professor at the Long Island Medical College. Later he became Professor of Gynæcology in the College, and for a long time he filled the office of Dean. He resigned his appointments about a year ago. Dr. Skene had been President of the New York Obstetrical Society and of the American Gynæcological Society. He was the author of numerous contributions to medical literature, and his book on diseases of women made his name well known on both sides of the Atlantic. He was a lover of art, and was himself a sculptor of no mean skill.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are Professor Gustav Born, of Breslau, distinguished as an anatomist and embryologist; and Dr. W. Sutugin, member of the Medical Council of the Russian Ministry of the Interior, formerly lecturer on gynecology at the Military Medical Academy, and physician to the St. Petersburg Maternity, aged 60.

MEDICAL NEWS.

SUCCESSFUL VACCINATION.—Dr. Brand, public vaccinator for the Driffield district of the Driffield Union, has been awarded the extra Government grant for efficient vaccina-tion for the sixth time. Dr. W. H. Gregory has received the grant for efficient vaccination in the second division of the Beverley Union, and Dr. J. Chesnutt, of Howden, East York-shire, has received the grant for the satisfactory state of vaccination in his district.

HOUSING OF THE WORKING CLASSES.—About 400 delegates have been appointed by local authorities to attend the conference on the Housing of the Working Classes organised by the Sanitary Institute. As stated last week the meetings of the conference will take place at the house of Royal Medical and Chirurgical Society on Monday and Tuesday next, beginning on each day at 10 A.M. Further particulars can be obtained from the Secretary of the Institute, Margaret Street, Regent Street, W.

THE MEDICAL CHARITABLE SOCIETY FOR THE WEST RIDING OF YORKSHIRE.—The seventy-second annual meeting of the Society was held at Harrogate. Dr. J. H. Bell, of Bradford, was in the chair, and, after the election of forty-three new members and other formal business, the sum of £1,230 was voted to disabled practitioners, widows, and orphans. It was decided to hold the next annual meeting at Bradford. Since the commencement of the charity the sum of £34,303 has been given away, and the average annual expenses of management have been under £20. The members subsequently dined together at the new Hotel Majestic.

MEDICAL VACANCIES.

The following vacancies are announced:

BIRMINGHAM CORPORATION.—Second Assistant Medical Officer to the City Hospital, Lodge Road, Salary, £120, with board, residence, etc. Applications to the Medical Superintendent.

Superintendent.

BIRMINGHAM GENERAL DISPENSARY.—Resident Surgeon, unmarried. Salary, 2150 per annum, with allowance of £30 for cab hire, and furnished rooms, etc. Applications to the Secretary by August 13th.

BOURNEMOUTH: BOSCOMBE HOSPITAL.—House-Surgeon. Salary, £30 per annum, with board, logking, and washing. Applications to the Secretary by August 13th.

BIRMINGHAM WORKHOUSE.—Medical Officer for three weeks. Board, apartments, and laundry found. Applications, stating terms, to the Clerk to the Guardians.

BOURNEMOUTH ROYAL VICTORIA HOSPITAL.—House-Surgeon. Salary, £30 per annum, with board. Applications to the Chairman of the Committee by September 6th.

BEECON INFIEMARY.—Resident House-Surgeon, unmarried. Salary, £30 per annum, with furnished apartments, board, etc. Applications to the Secretary, 6, Bulwark, Brecon.

RISTOL ROYAL INFIRMARY.—Honorary Ophthalmic Surgeon. Applications to the

Brecon.

Bistol Royal Infirmary.—Honorary Ophthalmic Surgeon. Applications to the Secretary by September 10th.

Cardiff: University College.—(1) Demonstrator and Assistant Lecturer in Anatomy; (2) Demonstrator and Assistant Lecturer in Physiology. Salary in each cast 4120. Applications to the Secretary by September 8th.

Carlitle: Cumberland Infirmary.—(1) House-Surgeon. Appointment for one year. Salary, 470. (2) Assistant House-Surgeon for seven months. Salary at the rate of \$40 per annum. Board, lodging, and washing provided in each case. Applications to the Secretary by August 22nd.

CHORLEY HOSPITAL.—House-Surgeon. Salary, £100 per annum, with board and lodging. Applications to the Honorary Secretary.

CITY OF LONDON HOSPITAL FOR DISEASES OF THE OHEST, Victoria Park, E.—Resident Medical Officer. Salary, £00 per annum, with board, etc. Applications to the Secretary by September 8th.

CORNWALL COUNTY ASYLUM, Bodmin.—Junior Assistant Medical Officer. Salary £120. rising to £180, with board, furnished spartments, etc. Applications to the Medical Superintendent by August 11th.

DUNDEE COMBINATION FOORHOUSES AND HOSPITAL.—Resident Medical Officer, Salary, £100 per annum, with board, etc. Applications to the Olerk of Council, Parish Council Chambers, Dundee, by July Sist.

DUBHAM COUNTY ASYLUM Winterton, Ferrythill.—Junior Assistant Medical Officer. Salary, £100 per annum, with board, laundry, and attendance. Superintendent by Murphical Chambers, Dundee, by July Sist.

DUBHAM COUNTY ASYLUM Winterton, Ferrythill.—Junior Assistant Medical Officer. Salary, £100 per annum, with board, laundry, and attendance. Superintendent by Superintendent. Superintendent.

GLASGOW UNIVERSITY.—Professor of Clinical Medicine. Salary about £112 and share in faces. Amplications to the Secretary of the Glasgow, Indicatory Marchester Council of Medical Officer.

2500 per annum. Applications to the Secretary, 93, West Regent Street, Glasgow, by August 7th.

GLASGOW UNIVERSITY.—Professor of Clinical Medicine. Salary about £112 and share in fees. Applications to the Secretary of the Glasgow University Court, 91, West Regent Street, Glasgow, by September 12th.

GOSFOERTH. CUITY ASYLUM.—Assistant Medical Officer, unmarried and under 30 years of age. Salary, £130, increasing to £150, with furnished spartments and board. Appliestions to the Clork.

HAMPSTEAD HOSPITAL, N.W.—Resident Medical Officer. Salary at the rate of £120 per samum, with rooms, coals, and gas. Applications to the Honorary Secretary by September 16th rooms, coals, and gas. Applications to the Honorary Secretary by September 16th NATEMARY.—Junior House-Surgeon. Salary, £75 per annum, with residence, board, and washing. Applications to Mr. J. E. Wheldon, 74, King Street, South Shields.

LON DON DERRY COUNTY BOROTGH.—Medical Superintending Officer of Health and Medical Attendant at Foyle Hill Infectious Disease Hospital. Salary, £76 per annum. Applications to the Town Clerk, Guildhall, Londonderry, by August 14th.

MACCLESFIELD GENERAL INFIRMARY.—Junior House-Surgeon. Salary, £76 per annum, with board and residence. Applications to the Chairman of the House Committee by August 1st.

MANOHESFER EAR HOSPITAL Clinical Clerkship. Appointment for six months. Honorarium, £10 10s. Applications to the Secretary by August 14th.

MANOHESFER HOSPITAL FOR CONNUMPTION AND DISEASES OF THE THROAT AND CHASTE.—Assistant Medical Officer for the Out-Patient Department. Honoa-ium, £40 pe annum A-pilications to the Secretary before August 2nd.

MANCHESTER HULME DISPENSARY. Dale Street.—Honorary Surgeon. Applications to the Honorary Secretary, Medical Committee, by August 13th.

NORTHAMPTON GENBRAL INFIRMARY.—Assistant House-Surgeon, not under 22 years of age. Salary, £75 per annum, with furnished apartments, board, etc. Applications to the Secretary by August 1st.

NORTH-EASTERN HOSPITAL FOR OHILDREN, Hackney Road, N.E.—Resident Medical Officer. Nalary, £120 per annum, with board, residence, and washing. Applications to the Secretary at the City Office, 27, Clement's Lane, E.C., by August 18th.

NOTTINGHAM GENERAL DISPENSARY.— Assistant Resident Surgeon. Unmarried, Salary, £140 per annum, with all found except board. Applications to the Secretary.

married. Salary, £140 per annum, with an itema acceptance of the Secretary.

OLDH4M INFIRMARY.—Junior House-Surgeon. Salary, £75 per annum, with board, residence, and washing. Applications to the Honorary Secretary by August 6th. PADDINGTON GREEN CHILDREN'S HOSPITAL—House-Surgeon. Salary at the rate of 50 guineas a year, with board and residence. Applications to the Secretary by August 18th.

PAISLEY INFECTIOUS DISEASES HOSPITAL—Resident Physician. Salary, £70

August 18th.

PAISLEY INFECTIOUS DISEASES HOSPITAL.—Resident Physician. Salary, £70
per annum, with board, washing, and attendance. Applications to the Clerk to the
Local Authority, Municipal Buildings, Paisley, by July 30th.

PLYMOUTH BOROUGH ASYLUM.—Assistant Medical Omeer, unmarried. Salary,
£125, increasing to £175 per annum, with furnished apartments, board, and washing.
Applications, endorsed "Assistant Medical Officer," to Dr. W. H. Bowes, Medical
Superintendent, Plymouth Borough Asylum, Blockadon, Ivybridge, Devon, by
July 30th.

Superintendent, Plymouth Borough Asylum, Blockadon, Ivybridge, Devon, by July 30th.

BOCH FSTER: ST. BARTHOLOMEW'S HOSPITAL.—Assistant House-Surgeon. Salary, £100 per annum, with board, apartments, etc. Applications, marked "Application for Assistant House-Surgeon" to the Clerk to the Trustees by August 7th. Application of Medical Officer. Salary, £120 per annum, with board, lodging, and attendance. Applications, endorsed "Assistant Medical Officer. Salary, £120 per annum, with board, lodging, and attendance. Applications, endorsed "Assistant Medical Officer," to the Town Clerk, Town Hall, Sheffield, by August 9th.

SUSTEPTEED ROYAL INFIRMARY.—Junior Assistant House-Surgeon. Salary, £70 per annum, with board, lodging, and washing. Applications, addressed to the Medical Staff of the Royal Infirmary, care of the Secretary, by August 18th.

SUITHPORT INFIRMARY.—Resident Junior House-Surgeon and Visiting Surgeon. Appointment for six months, but renewable. Honorarium at the rate of £20 per annum, with residence, board and washing. Applications to Mr. Joseph Worrall, Infirmary Office, 24, King Street, Southport, by August 11th.

STIRLING ROYAL INFIRMARY.—Resident House-Surgeon. Salary, £30 per annum and board. Applications to Secretaries by July 38th.

TOTTENHAM HOSPITAL.—House-Surgeon. Honorarium at the rate of £20 per annum with board, residence, and laundry. Applications to the Chairman of the Joint Committee by July 30th.

WEST HAM HOSPITAL, stratford, E.—Junior House-Surgeon. Salary, £75 per annum, with board, residence, etc. Appointment for one year, but eligible as Senior. Salary, £70 per annum, with board, residence, etc. Appointment for one year, but eligible as Senior. Salary, £75 per annum, with board, residence, etc. Appointment for one year, but eligible as Senior. Salary £100. Applications, marked "Junior House-Surgeon," to the Secretary by August 18th.

lst.

WILTS COUNTY ASYLUM, Devizes.—Assistant Medical Officer. unmarried. Salary, £130 a year, rising to £160, with board, residence, attendance, and washing. Applications to the Medical Superintendent by August 18th.

WISBECH: NOETH OAMBS. HOSPITAL.—Resident House-Surgeon. Salary, £130 per annum, with furnished house. Applications to the Honorary Secretary by August 9th.

LVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL.—Assistant House-Physician. Appointment for six months. Honorarium at the rate of £75 per annum, with board, lodging, and washing. Applications to the Secretary by August 20.

MEDICAL APPOINTMENTS.

MEDICAL APPOINTMENTS.

Bennett, H. P., M.B., C.M.Edin., appointed Honorary Surgeon to the Northumberland, Durham, and Newcastle Eye Infirmary.

CHADBORN, C. N., appointed House-Surgeon to the Sussex County Hospital, Brighton.

CHENERY, Arthur, M.E. C.S. Eng., appointed Medical Officer at Port Augusta and to the Port Augusta Hospital, South Australia.

CHISHOLM, W., M. D. Lond., appointed Honorary Consulting Surgeon to the Children's Hospital, Giebe, Sydney.

CHITTENDEN, T. Hiller, appointed one of the Honorary Physicians on the staff of the Western General Dispensary, Marylebone Road.

COLLEN, Henry Ensor, M.E.C.S., appointed Ophthalmic Surgeon to the Cardiff Provident Dispensary and to the Cardiff Infirmary.

DEANE, E. W., M.B., appointed Health Officer for the Shire of Walhalla, Victoria.

FORSTER, Lucinda, M.B., B.S.Lond., appointed House-Surgeon to the Bristol Royal Hospital for Sick Children and Women.

GOT, J., L.S.A., appointed Medical Officer for the Ringwood Union.

HIRSCH, Charles T. W., M.E.C.S. Eng., L.E.C. P.Lond., L.S.A., appointed Public Vaccinator for Woclwich.

HOWELL, Walter Salmon, M.A.Oxon., L.E.C.P., M.B.C.S., L.D.S.Eng., appointed Assistant

for Woclwich.

Howell, Walter Salmon, M.A. Oxon., L.B.C.P., M.B.C.S., L.D.S.Eng., appointed Assistant Dental Surgeon to the Middlesex Hospital.

Litchfield, W.F., M.B., appointed Honorary Medical Officer to Out-patients at the Ohidrar's Hospital, Glebe, Sydney.

NEBCH, Jas. Thos., L.B.C.P. Edin., L.F.P.S.Glasg., D.P.H.Vict., appointed Medical Officer of Health for Halliax, vice D. A. Ainley, L.B.C.P.Edin., M.B.C.S. Eng., deceased.

THOMAS, David, L.B.C.P., M.B.C.S., appointed Government Medical Officer and Vaccinator at Manly, New South Wales, vice Dr. S. C. Watkins, resigned.

WARDALE, J. D., appointed Honorary Ophthalmic Surgeon to the Royal Infirmary, Newcastle-upon-Tyne, vice G. E. Williamson, F.B.C.S., deceased.

WHITE, P. S., M.B.C.S., L.B.C.P., appointed Medical Officer for the Bugbrocke Division of the Northampton Union.

BIRTHS, MARRIAGES, AND DEATHS.

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

BIRTH.

WORBOYS.—On July 13th, at Winterton, Lincs., the wife of T. Sanders Worboys, M.R.C.S., L.R.C.P., of a daughter.

MARRIAGES.

EDEN-BAIN.—On July 18th, at 8t. Mary Abbots, Kensington, by the vicar the Rev. Canon Pennefather, assisted by the Rev Canon Harvey of Navenby. Thomas Watts Eden, M.D., M.E.O.P., to May, only daughter of Mrs. Bain, and granddaughter of the late Sir James Bain of Glasgow.

TANNOCK—SUTTON.—At Sutterheim, Cape Colony, on June 25th, by the Rev. J. Weaver, M.A., rector, John Porter Tannock, M.B., C.M., D.P.H., F.P.S.G., of East London, to Margaret Helen Sutton, daughter of the late W. R. Sutton, Esq., of Thame, Oxon.

DEATHS.

SHEWEN.—On July 18th, at Lindenhurst. Sevenoaks, Kent, Alfred Shewen, M.D.Lond., of Sydney, N.S.W., Senior Consulting Hon. Physician to Prince Alfred's Hospital of that city, in his 57th year.

SICCAMA.—On July 19th, at 2, Westerhall, Weymouth, Rinso B. Siccama, E. N. Deputy-Inspector-General of Hospitals and Fleets.

WHITHEOUSE.—At Tarkarh, Ajmer, Rajputana, on June 18th, 1900, of cholera Jo Whitehouse, M.B., C.M., United Presbyterian Church of Scotland Mission.

HOURS OF ATTENDANCE AND OPERATION DAYS AT THE LONDON HOSPITALS.

CANGER, Brompton (Free). Attendances.—Daily, 2. Operations.—Tu. W. F., 2.
CENTRAL LONDON OPERHALMIC. Attendances.—Daily, 1. Operations.—Daily.
CENTRAL LONDON THEOAT, NOSE, AND EAR. 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; Women, W., 1; S., 930;
Bain, M. Th., 1; Dental, M. Th., 8.45; Throat and Ear, F., 9.30; Electro-Therapeutics,
Tu. Th., 930; Children, Tu. F., 1; Eccasen, W., 9.45; Orthopedic, Th., 1. Operations.
W. Th. F., 3; S., 2.

-W. Th. F., 8; 8.2. C.

-W. Th. F., 8; 8.2. C.

CHELERA HOSPITAL FOR WOMEN. Attendances.—Daily, 1:80. Operations.—M. Th. F., 2.

CHELERA HOSPITAL FOR WOMEN. Attendances.—Daily, 1:80. Operations.—M. Th. F., 2.

CHELERA HOSPITAL FOR CHILDREN. Operations.—M. Th. F., 2.

SHE LONDON HOSPITAL FOR CHILDREN. Operations.—M. Tu. Th. F., 2.

SHE LONDON HOSPITAL FOR CHILDREN. Operations.—M. Tu. Th. F., 2.

SHE LONDON HOSPITAL FOR CHILDREN. Operations.—M. Tu. Th. F., 2.

SHE LONDON HOSPITAL FOR CHILDREN. Operations.—M. Tu. Th. F., 2.00; Skin, W., 2.00; Dental, W. 2.00, Ceperations.—M. W. Th. F. Throat and Ear, Tu. F., 2.00; Skin, W., 2.00; Dental, W. 2.00, Ceperations.—M. W. Th. F. Throat and Ear, Tu. F., 2.00; Skin, W., 2.00; Guy's. Attendances.—Medical, 1-p., M. Tu. Th. Th. Th. T., B., 1.30; o.p., M. W. Th. F., 12; Operations.—Th. Tu. Th. F., 1.20; o.p., M. Tu. Th. F., 1.20; o.p., Th. S., 12; Eye, 1-p., M. Tu. Th. F., 1.20; o.p. M. Tu. F., 1.21; Operations.—Th. F., 1.30; Ophthalimio), M., 1.30; Th., 2.

GOSPITAL FOR WOMEN. Scho.

Mosfiral, 190; M., 2.
 Hosfiral, For Womer, Soho. Attendances.—O.-p., M., 9; Tu. W., 12; Th., 9; F. S., 12.
 Operations.—M. Th., 2; Th. S., 9.30.
 King's Colleges. Attendances.—Medical and Surgical, daily, 2; Obstetric, daily, 2; o.p., daily, 1.30; Fye, M. W. Th., 1.30; Ear, Th., 2.30; Throat, M., 1.30 F., 2; Dental, M. Th., 10; Skin, M., 10. Operations.—W. Ph. F., 2.

Au, M. ; Sain, M., M. Operations.—W. Th. F., 2.
LONDON. Attendances.—Medical, daily, i.p., 2; o.p., 1.30; Surgical, daily, 1.30 and 2; Obstetric, M. Tu. Th. F., 2; o.p., W. S., 1.50; Eye, Tu. S., 9; Ear, W., 9; Skin, Th., 9; Dental, M. Tu. Th. F., 9. Operations.—Daily, 2.
LONDON TEMPERANCE. Attendances.—Medical, i.-p., M., 2.30; Tu. F., 8.30; Th. 2.0; O.-p., M. Tu. W. F., 1; Surgical, i.-p., M., 2; Th., 3; O.-p., M. Th., 1.30. Operations.—Th., 4.
LONDON TEROAR, Great Portland Street. Attendances.—Daily, 2; Tu. F., 6. Operations.

METROCOLUMN.

METROPOLITAN. Attendances.—Medical and Surgical, daily, 2; S., 9; Obstetric, W., 2; Rye, M., 2; Throat and Ear, Th., 2; Dental, Tu. Th. S., 9. Operations.—Tu. W., 2.80; Th., 4.

Th., 4.

MIDDLESEX. Attendances.—Medical and Surgical, daily, 1.30; Obstetric, Tu. Th., 1.30; Op., M., 9; W., 1.30; Kye, Tu. F., 9; Ear and Throst, Tu. F., 9; Skin, Tu., 41. Th., 9.30; Dental, M. F., 9.30; W., 9. Operations.—Daily, 1.50.

MATIONAL ORTHOREDIO. Attendances.—Medical, Operations.—W., 10.

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

NORTH-WHST 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.—Tu., 2.30.

BOYAL EAR, Frith Street. Attendances.-M. S., 3; Tu. F., 9; W., 2.30; Th., 7.30. Operations-Tu., 8.

BOYAL FREE. Attendances.—Daily, 2. Operations.—Daily.

BOYAL FREE. Attendances.—Medical and Surgical, daily, 2; Diseases of Women, Tu. S., 9; Riye, M. F., 9; Riyi, Throat, Nose, and Ear, W., 9.80. Operations.—W. S., 2; (Ophthalmie), M. F., 10.30; (Diseases of Women), S., 9.

S: Rys. M. F. 9; Skim, Th., 9.50; Throat, Nose, and Ear, W., 9.50. Operations.—W. S., 2; (Ophthalmo), M. F., 19.30; (Desease of Women), S., 9; ROYAL LONDON OPHTHALMIC. Attendances.—Daily, 9. Operations.—Daily, 10. ROYAL ONTHOPEDIO. Attendances.—Daily, 2. Operations.—Daily, 10. ROYAL ONTHOPEDIO. Attendances.—Daily, 2. Operations.—Daily, 2. St. BLETHOLOMEW'S. Attendances.—Medical and Surgical, daily, 1.90; Obstetric, M. W. F., 2; 0.p., W. S., 9; Eye, M. Tu. W. Th. F., 2; 0.p., M. Th., 9; W. S., 220; Ext. Tu. F. 3; Skim, Tu., 9 Laryux, M. Th., 2; Orthopedic, Tu., 1.90; Dental, Tu. F., 9; Riccital, M. Tu. H. F., 19. Operations.—Daily, 1.0; (Ophthalmic), Tu. F. 2; Abdominal Section for Ovariotomy, W., 2.
ST. GROGER'S. Attendances.—Medical and Surgical, daily; 1.p., 1; 0.p., 12; Obstetric, Ip., Tu. F. 1.45 0.p., M. Tu., 230; Eye, W. S., 1.80; Ear, M., 2; Skim, W., 2.45; Throat, F., 2; Dental, M. Tu. F., 8, 12. Operations.—Daily, 1, 0phthalmic, W., 1; Dental, Th., 6; F., 2; Dental, M. Tu. F., 8, 12. Operations.—Daily, 1, 0phthalmic, W., 1; Dental, Th., 6; MARK'S. Attendances.—Medical and Surgical, daily, 1.6; 0.p., 12.6; Obstetric, Th., 1.45; 0.p., M. Th., 1; Eye, Tu. F., 9; Exer, M. Th., 9; Photal, M. Tu. F., 8, 12. Operations.—Tu., 2.30; Th., 2.
SZ. MARY'S. Attendances.—Medical and Surgical, daily, 1.6; 0.p., 12.6; Obstetric, Th., 1.45; 0.p., M. Th., 1; Eye, Tu. F., 9; Exer, M. Th., 9; Photal, Th., F., 18, 16; M. Th., 9; Dental, W. S., 9; Electro-Therapeutics, W. S., 10; Children's Medical, M. Th., 9; Dental, W. S., 9; Electro-Therapeutics, W. S., 10; Children's Medical, M. Th., 9; 2; S., 4, 0perations.—W. F., 2.
ST. TROMAS'S. Attendances.—M., 2 and 5; Tu., 2; W., 5; Th., 2; F. (Women and Children) 2; S., 4, 0perations.—W. F., 2.
ST. TROMAS'S. Attendances.—I.-p., Medical and Surgical, M. Tu., Th. F., 2; 0.p., daily, 18; Exr. M. 1.89; Skin, F., 1.89; Throat, Th., 130; Children, W., 10.50; Electro-therapeutics, Th., 2; M., 180; Exr. M., 180; Skin, F., 180; Throat, Th., 180; Children's Medical, M., 180; Children's Medi

SAMARITAN FREE FOR WOMEN AND CHILDREN. Attendances.—Daily, 1.30. Operations.—Gynecological, M., 2; W., 2.30.

THEOAT, Golden Square. Attendances.—Daily, 1.30; Tu F., 6.30. Operations.—Daily, 6xx. M., 10.

UNIVERSITY COLLEGE. Attendances.—Medical and Surgical, daily, 1.30; Obstetrics, M. R., 1.30; Spe, 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.
WHST LONDON. Attendances.—Medical and Surgical, daily, 2; Dental, Tu. F., 9.30; Eye, M. Th., 2; Sar, Tu. F., 2; Orthopedic, W., 2; Diseases of Women, W. S., 2; Electric, M. Th., 31.5 Skin, Tu. F., 2; Throat and Nose, Tu. F., 2; S., 10. Operations.—Daily, about 2.30; F., 10.

WESSTLUMENTRY Attendances.—Medical and Surgical, daily. 2. Octation.** Daily, about 2.30; F., 10.

WESTMINSTER. Attendances.—Medical and Surgical, daily, 2; Obstetric, M. Tu. F., 2; Eye, Tu. F., 9.30; Bar, Tu., 2; Skin W., 2; Dental, W. S., 9.15. Operations.— M. Tu. W., 2

LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

COMMUNICATIONS FOR THE CURRENT WREE'S JOURNAL SHOULD REACH THE OFFICE MCT LATER THAN MIDDAY ON WEDNESDAY. TELEGRAMS CAN BE RECEIVED OF 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.

SUPPLY STAIR, W.C., LORGON.

SHGINAL ARTICLES and LETTERS forwarded for publication are understood to be affered 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 the cipt 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 ORROUMSTANCES BE RETURNED.

IN order to avoid delay, it is particularly requested that ALL letters on the editorial business of the JOURNAL, and not at his private house.

TRIBERAPHIC ADDRESS.—The telegraphic address of the EDITOR of the BRITISH MEDICAL JOURNAL is Attockypt, London. The telegraphic address of the MANAGER of the BRITISH MEDICAL JOURNAL is Articulate, London.

P Queries, answers, and communications relating to subjects to which special departments of the British Medical Journal are devoted well be tound under their respective headings.

QUERIES.

CINCHONA asks for information as to what fee is necessary for registra-tion and licence to practise in the South African and Australian Colonies respectively.

Dr. Herbert Hart, Medical Superintendent (The Salvation Army, ror, Queen Victoria Street), asks to be referred to reports of experiments as to the absorption of iron by the blood vessels of the duodenal villi. Quincke, he adds, has fed mice with cheese containing iron, and has traced its course as far as the duodenum, where he found it was absorbed.

W. D. J. asks the titles of recent works on (1) chronic rheumatic arthritis and its treatment, and (2) on sewage purification or disposal.

**** (1) Rheumatoid Arthritis, by G. A. Bannatyne, M.D., M.R.C.P. Second Edition (Bristol: John Wright and Co. 1898. 78. 6d.); The Causes and Treatment of Rheumatoid Arthritis, by S. Hyde, M.D. (London: John Bale and Sons. 1896. 38. 6d.). (2) Sewage and the Bacterial Purifica-tion of Sewage, by S. Rideal, D.Sc. (London: Robert Ingram. 1900. 148.)

COTTAGE HOSPITAL.

RURAL would be glad to hear from any member who has had experience in the erection of a cottage hospital of about six to ten beds, with room for further extension if necessary, giving particulars as to cost of erection, estimated amount for upkeep, construction, and any other particulars. He would be glad to see sketches or plans.

ANSWERS.

"THE FIDGETS."

H. C. M. writes: "T. M. W." (BRITISH MEDICAL JOURNAL, July 14th. 1900) may perhaps be referred to some observations by Dr. Clement Dukes on The Resitesness of Old Age and its Treatment, in the British Medical Journal of December 2nd, 1899, page 1542.

AMMONIUM CHLORIDE IN CHRONIC DYSPEPSIA.

DR. H. R. HENCHLEY (Blagdon, R.S.O., Somerset) writes: With reference to Mr. Cresswell's queries in the British Medical Journal of July asts. I should like to say my own experience has been that biniodide of mercury did not act so satisfactorily, generally speaking, as the perchloride, although theoretically it should be the reverse. As regards (a) my experience has been the same to this extent, that if the medicine made with the biniodide be kept, say, 14 days, there seems to be a slowly increasing precipitation then.

NOTES, LETTERS, Etc.

THE PRESIDENTIAL ADDRESSES TO THE BRANCHES.

MR. EBENEZER SHAW, M.B. (Wigtown, N.B.) writes: Will you allow me to refer to one or two matters touched upon in the admirable addresses by the Presidents to the Branches published last week? (f) Preliminary Education. Dr. Karkeek says that the standard at present in force in the medical profession is "a disgrace to a learned profession." Since he means by a "learned" or "scholarly" person one with a competent knowledge of Latin or Greek his statement may very well be correct. But will he name a profession that at present has a higher standard? Latin and Greek are much more necessary to clergymen and lawyers than to medical men; yet have they a higher standard? Perhaps we are not so badly off, even for Latin and Greek, after all. "Scholarly" attainments are probably due much more to "scholarly" taste and to leisure in after life than to any special school standard. (a) The Present Constitution of the Medical Council and of the Medical Corporations. Dr. MacIlwaine thinks these bodies are as nearly perfect as poor human nature will allow. Most medical men have just about the contrary opinion. But then Dr. MacIlwaine has a very bad opinion of medical men where their own interests are concerned. We shall therefore say no more as Dr. MacIlwaine is himself a medical man! (3) Tradesunionism. Dr. Gordon, like Dr. Bruce and many others, thinks he has annihilated his opponents when he has reiterated the blessed word "trades-unionism." This, it seems, in spite of all political economists have said to the contrary, means "pure selfishness." Such a (question-begging) definition might have suggested to Dr. Gordon that he had misunderstood either the nature of trades-unionism or of the medical proposals he denounces by anticipation. Nothing is to be gained by throwing about nicknames, or appealing to class prejudices. Let each question be considered on its own merits. But if Dr. Gordon or Dr. Bruce must refer to unions for "terrible examples" let him in future direct his attention

The New Peril of the Streets of Edinburgh.

Scotus writes: The Scotsman of July oth stated that on the previous Saturday a boy, 6 years of age, was run over by a cable car and received injuries of such a serious nature that he did not long survive admission to the Royal Infirmary. In face of the facts that cable cars are allowed to run at a high rate of speed in far too many streets, in streets that have a constant and heavy traffic, and in streets which are too narrow for safety, it is to be hoped that the authorities will thoroughly investigate this case. The law allows these cars to run at a high rate of speed, but undoubtedly they are not infrequently run at a greater rate. At all crossings, and when cars are about to and are passing one another, warning bells ought to be rung. But this is certainly not always done. A recent judgment in the law courts set forth that the roadway was "the king's highway," that it was meant primarily fer foot