

The patient then underwent what was to all appearance a fairly acute attack of sympathetic ophthalmitis. The pupil would not respond to atropine. The first indication given by the ophthalmoscope of anything being wrong with the optic nerve of the uninjured eye was on March 4th. The field of vision was taken four days later, and it was found to be contracted concentrically, but most to the outer side (Fig. 9). The pupil ultimately yielded, and this patient left the hospital with fair vision.

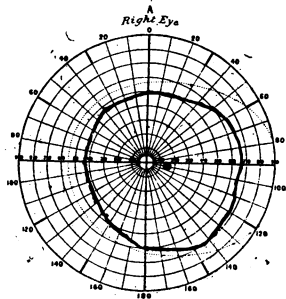


Fig. 9.

In connection with these cases one or two observations may be made. The contraction of the field of vision of the uninjured eye takes place after the injury to the other, and there can be little or no doubt that it is the cause. The contraction is not due to the enucleation, for it has invariably been noted to exist before this operation.

The diminution in the field of vision may be due either to changes in the optic nerve or in the retina. In none of these cases has any morbid process been seen in the retina on ophthalmoscopic examination, and in nearly all hyperæmia of the disc has been observed. Yet sometimes the contraction of the field is seen before any alteration of a definite kind is noticed in the disc. This is another proof that a mere ophthalmoscopic examination of the nerve is not sufficient. What would be thought of a surgeon who, on examining an arm, merely looked at it and failed to test its functions and to satisfy himself of the movements of the joints? Yet how often is a similar examination made by an ophthalmic surgeon! He simply looks at the nerve, but neglects to employ such tests as will inform him regarding the minimum light sense and the field of vision. Too frequently still are reports prepared for the information of physicians in which no mention is made of these important matters.

Several very important questions also arise. Most important of all is the question, Can we by repeated perimetric examination predict an attack of sympathetic ophthalmitis? Personally I cannot as yet dogmatise on the subject. I can but regard it simply as additional evidence in a case; but certainly, when I find a contraction of the field of vision in the uninjured eye, there will need to be excellent prospects of sight in the injured one before I consent to its remaining in the patient's head.

In view of the Employers' Liability Act, medico-legal questions of very great moment arise. Is, for example, an eye with a contracted field of vision to be considered an eye injured by the accident to the other? Probably the answer to this depends on an examination of the vision. In some of these cases the vision improved after the enucleation, but the field of vision has not yet been observed to do so.

Further, investigations such as this should stimulate us to be much more careful in our perimetric work than heretofore. In most observations made there is the great defect that the illuminant used for the test objects is ordinary daylight. Were it—or, indeed, could it be—suitably and properly arranged, no illuminant is more desirable.

In large and smoky cities daylight is a most inconstant quantity, and in certain months of the year cannot be relied upon. Wherever a supply of electric light is available this difficulty can easily be overcome. A box containing an electric lamp can readily be moved along the arm of the perimeter. In front of the box a small opening can be made, and ground or coloured glasses introduced at pleasure. Moreover the lamp can be standardised to a nicety by the following simple modification of Förster's light sense box.

The observer who wishes to standardise his lamp first closes the slit of the box, lights the standard candle, and applies his

eye to the eyepiece. He then in the ordinary way admits light into the interior of the box by opening the slit. He continues to open the slit till he can just see the test objects on the side of the box opposite to him. Probably the best objects are black lines ruled on white paper. He keeps the opening at that size and substitutes for the candle the lamp which he proposes to use. This lamp is in circuit with a source of electrical current, a galvanometer, and a rheostat. He applies his eye once more to the eyepiece, and by means of the rheostat reduces the resistance till with the opening of exactly the same dimensions as in the last experiment he is just able again to see the test objects. The lamp must then be of one-candle power. It can now be removed and used on the perimeter arc.

MEMORANDA:

MEDICAL, SURGICAL, OBSTETRICAL, THERAPEUTICAL, PATHOLOGICAL, Etc.

TREATMENT OF POISONED WOUNDS.

THE application of a ligature in the treatment of poisoned wounds is an adjunct so well known that I feel somewhat diffident in referring to it. Many a wound inflicted by a septic instrument will heal by first intention and give no further trouble if it be washed at once and a ligature applied to prevent absorption of the virus and to encourage bleeding. A bandage, pocket handkerchief, a piece of string, or a rubber band, tightly applied above the wound will prevent as far as possible absorption of the virus and diffusion into the general circulation.

In the case of punctured wounds inflicted by blunt-pointed instruments, there may be scarcely any hæmorrhage, but if a ligature be applied above the wound in a few minutes the part below will become oedematous and pressure will readily expel blood and serum from the water-logged tissues, and thus eliminate some of the virus. The wound is then treated in the usual way, laid freely open (if necessary) and thoroughly washed out with some antiseptic solution, and a drainage tube inserted if deep, and shortened gradually as the wound heals.

If an infective inflammation be set up the wound, of course, would be freely incised and fomented, and any abscess that might form opened early, and constitutional treatment adopted. It is acknowledged that the virulence of *post-mortem* wounds depends upon the length of time the corpse has been kept. As decomposition of the corpse sets in by the bacteria of putrefaction the "infective" organisms lose their powers. Hence the longer the corpse is kept the less dangerous the wound. Bodies in which death has resulted from septicæmia, pyæmia, puerperal peritonitis, etc., should not be examined within forty-eight hours of death.

Old Burlington Street, W.

PERCY AUGUSTUS LONGHURST.

NOTE ON THE FREQUENCY OF VENTRAL HERNIA IN CHILD-BEARING WOMEN.

THE constant occurrence of this preventable lesion in child-bearing women is, I consider, not sufficiently recognised, either as a cause of some of the many reflex symptoms complained of when seeking the advice of the gynaecologist or of the violent pains observable after labour in cases of multiparæ. The indiscriminate application of the obstetric binder without any examination of the abdominal walls has, in many cases, given rise to severe pain. Too often regarded (when complaint has been made by the patient) as an exaggerated form of after-pains, and no examination made even then to discover their true cause, I have always considered this form of hernia in women preventable by the timely application of an abdominal belt which should be worn by every pregnant female during the last four months of gestation. I can only wish its value were universally recognised and prescribed by every obstetrician. Nothing can be more unsightly than the wrinkled, lax, and seared appearance of the abdominal surface of the multiparous female, all of which, in my opinion, could have been avoided by the wearing of the belt. And when, in addition to this, there exists a separation between the recti muscles, it becomes a source of weak-

ness, pain, and discomfort, as well as danger to the patient herself.

I have, I regret to say, seen several cases where a binder had been applied and tightly pinned, when the excessive pain complained of by the patient soon afterwards led to its removal and a hernia was easily discovered, the protruding intestine being tightly nipped between the recti and the tightly applied binder adding to the misery. I have more than once traced habitual constipation in women to this source, and am fully convinced that it is in numerous instances the cause of many of the reflex symptoms complained of, and exists to a much greater extent than is commonly supposed, and for this reason I wish to draw the attention of the obstetrician and gynaecologist to the subject.

I think it will be admitted, for instance, that a female patient presenting herself in a doctor's study complaining of abdominal pain or soreness (more especially in conjunction with some discoverable uterine lesion) will hardly be examined for "ventral hernia," the fact of her not being undressed rendering such an examination both difficult and unsatisfactory. When the existence of such is suspected an examination in bed will be found more satisfactory; but, in any case, the abdomen should be exposed, and while patient is lying on the back directed to raise herself without the help of her arms the lesion will at once become apparent. The universal adoption of the abdominal belt by every pregnant female would, I am persuaded, shorten labour, preserve the symmetry and appearance of the abdominal surface, and undoubtedly prevent the existence of this too common form of hernia.

ALEXANDER DUKE, F.R.C.P.I., etc.

Ex-Assistant Master, Rotunda Hospital, Dublin.

Cheltenham.

FOREIGN BODIES IN HERNIAL SACS.

WHILE making a *post-mortem* examination on a man, aged 59, with irreducible scrotal hernia of long standing, a small yellow body the size of a pea dropped out of the lower part of the sac. In character it was cartilaginous, and could be indented by the finger nail. On further examination another similar body was discovered in a small vein of the sac wall, about 2 inches above the testicle, about to ulcerate through, and only prevented from doing so by a thin band of the vein wall.

These bodies are evidently phleboliths, fibrous in nature. Another case of a cyst of the paradidymis was operated on by Mr. Nash, and a similar body fell out of the tunica vaginalis. The patient in this case was only 22 years of age.

The explanation seems that in these cases there has been some old inflammation causing the formation of blood clots in the valves of small veins, which, becoming organised and fibrous, ulcerate through, resulting in the formation of these so-called foreign bodies.

W. R. E. WILLIAMS, M.B., M.R.C.S., etc.

Bedford County Hospital.

OSSIFICATION OF THE LEFT STYLO-HYOID LIGAMENT.

THE two cases of ossification of the left stylo-hyoid ligament, reported in the *BRITISH MEDICAL JOURNAL*, one by Mr. G. W. Farmer, on June 9th, and the other by Mr. C. Frank Wightman, on June 30th, recall a similar condition which came under my notice in October, 1898. It occurred in a gentleman about 38 years of age, who had been under treatment for recurring follicular tonsillitis. About a month after finishing treatment he complained that he could feel something in the left side of his throat. The diagnostic points were practically identical with those noted in the above-mentioned cases. Nothing abnormal could be seen in the pharynx, but on passing the left forefinger over the place indicated, an elongated hard substance, which could be moved laterally, was felt beneath the mucous membrane and rather below the posterior pillar of the fauces. Its direction was from above downwards and forwards. No such body could be felt on the right side. Suspecting the nature of the substance, I reassured the patient, who seemed relieved, as he had dreaded something serious.

Glasgow.

ROBERT FULLERTON, M.D.

REPORTS

ON

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

GENERAL HOSPITAL, BIRMINGHAM.

RUPTURE OF LIVER AND KIDNEY: ABDOMINAL SECTION;
NEPHRECTOMY: RECOVERY.

(Under the care of Mr. GEORGE HEATON.)

S. T., a schoolboy, aged 11, was admitted on February 24th suffering from hæmaturia, shock, and intra-abdominal hæmorrhage.

History.—About 2 P.M. on the day of admission he was playing in a gymnasium and fell from a height of six or eight feet on to the ground, striking some parallel bars in his fall. He vomited soon afterwards, but after being carried to bed, rallied, and it was not until some hours afterwards, when he began to rapidly become very anæmic and to pass considerable quantities of almost pure blood, *per urethram*, that his friends became alarmed and had him removed to the hospital.

On admission he was extremely blanched. He lay in bed in a semi-conscious state, constantly tossing his limbs about and complaining of pain in the right side of the abdomen. His temperature was 96; pulse 95, very small. There was some superficial bruising over the right loin. The abdominal walls were tense and rigid, the abdomen itself was dull all over save for a small area in the umbilical region. The bladder contained almost pure blood.

Operation.—An hour after admission the anæmia had increased, his surface temperature was lower, and his pulse smaller and irregular. Abdominal section was decided upon and performed seven hours after the accident. Chloroform was administered. Dr. Lewis, the house-physician, opened the left median basilic vein, and infused about 15 ounces of saline fluid while anæsthesia was being induced. The abdomen was opened by a 4-inch incision in the right linea semilunaris. The peritoneum contained a large quantity of fluid blood, and there was a collection of blood clots in the right lumbar region. The right kidney had an irregular-shaped rent in it, and the peritoneum covering its anterior surface was lacerated. It was separated from its connections; and, as the hæmorrhage from it continued to be very free, it was decided to remove it. The ureter was separated from the renal blood vessels, and the latter tied with stout silk. After removal of the kidney, hæmorrhage still continued in the right lumbar and hypochondriac regions. The abdominal wound was enlarged by a transverse incision through the abdominal muscles, and the liver then examined. A large ragged rent was found on its under surface, from which blood was freely oozing. The rent was firmly packed with long strips of iodoform gauze, the ends of which were brought out through the abdominal wound. No attempt was made to cleanse the abdominal cavity of blood or clot. The incisions were rapidly closed, and the patient sent back to bed after a second quantity of saline fluid had been injected.

After-History.—Injections of saline fluid were given *per rectum* during the next twenty-four hours, together with small quantities of fluid by the mouth, and his strength was maintained by repeated hypodermic injections of strychnine. For the first five days he progressed well; the urine passed was clear and free from blood, and at the end of the third day all the gauze packing was removed from the abdominal wound. From the fifth to the fifteenth day he lay in a uræmic condition. His urine became very scanty, and was loaded with albumen; while he himself was extremely drowsy, and vomited repeatedly. After that time he improved somewhat, but his temperature remained high and his pulse rapid until a localised peritoneal collection of bile and pus was tapped through an incision in the right loin on the seventeenth day after the operation. From that time his temperature was normal, and he slowly convalesced, and was discharged from hospital well on May 7th. On his discharge from hospital he was passing daily between 30 and 40 ounces of acid urine, which contained no albumen recognisable by

cution of a criminal nature so far as that case was concerned. It was perfectly clear that Mr. Pleavin was holding himself out as a qualified medical practitioner, and as he was not, it was wrong and improper that people of the town should be led to believe that he was so qualified. There was no objection if they were treated by a herbalist calling himself such, but the great objection was that he led people to believe that he was a person thoroughly qualified for the position. Here was a child who had died who perhaps with careful, proper and skilful treatment might have lived. The jury after consulting in private brought in a verdict in accordance with the medical evidence.

We may mention here that Mr. Pleavin was summoned by the Society of Apothecaries under their Act at the instance of the Medical Defence Union in August 1895, at the Birkenhead County Court with the result that he paid into Court the full penalty of £20, thereby avoiding the hearing of the case in open Court and the necessary publicity attendant thereon. We are informed that the matter will again be taken up by the Medical Defence Union. The statement made by Mr. Pleavin himself that he has signed medical certificates of death which we must presume were accepted by the registrar, deserves the consideration of the Registrar-General. An inquest should be held on any case in which the death is certified by an unqualified practitioner; this would aid in the repression of such improper practice.

ADVERTISEMENTS OF MEDICAL SCHOOLS.

A CORRESPONDENT sends us a cutting from the advertisement columns of an Irish provincial newspaper containing a displayed advertisement of a hospital medical school, in which the names of the members of the staff with their qualifications and appointments are set forth. Our correspondent asks, "If this is not advertisement pure and simple I do not know what to call it. What can we expect from the rank and file of the profession when men who ought to be leading lights descend under cover of a charitable institution to such self-glorification?" We think that such advertisements are open to objections, and therefore if it is necessary to advertise the medical school in the lay papers it would be better if the staff did not allow their names to be set out in this way. We are aware that in many cases such advertisements have appeared for years past and have obtained the sanction of old-established custom, yet we believe that the custom would be more honoured in the breach than in the observance.

UNQUALIFIED ASSISTANTS.

KETTLEDROM.—The case put to us is that of a man who joins another in partnership in a medical practice, and after all formalities are concluded discovers that there is an unqualified assistant whom the original partner declines to dismiss. We should advise B, the incoming partner, to consult a solicitor as to what steps he can take to compel A to comply with the regulations of the General Medical Council, and, failing this, to put upon record his protest against the man's retention.

MIDWIFERY ENGAGEMENTS.

SCAVITER states that some time ago he was engaged to attend a lady in her confinement. The time when this was expected is now past, and he has since seen another medical man attending at the lady's house. Should he send in a bill to the husband for the full fee or half the fee, or would it be better to ignore the affair altogether?

*He should claim the whole fee if he claims anything, and he should be prepared to go into the county court if the money is not paid. It would probably, however, be wiser to ignore the whole matter.

THE APOTHECARIES' HALL, DUBLIN.

M.C.C. (Belfast).—We are not in a position to answer this question, but would refer the gentleman to the Secretary of the Apothecaries' Hall, Dublin, from whom he should obtain the information. We should be glad to know the tenor of the reply.

MEDICAL ATTENDANCE GRATIS.

SENEX.—C. is perfectly within his right in refusing to attend without payment, but each man must judge for himself, and the facts submitted do not justify condemnation of the conduct of A. and B. Young men who are not fully employed may often be willing to do unpaid work which their seniors rightly decline. We think that there would be great advantage to the profession if senior men were more willing than they are to give up unpaid or ill-paid work to their juniors.

A NURSE'S TESTIMONIAL.

F. A. F.—Our correspondent sends us an amusing lithographed circular letter which is being issued as testimony to the value of Mellin's Food by the proprietors of that article. It is from a nurse, who writes to the company to say how much benefit her mother has derived from the use of the food, and she adds: "A Dublin doctor who was here a few days ago remarked: 'If Mellin only knew how enthusiastically you recommend his food and all the customers you get for him, he would present you with a nice clock or barometer such as he sent me!'" We hope she got it, but we refuse to believe in the "Dublin doctor" without better evidence.

MEDICAL ADVERTISING.

OUR attention has also been drawn to a temperature chart issued by Mellin's Food Company, Limited, which is said to have been suggested by a medical practitioner. On the front of this chart are the name and hours of consultation of a practitioner, and on the back of it an advertisement of Mellin's Food. We regret that any member of the medical profession should allow his name to be associated with a trade advertisement in this manner.

LOST IN THE POST.

ANTIQUARY.—Assuming, as appears to be the fact, that our correspondent expressly or impliedly ordered the instrument to be sent to him by post, the makers do not appear to be responsible for its loss, and are therefore entitled to charge for both the instruments supplied. Of course if our correspondent has any reason to suspect the truth of the makers' story he had better put the matter into his solicitor's hands.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF LONDON.

ELECTION OF REPRESENTATIVES OF CONVOCATION ON THE SENATE. A GENERAL meeting of Convocation was held at the University Building, South Kensington, on Tuesday, October 9th.

A Vote of Condolence with the Queen.—On the motion of the Chairman (Mr. Busk), seconded by Sir Albert Rollit, M.P., a resolution of sympathy with Her Majesty as Visitor of the University on the death of the Duke of Saxe-Coburg and Gotha (Duke of Edinburgh) which had been adopted by the Senate on the previous day, was carried unanimously.

Election of Members of the Senate.—Scrutineers were appointed, and the results of the voting were subsequently announced as follows:

Elected.	Not Elected.
John Fletcher Moulton, M.A., 1,140.	Sir Joshua Girdling Fitch, M.A., 686.
John David McClure, B.A., 1,134.	Edward John Routh, M.A., 434.
Sir Albert Kaye Rollit, LL.D., B.A., 1,063.	Talfourd Ely, M.A., 395.
Thomas Bateman Napier, LL.D., 910.	Thomas McKinnon Wood, B.A., 365.
James Bourne Benson, LL.D., B.A., 906.	Timothy Smith Osler, LL.B., B.A., 340.
Thomas Lambert Mears, LL.D., M.A., 752.	Richard William Hinton, B.A., 280.
	George Armitage-Smith, M.A., 209.
	Albert Bassett Hopkins, M.A., 82.

Law.
Sir Herbert Hardy Cozens-Hardy, LL.B., B.A., 127. Joseph Walton, B.A., 106.

Medicine and Surgery.
Thomas Barlow, M.D., B.S., B.Sc., 381. Sydney Ringer, M.D., 243.
Arthur Quarry Silcock, M.D., B.S., 212.
Joseph Frank Payne, B.Sc., 314.

Science.
Sir Philip Magnus, B.A., B.Sc., 432. Sydney Russell Wells, M.D., B.Sc., 223.
Sophia Bryant, D.Sc., 429. Sydney Howard Vines, D.Sc., 219.
Charles William Kimmins, D.Sc., 364. George Carey Foster, B.A., 213.
Frank Clowes, D.Sc., 333. Robert Davies Roberts, D.Sc., 147.
Silvanus Phillips Thompson, D.Sc., B.A., 239. Charles Henry Draper, D.Sc., B.A., 142.
Francis Sowerby Macaulay, D.Sc., 226.

Music.

Joseph Watson Sidebotham, Mus. Bac. (Oxon).
The candidature of Mr. McClure, Sir Philip Magnus, Dr. Kimmins, Dr. Sophia Bryant, and Mr. Sidebotham was supported both by the Graduates' Association and by the Graduates' Union, and they were all elected. Among the other successful candidates, all five in the Faculty of Arts and two in the Faculty of Science were supported by the Association, and one in the Faculty of Science. Both the representatives of the Faculty of Medicine and Surgery, and the single representative of the Faculty of Laws were supported by the Union. The Graduates' Association is concerned more particularly to protect the interests of external students.

HOURS OF MEDICAL CLASSES AT EDINBURGH.

WE are informed that the lecturers on practice or physic in Edinburgh, whose lectures are recognised by the University Court as qualifying for the University, have addressed a memorial to the University Court directing its attention to the unsuitable hour fixed for the lectures on the practice of physic during the present winter session. Some particulars with regard to this matter were given in the BRITISH MEDICAL JOURNAL of October 6th, page 1,059. We are informed that it is to come before the governing body of the School of the Royal Colleges for consideration. It is suggested that probably the best solution of the difficulty would be for the various teachers of medicine in the extra-mural school to lecture at the same hour session after session, selecting that hour that is conducive to "the greatest happiness of the greatest number." If they would act with cohesion and uniformity the difficulty would soon come to an end.

UNIVERSITY OF GLASGOW.

FIRST PROFESSIONAL EXAMINATION FOR THE DEGREES OF BACHELOR OF MEDICINE (M.B.) AND BACHELOR OF SURGERY (CH.B.).—The following have passed in the subjects indicated (B., Botany; Z., Zoology; P., Physics; C., Chemistry):

A. B. Aitken (B., P.), W. S. Allan (B., Z.), A. Allison (B., P.), A. W. Anderson (B., P.), D. Arbuckle (P.), R. J. Arthur (B., Z.), J. Bain (C.), H. Barr (B.), A. R. Barrowman (B., P.), A. G. Bisset (B.), C. Brown (P.), J. Brown (C.), G. Y. Caldwell (B.), J. P. Carmichael (Z.), P. Carrick (B., Z.), R. B. Carslaw, M.A. (P., C.), W. S. Craig (C.), R. W. Dale (B., P.), T. M. D. Dishington (Z., C.), A. C. Douglas (B., P.), C. M. Drew (B., Z.), W. Duffy (B.), J. S. Dunn (B., P.), J. Ferguson (B., Z., P., C.), C. Fitzgerald (Z., C.), E. J. Fitzgerald (Z., C.), H. H. Fulton (B., P.), W. Gilchrist (C.), W. H. Gillatt (P.), J. Glaister (B.), J. Glover (P., C.), A. Graham (B., P.), D. L. Graham (B., P.), D. J. G. Grant (B., P.), A. R. F. Hay (B., Z., P.), J. W. Hay (B., Z.), J. C. Henderson (Z., P., C.), L. Hislop (B.), R. Howell (B., Z.), A. Hunter (C.), J. Hunter (B., P.), A. Y. Hutchison (B., Z., P., C.), H. S. Hutchison (B., P.), A. Jamieson (B., C.), A. E. Jones (B., P.), D. R. Kerr (B., Z.), J. R. Kerr (B.), G. N. Kirkwood (Z., C.), R. W. Leckie (C.), D. McAulay (B., Z., P., C.), E. B. Macaulay (Z., C.), T. S. Macaulay (B., P.), D. C. McCormick (C.), J. G. M'Cutcheon (B., C.), J. F. Macdonald (B.), N. M'Dougall (C.), J. B. M'Ewan (C.), T. D. M'Ewan (B., P.), D. Macfayden (B., P.), J.

M'Farlane (B. P.), R. Macfarlane (B. P.), A. S. M. Macgregor (B. P.), M. McIntyre (B. C.), C. G. Macleod (B. C.), D. J. M'Leish (B. Z. P.), N. A. Macleod (P.), R. Macleod (P.), A. S. M'Millan (P.), M. T. D. M'Currah (B. P.), N. S. MacNaughtan (P. C.), R. C. Macpherson (B. C.), W. Main (P. C.), J. Marshall (Z. C.), W. B. M. Martin (B. P.), A. Meek (B. P.), J. Moffatt (P. C.), W. S. Moore (Z. C.), G. D. Muir (P.), J. Muir (Z. C.), M. Munro (B. P.), F. A. Murray (B. P.), H. C. Nielson (B. P.), T. Orr (B. Z. P.), H. H. Patrick (B. P.), A. G. Paxton (Z. C.), J. Pearson (B. P.), J. C. Pickup (B. Z.), A. M. Pollock (B. P.), H. S. Ranken (B. P.), D. R. Reid (B. P.), D. F. Riddell, M.A., (Z. C.), D. S. Richmond (P. C.), J. W. Richmond (C.), A. Robertson (B. P.), B. H. Robertson (C.), W. Rolland (B. P.), J. M. Ross (P. C.), E. L. Sieger (P.), R. W. Simpson (B. Z.), A. H. Sinclair (Z.), M. W. Smith (B. P.), J. A. Somerville (Z.), J. Stevenson (P.), A. Stewart (B.), W. Stewart (Z.), W. C. Stewart (C.), W. Templeton (Z. C.), J. W. Thomson (B. P.), A. M'M. Watson (P.), T. M. Watt (C.), A. C. West (B. P.), D. W. Wilson (P.).

Women.—B. S. Alexander (Z. C.), A. A. Baird (B. Z. P.), R. Campbell (B. Z.), M. Hardy (Z.), A. M'Phu (B.), F. Mann (B. Z.), J. E. Munro (P.), E. Oversby (Z.), J. D. Rankin (B. Z.), H. R. L. Reid (P. C.), M. E. Robertson (B. Z.), J. R. Shaw (B. Z.), L. Smellie (Z.), M. Spence (B. Z.).

The following passed "with distinction":

In Physics and Chemistry: R. B. Carslaw, M.A. In Botany and Physics: D. J. M'Leish, W. B. M. Martin. In Botany: J. S. Dunn, A. E. Jones, D. R. Reid, W. Rolland. In Zoology: Jessie D. Rankin. In Physics: T. D. M'Ewan, D. Macfadyen. A. M. Pollock, A. Robertson, J. W. Thomson. In Chemistry: J. Bain, C. M. Drew, J. Glover, D. MacAulay, B. H. Robertson.

SECOND PROFESSIONAL EXAMINATION FOR THE DEGREES OF BACHELOR OF MEDICINE (M.B.) AND BACHELOR OF SURGERY (CH.B.).—The following have passed this examination in the subjects indicated (A., Anatomy; P., Physiology; M., *Materia Medica* and Therapeutics):

W. Armitage (P.), T. Ballantyne (P., M.), A. G. Banks (M.), A. Baxter (P.), A. F. Bell (M.), J. C. Brangan (A.), R. Bruce (M.), R. Bryson (P.), G. F. Buchan (A.), A. Campbell (M.), R. H. Campbell (A., M.), A. A. Carruthers (A., P., M.), R. P. Cartwright (A.), W. B. Chapman (A., M.), J. C. Christie (P., M.), S. C. Cowan (A., P., M.), E. H. Cramb (A.), H. W. Crawford (M.), J. Cross (P., M.), A. Dick (A., P., M.), W. Dick (P.), D. Douglas, M.A. (A., P., M.), A. R. Dow (A.), W. Dow (A., P., M.), J. Ferguson, M.A. (P.), T. Forsyth (A., P.), J. A. Garden (A., P., M.), G. Garry (A.), J. R. Gilmour (A.), J. M. Gordon (M.), J. A. Hagerty (M.), R. D. Hodge (P.), J. M. Huey (M.), J. B. D. Hunter (M.), N. M'C. Hutchison (P., M.), E. D. Jackson (M.), G. R. Jeffrey (M.), W. F. Kay (M.), A. M. Kerr (M.), W. H. Kirk (A.), A. Leitch (P.), S. E. Lewis (A.), T. Lovett (M.), D. D. M'Douglas, M.A. (M.), A. Macintyre (M.), J. M'Kenzie, M.A. (A., P.), J. C. M'Kenzie (A., P., M.), T. M'Laren (P.), J. R. M. Vail (A., P.), R. H. Manson (A., P., M.), H. S. Martyn, M.A. (A., P., M.), R. Menzies (P., M.), A. J. Mitchell (M.), J. Muir (A., M.), J. S. Nicolson (A., P.), D. Penman (M.), T. Rankine (M.), J. M. Reid (M.), D. Riddell (M.), W. Robertson (P., M.), J. Russell (A., P., M.), J. Samson (M.), R. C. J. Schlomka (P., M.), F. D. Scott (M.), M. B. G. Sinnette (A.), J. W. Smith (M.), R. C. Smith (M.), J. Stevenson (A., P., M.), J. B. Stewart (P.), R. R. Swan (A.), J. A. Thom (A., P., M.), J. R. Thomas (A., M.), W. W. Turner (A., P., M.), R. Wallace (P.), T. I. Wallace (P., M.), R. Watson (M.), A. B. Watt (M.), P. M. Waugh (A.), R. T. Wells, M.A. (A., P.), J. F. Weston (M.), J. White, M.A. (A., P.), J. Wilson (M.), E. Wright (M.), W. Young (P.).

Women.—H. S. Baird, B.A. (A., P.), J. Campbell (P., M.), K. Fraser, B.Sc. (A., P.), E. MacLeod Lochhead (M.), M. H. Scott (M.), E. C. Wallace (P., M.).

The following passed "with distinction":

In Anatomy and Physiology: J. White, M.A. In Physiology: D. Douglas, M.A.; Kate Fraser, B.Sc. In *Materia Medica* and Therapeutics: A. G. Banks, J. C. Christie, J. B. D. Hunter, G. R. Jeffrey, A. M. Kerr, D. D. MacDougall, M.A., J. Muir, J. M. Reid.

THIRD PROFESSIONAL EXAMINATION FOR THE DEGREES OF BACHELOR OF MEDICINE (M.B.) AND BACHELOR OF SURGERY (CH.B.).—The following have passed this examination in the subjects indicated (P., Pathology; M., Medical Jurisprudence and Public Health):

J. Anderson (M.), R. W. Auld (M.), J. S. Barr (M.), E. C. Burnett (P., M.), S. J. Cameron (M.), A. Currie (P., M.), J. S. Dale (M.), D. B. Davidson (M.), J. Davidson, M.A. (P., M.); G. H. G. Davie (M.), W. Elder (P., M.), W. W. Farrar (P., M.), G. Ferguson (M.), D. J. Fletcher (P.), W. Gemmill (P., M.), M. Hunter (M.), D. Kyle, M.A. (M.); A. Linn, (P., M.), F. J. Lochrane (M.), J. P. Lusk (P.), W. M. M'Glashan (P.), H. A. M'Lean (P., M.), A. M'G. M'Millan (P., M.), A. D. Mitchell (P., M.), S. J. Moore (P., M.), J. Morison (P., M.), R. Orr (M.), J. N. Prentice (P., M.), R. Ramsey (M.), J. W. Renton (P., M.), W. Robertson (M.), J. C. Ross (P., M.), J. Smith (P., M.), J. G. Tomkinson (M.), J. W. Turner (P., M.), G. White, M.A., B.Sc. (P., M.); J. Wilson (P., M.).

Women.—M. Adams (P., M.), J. T. Miller (P., M.), A. Moorhouse (P., M.), A. B. Sloan (P., M.), E. M. Sloan, (P., M.).

The following passed "with distinction":

In Pathology: J. C. Ross. In Medical Jurisprudence and Public Health: J. S. Barr, S. J. Cameron, R. Ramsey.

ROYAL UNIVERSITY OF IRELAND.

M.B., B.Ch., B.A.O. DEGREES EXAMINATION.—The Examiners have recommended that the following candidates be adjudged to have passed the above-mentioned examination:

Upper Pass.—T. Gray, Queen's College, Belfast; J. McCrea, B.A., Queen's College, Belfast; Everina S. I. Massy, Catholic University School of Medicine; J. C. Rankin, Queen's College, Belfast; J. H. Reford, Queen's College, Belfast; H. E. Rutherford, Queen's College, Belfast; H. B. Steen, Queen's College, Belfast; H. Stevenson, B.A., Queen's College, Belfast; J. Torpey, Queen's College, Cork; A. Welpy, Queen's College, Cork.

Pass.—J. W. Brown, B.A., Queen's College, Belfast; W. J. Cousins, Queen's College, Belfast; M. Crowley, Catholic University School of Medicine; J. P. Dee, Queen's College, Cork; A. J. Frost, Catholic University School of Medicine; E. Heskin, Queen's College, Cork;

O. E. Jackson, Queen's College, Belfast; W. E. J. Jones, Queen's College, Belfast; S. McClure, Queen's College, Belfast; J. A. Mills, B.A., Queen's College, Galway and Belfast; W. Nicholson, Queen's College, Galway and Belfast; P. L. O'Driscoll, Queen's College, Cork; J. J. O'Mahony, B.A., Queen's College, Cork; J. Stewart, Queen's College, Belfast; S. Waddell, Queen's College, Galway.

THIRD EXAMINATION IN MEDICINE.—The Examiners have recommended that the following candidates be adjudged to have passed the above-mentioned examination:

Upper Pass.—S. H. G. Blakely, Queen's College, Belfast; R. J. Bethune, Queen's College, Belfast; H. M. Johnston, Queen's College, Belfast; E. J. Tuckey, Queen's College, Cork; W. Warnock, Queen's College, Galway.

Pass.—J. H. Campbell, Queen's College, Belfast; A. A. Chancellor, Queen's College, Belfast; W. Cummings, Queen's College, Belfast; P. F. Dolan, M.A., Catholic University School of Medicine; A. J. Foot, Queen's College, Cork; Elizabeth S. Graham, Queen's College, Belfast; J. Hartigan, Catholic University School of Medicine; S. T. Irwin, Queen's College, Belfast; J. W. Killen, Queen's College, Belfast; M. J. Landy, Catholic University School of Medicine; M. M. Lee, B.A., Catholic University School of Medicine; G. F. Luke, Queen's College, Belfast; J. L. Lunham, Queen's College, Cork; F. E. McCune, B.A., Queen's College, Belfast; F. C. Mann, Queen's College, Belfast; J. K. G. Martin, Queen's College, Belfast; P. J. Murray, Catholic University School of Medicine; J. F. O'Mahoney, Queen's College, Cork; M. A. Shinkwin, Queen's College, Cork; J. Shipsey, Queen's College, Cork; J. E. Simpson, Queen's College, Belfast; J. K. Small, Queen's College, Belfast; W. A. Stoops, B.A., Queen's College, Belfast; C. E. Suferrn, Queen's College, Belfast; T. H. Suferrn, Queen's College, Belfast; A. T. Swan, Catholic University School of Medicine; Margaret Toner, Queen's College, Belfast.

SECOND EXAMINATION IN MEDICINE.—The Examiners have recommended that the following candidates be adjudged to have passed the above-mentioned examination:

Upper Pass.—Lily A. Baker, Catholic University School of Medicine; M. Cagney, Queen's College, Cork; W. M. Crofton, Catholic University School of Medicine; H. P. Devlin, Catholic University School of Medicine; Mary K. Gibson, Catholic University School of Medicine; D. Gillespie, Queen's College, Belfast; T. Lyle, Queen's College, Belfast; J. C. McPherson, Queen's College, Belfast; J. N. Meenan, Catholic University School of Medicine; R. G. Meredith, Catholic University School of Medicine; W. Menford, B.A., Queen's College, Belfast; J. H. Moore, Queen's College, Belfast; Mary E. Simms, Queen's College, Belfast.

Pass.—A. P. Barry, Catholic University School of Medicine; C. Baylor, Queen's College, Cork; C. J. Boucher, Queen's College, Belfast; C. Byrne, Catholic University School of Medicine; P. T. Crymble, Queen's College, Belfast; J. Dawson, Queen's College, Cork; M. F. Farrell, Catholic University School of Medicine; E. Fitzgerald, Queen's College, Belfast; M. FitzGerald, Catholic University School of Medicine; Marie E. Hayes, Catholic University School of Medicine; C. G. Lowry, Queen's College, Belfast; J. Macarthur, Queen's College, Belfast; F. McDonald, Catholic University School of Medicine; J. W. McFarland, Catholic University School of Medicine; D. McGrath, Queen's College, Belfast; J. C. McHugh, Catholic University School of Medicine; G. B. Moffatt, Queen's College, Belfast; J. Morris, Queen's College, Cork; and St. Bartholomew's Hospital, London; M. J. O'Flynn, Queen's College, Galway; J. J. O'Keefe, Queen's College, Cork; J. W. Pitt, Queen's College, Belfast; P. Power, Queen's College, Cork; D. H. Vickery, Catholic University School of Medicine, School of Physic, Trinity College, Dublin, and Royal College of Surgeons; G. W. W. Ware, Queen's College, Cork.

FIRST EXAMINATION IN MEDICINE.—The Examiners have recommended that the undermentioned candidates be adjudged to have passed the examination:

J. W. Allen, Queen's College, Belfast; W. J. McL. Baird, Queen's College, Belfast; J. A. Beamish, Queen's College, Belfast; J. A. Boyd, Queen's College, Belfast; A. E. Browne, Queen's College, Belfast; W. A. Burke, University College, Dublin; H. J. Byrne, University College, Dublin; J. Dempsey, Queen's College, Belfast; J. Houlihan, University College, Dublin; W. Irwin, Queen's College, Cork; J. Kelly, University College, Dublin; J. A. Lowry, Queen's College, Belfast; J. McConaghy, Queen's College, Galway; R. H. McGiffen, Queen's College, Belfast; G. Madden, University College, Dublin; J. P. Moore, University College, Dublin; W. Murphy, Queen's College, Cork; Jeannie R. Murray, Queen's College, Belfast; S. Porterfield, Queen's College, Galway; T. West, Queen's College, Belfast; W. M. Woods, Queen's College, Cork.

CONJOINT BOARD IN IRELAND.

PRELIMINARY EXAMINATION.—Candidates have passed this Examination as undernoted:

Honours (in order of merit).—B. Bury, R. F. O'T. Dickinson, R. A. Browne, J. Molyneux, J. O'Donnell, A. Hipwell.

Pass (alphabetically).—M. J. Ahern, J. M. Alison, J. Allau, C. W. N. Anderson, C. J. D. Bergin, B. N. Blood, R. J. Bonis, W. R. Burton, P. M. Carroll, W. C. Carson, E. J. Clarke, S. C. Clarke, V. J. P. Clifford, T. W. Conway, J. J. Dove, R. Fyfe, B. C. M'C. Hannan, P. E. Hayden, F. N. Hillis, W. P. Kennedy, J. A. Loughton, L. Lucas, E. Martin, H. R. Matthews, S. Miller, J. J. Murphy, R. V. Murphy, J. J. McNelis, R. A. Odum, C. L. Pemberton, R. K. Ronayne, L. P. Schlegel, A. H. Smith, H. C. Smyth, J. R. Talbot, L. P. Vernon, M. P. Walsh, W. G. Wright.

FIRST PROFESSIONAL EXAMINATION.—Candidates have passed this examination as undernoted:

In all Subjects.—T. A. Bennett, J. Bradley, C. W. O'Keefe, J. O'Kelly. *Completed the Examination.*—J. R. P. Allin, E. A. Bernard, G. P. A. Bracken, M. Campbell, W. S. Carter, P. I. Casey, W. J. Connolly, J. M. G. Foley, E. P. Harding, L. A. Hynes, A. E. S. Irvine, Miss F. J. Lardner, J. M. Moriarty, J. Murnane, Ed. Purcell, A. J. Swanton, S. W. Talbot, M. J. Trimble.

ROYAL COLLEGE OF SURGEONS IN IRELAND. THE QUEEN'S VISIT.

WHEN the Queen was in Dublin last April the Royal College of Surgeons in Ireland presented a loyal address, which was printed in our columns at the time. The Home Secretary has now transmitted to the President the following reply from Her Majesty:

"I thank you heartily for the loyal and dutiful address which you presented to me during my recent stay in Ireland. It gave me a particular pleasure to receive the representatives of your distinguished profession, the reputation of which for skill and devotion to duty has lately been so conspicuously maintained under the severest tests."

SOCIETY OF APOTHECARIES OF LONDON.

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

Anatomy.—H. Archer, Leeds; St. C. G. Ballenden, Birmingham; H. A. S. Gover, St. Mary's Hospital; R. V. Khedkar, Bombay; F. C. R. M. Knight, Guy's Hospital; W. Lovell, St. Mary's Hospital; E. H. McMahon, Charing Cross Hospital; H. P. Margetts, St. Bartholomew's Hospital; S. Northwood, Birmingham; W. V. Peglar, Leeds; A. C. Stark, Westminster Hospital; S. H. Sugden, Manchester; R. W. Taylor, Leeds; M. L. Tyler, Royal Free Hospital; M. G. L. Walker, Leeds; S. H. R. Welch, Charing Cross Hospital.

Physiology.—G. H. Almond, Cambridge; H. Archer, Westminster Hospital; St. C. G. Ballenden, Birmingham; E. W. C. Bradfield, St. Mary's Hospital; W. L. Crabtree, Leeds; H. A. S. Gover, St. Mary's Hospital; I. Griffith, London Hospital; A. F. Heald, Cambridge; H. S. Jones, Guy's Hospital; R. V. Khedkar, Bombay; F. C. R. M. Knight, Guy's Hospital; W. Lovell, St. Mary's Hospital; H. E. Scoones, St. Bartholomew's Hospital; C. M. Scott, Royal Free Hospital; J. B. Stephens, St. Mary's Hospital; M. L. Tyler, Royal Free Hospital; M. G. L. Walker, Leeds.

PRIMARY EXAMINATION, PART I.—The following candidates passed in: *Chemistry*.—A. Bernfeld, Royal Free Hospital; A. G. Elsworthy, Charing Cross Hospital; M. S. Jevons, R. Khedkar, Bombay; R. H. Rigby, Leeds.

Materia Medica and Pharmacy.—J. B. Bradley, Birmingham; E. C. Curtis, Aberdeen; A. T. Greenhill, St. Bartholomew's Hospital; T. E. Johnson, London Hospital; R. Khedkar, Bombay; O. Millauro, Westminster Hospital; J. M. Worswick, Manchester.

PUBLIC HEALTH AND POOR-LAW MEDICAL SERVICES.

HEALTH OF ENGLISH TOWNS.

IN thirty-three of the largest English towns, including London, 6,087 births and 3,964 deaths were registered during the week ending Saturday last, October 6th. The annual rate of mortality in these towns, which had been 18.1 and 18.5 per 1,000 in the two preceding weeks, declined again last week to 17.8. The rates in the several towns ranged from 8.7 in Croydon, 13.8 in Nottingham, 14.2 in Cardiff, 14.3 in Brighton, and 14.4 in Bristol to 24.1 in Norwich, 24.8 in Salford, 25.1 in Sunderland, and 26.0 in Manchester. In the thirty-two provincial towns the mean death-rate was 19.1 per 1,000, and exceeded by 3.3 the rate recorded in London, which was 15.8 per 1,000. The zymotic death-rate in the thirty-three towns averaged 3.0 per 1,000; in London this death-rate was equal to 2.2 per 1,000, while it averaged 3.6 in the thirty-two provincial towns, among which the highest zymotic death-rates were 5.7 in Leicester, 5.8 in Sheffield, 5.9 in Norwich, and 6.7 Burnley, in Sunderland, and in Gateshead. Measles caused a death-rate of 1.0 in Swansea and in Huddersfield, and 1.1 in Newcastle; whooping-cough of 1.3 in Preston and 1.4 in Gateshead; "fever" of 1.0 in Swansea and in Sheffield, 1.4 in Sunderland, and 1.9 in Portsmouth; and diarrhoea of 4.2 in Sunderland, 4.9 in Burnley, 5.0 in Norwich, and 5.2 in Gateshead. The mortality from scarlet fever showed no marked excess in any of the large towns. The 92 deaths from diphtheria in the thirty-three towns included 29 in London, 11 in Leicester, 9 in Leeds, 7 in Sheffield, and 7 in Liverpool. No fatal case of small-pox was registered last week, either in London or in any of the thirty-two large provincial towns; and only 1 case of small-pox was under treatment in the Metropolitan Asylum Hospitals on Saturday last, October 6th. The number of scarlet fever patients in these hospitals and in the London Fever Hospital, which had increased from 1,703 to 1,938 at the end of the five preceding weeks, had further risen to 2,071 on Saturday last; 313 new cases were admitted during the week, against 243, 269, and 318 in the three preceding weeks.

HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday last, October 6th, 968 births and 595 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had been 18.9 per 1,000 in each of the three preceding weeks, rose to 19.3 per 1,000 last week, and showed an excess of 1.5 over the mean rate during the same period in the thirty-three large English towns. Among these Scotch towns the death-rates ranged from 13.5 in Perth and 15.3 in Paisley to 21.2 in Aberdeen and 23.2 in Greenock. The zymotic death-rate in these towns averaged 3.5 per 1,000, the highest rates being recorded in Glasgow and Greenock. The 285 deaths registered in Glasgow included 1 from small-pox, 6 from measles, 5 from scarlet fever, 2 from diphtheria, 7 from whooping-cough, 11 from "fever" (including 1 from bubonic plague), and 26 from diarrhoea. Three fatal cases of measles, 3 of diphtheria, and 6 of diarrhoea were recorded in Edinburgh. Ten deaths from diarrhoea occurred in Dundee, 5 in Paisley, and 4 in Aberdeen; and 9 deaths from whooping-cough in Greenock.

PLAGUE ORDERS OF THE LOCAL GOVERNMENT BOARDS IN SCOTLAND AND IRELAND.

FOLLOWING hard on the footsteps of the Local Government Board, England, the similar authority for Scotland has issued a strongly-worded Order to the various sanitary bodies under its control. The Orders for England were noticed in the *BRITISH MEDICAL JOURNAL* of September 29th, and these are of a like nature. Local authorities, medical officers of health, etc., are reminded of their duties and powers, and it is rightly pointed out that these should place their houses in order, render void all noisome dens, demolish slum areas, and abolish whatever may be a favouring soil for the bacillus, rather than to wait for the advent of the germ and then adopt panic measures. The principles of prevention are to be enforced whereby the practice of cure may be rendered unnecessary. The statutory duties, so far as they were adopted by the Convention of Venice, and lists of susceptible articles and goods, the importation of which may be prohibited, are set forth. The measures to be taken at ports are detailed. In 1898 the Edinburgh Board issued "Regulations as to Cholera, Yellow Fever, and Plague." These regulations are again brought to the notice of local authorities, and they are informed that since the Venice Convention certain new facts concerning the method of spread of the disease have become known, and more efficient methods of combating its spread have been under trial. Quite apart from the special disease with which the Order deals, it may fairly be hoped that it will stir some of the procrastinating or recalcitrant sanitary authorities (of which the Order speaks) to more vigorous action in the near future. The Local Government Board in Ireland has also issued a similar notice urging sanitary authorities to exercise the utmost vigilance in view of the outbreak of bubonic plague in Glasgow. The circular points out the measures which should be taken and recommends the adoption of the Infectious Diseases Notification Act.

THE METROPOLITAN ASYLUMS BOARD. DIPHTHERIA AND SMALL-POX.

THE latest returns of the Metropolitan Asylums District show that during the fortnight ending Thursday, October 4th, 1,152 patients had been admitted into the hospitals of the Board, and that 3,639 were on that date under treatment, being 387 more than the number under treatment a fortnight previously. There were amongst the 3,639 no fewer than 2,021 sufferers from scarlet fever, 1,255 from diphtheria, and 363 from enteric fever. There were only 2 cases of small-pox in the hospital ships. The managers are now prepared to admit cases of small-pox into the hospital ships at a charge of 4 guineas a case from various extra-metropolitan district authorities.

ENTERIC FEVER.

The considerable prevalence of enteric fever, especially in East London, has compelled the managers to resume occupation for three months of the 36 beds which they hired last year at the Metropolitan Hospital, at the rate of £50 a week, including (as before) medical attendance, nursing and domestic staff, the managers undertaking the laundry.

CLASSIFICATION OF IMBECILES.

The managers have recognised for some time past the necessity of providing additional accommodation for imbeciles, both for adults and children. An asylum for 750 patients is being erected at Tooting Bec, and premises have lately been acquired at Little Ealing for the temporary reception of 150 improvable imbecile children. Property is also being purchased at Sutton for the accommodation of imbeciles. Complaints were made at the Board meeting that impediments had been placed in the way of bringing about a better classification of imbeciles at Darenth Asylum, and that imbecile children were being kept in workhouses in London because of the lack of proper accommodation. One member considered it nothing short of a scandal that children and adults were herded together at Darenth Asylum, and that the necessary accommodation had not been sooner provided. The Committee's recommendations were agreed to.

PAUPER CONFINEMENTS IN SCOTLAND.

HYLAX (Scotland) asks whether as parochial medical officer he is entitled to a fee from the parish council for attending a pauper in her confinement?

"* We are informed that parish councils in Scotland generally make their own arrangements with the medical officers. If there is no special arrangement about midwifery fees, the parochial medical officer may be required to attend midwifery without further remuneration than his salary."

HOSPITAL AND DISPENSARY MANAGEMENT.

EDINBURGH ROYAL INFIRMARY.

AT their weekly meeting on Monday, October 8th, the managers of the Royal Infirmary made the following appointments for a period of six months as from October 1st: Mr. Rob. A. Ross, M.B., Ch.B., Resident Physician to Professor Greenfield; Mr. H. Torrance Thomson, M.D., C.M., non-Resident House Surgeon; and Mr. George K. Grimmer, M.B., C.M., Clinical Assistant to Dr. P. M'Bride; Mr. F. D. Simpson, M.B., Ch.B., Clinical Assistant to Professor Simpson; Mr. J. Matheson Cullen, M.D., B.Sc., and Mr. F. Mayes Wilcox, M.B., C.M., Clinical Assistants to Dr. R. W. Philip in the medical waiting-room and Ward Six respectively. Mr. Geo. Mackie, M.B., C.M., was appointed Resident Medical Officer at the Convalescent House, Corstorphine, for six months as from October 1st.

THE German Anthropological Society hold its thirty-first annual meeting at Halle from September 23rd to 27th.

LONDON (ROYAL FREE HOSPITAL) SCHOOL OF MEDICINE FOR WOMEN.—The following scholarships have been awarded: Entrance Scholarship (£30) to Miss J. Coupland; St. Dunstan Scholarship (value £60) to Miss Nora Smith.

MEDICAL NEWS.

MEDICAL MAGISTRATE.—Mr. M. Cursham Corner, of Mile End Road, E., has been appointed a Justice of the Peace for the County of London, Tower Division.

Dr. W. A. Dow, of Lewes, has recently been appointed Deputy Coroner for East Sussex by the Coroner, Dr. G. Vere Benson, with the approval of the Chairman of the County Council. Dr. Dow is an M.D. of Durham, and holds the appointments of Medical Officer to H.M. Civil Prison and the Naval Prison, both in Lewes.

At the opening meeting of the Chelsea Clinical Society, which will be held at 8.30 p.m. on Tuesday next, at the Holy Trinity Parish Hall, Pavilion Road, Sloane Square, the President, Dr. William Ewart, will give an address on a Clinical View of some of the Mechanisms of the Heart and its Valves. This meeting will be open to all members of the medical profession on presentation of their card.

The autumn session of lectures at the Hospital for Diseases of the Skin, Blackfriars, begins on October 23rd, when Mr. George Pernet will deliver a lecture at 5 p.m. on Animal Parasitic Diseases. Seven subsequent lectures will be given on successive Tuesdays at the same hour, and cases of interest illustrative of various cutaneous diseases will be shown at each lecture.

THE SANITARY INSTITUTE.—Examinations in practical sanitary science for inspectors of nuisances under the Public Health Act, 1875, will be held by the Sanitary Institute during 1901 in Bristol, Edinburgh, Birmingham, London, Dublin, Bradford, Liverpool, Cardiff, Norwich, Newcastle, and Manchester; for inspectors of meat and other foods in Birmingham and Liverpool; and in practical hygiene for school teachers in London and Bradford. Examinations in practical sanitary science are also held in Sydney, New South Wales, where a local board of examiners has been appointed to conduct the examination. The regulations and syllabus are practically the same as in Great Britain.

THE LEBANON HOSPITAL FOR THE INSANE.—On August 6th there was opened on one of the lower slopes of Mount Lebanon, Syria, near to the carriage road from Beyrout to Damascus, a newly-built hospital for the care of lunatics. It has been founded by Mr. Theophilus Waldmeier, a veteran missionary in Abyssinia and Syria, and consists of a central administration block, and two pavilions, for male and female patients respectively, accommodating twenty of each sex. Seventeen patients are already under care. Land and gardens for the growth of wheat, olives and other fruit surround the houses. Dr. Wolff, from the Munsterlingen Asylum, Switzerland, is the Medical Superintendent. This is the first organised lunatic hospital in Syria, and the need for such institutions in the East is great. It will probably be dependent upon support from Europe for a good many years. Dr. Percy Smith is the chairman of the committee in London, which includes amongst others Dr. Robert Jones, of Claybury, and Dr. Bedford Pierce, of York; Sir Richard Tangye acts as treasurer.

MEDICAL VACANCIES.

The following vacancies are announced:

- AYLESBURY: ROYAL BUCKINGHAMSHIRE HOSPITAL.**—Resident Surgeon; unmarried. Salary, £40 for the first year, increasing to £100, with board and furnished apartments. Applications to the Secretary by October 22nd.
- BANBURY: HORTON INFIRMARY.**—House-Surgeon and Dispenser. Salary, £80 per annum, with board and lodging. Applications to Mr. C. H. Davids, Honorary Secretary, 21, Marlborough Road, Banbury.
- BATH: EASTERN DISPENSARY.**—Resident Medical Practitioner. Salary, £130 per annum, with furnished apartments. Applications to the Honorary Secretary, 10, Darlington Place, Bath, before October 27th.
- BIRMINGHAM: CITY FEVER HOSPITAL.**—Second Assistant Medical Officer. Salary, £120 per annum, with board, residence, etc. Applications to the Medical Superintendent.
- BODMIN: CORNWALL COUNTY ASYLUM.**—Junior Assistant Medical Officer. Salary, £120, rising to £150 per annum, with board, furnished apartments, etc. Applications to the Medical Superintendent.
- BRADFORD: ROYAL INFIRMARY.**—House-Physician; unmarried. Salary, £100 per annum, with board and residence. Applications endorsed "House-Physician" to the Secretary.
- BRISTOL: HAM GREEN FEVER HOSPITAL.**—Resident Medical Officer. Salary, £100 per annum, with board, lodging, and washing. Applications to Dr. D. S. Davies, Medical Superintendent City Hospitals, 40, Princes Street, Bristol, by November 1st.
- BUXTON DEVONSHIRE HOSPITAL.**—Assistant House-Surgeon. Salary, £50 per annum, with furnished apartments, board, and washing. Applications, endorsed "Assistant House-Surgeon," to the Secretary.
- CENTRAL LONDON OPHTHALMIC HOSPITAL.** Gray's Inn Road, W.C.—House-Surgeon. Salary at the rate of £50 per annum, with board and residence. Applications to the Secretary.
- CHELTEMHAM GENERAL HOSPITAL.**—House-Surgeon; unmarried. Salary, £80 per annum, with board and apartments. Applications to the Honorary Secretary by October 27th.

- CITY DISPENSARY.**—Physician. Applications to the Secretary, 88, Cannon Street, E.C., by October 19th.
- CITY OF LONDON ASYLUM (near Dartford).**—Second Assistant Medical Officer and Pathologist; married, and under 30 years of age. Salary, £150 per annum, with board, furnished apartments, etc. Applications to the Clerk to the Visiting Committee, Guildhall, E.C., by October 20th.
- CROYDON: ROYAL HOUSES HOSPITAL FOR INFECTIOUS DISEASES.**—Resident Medical Officer. Salary, £120, rising to £140 at the end of six months, with board and residence. Applications, endorsed "Resident Medical Officer," to Dr. Meredith Richards, Medical Officer of Health, Town Hall, Croydon, by October 18th.
- DERBY COUNTY ASYLUM.**—Second Assistant Medical Officer. Salary, £110 per annum, rising to £130, with board, lodging, and washing. Applications to the Medical Superintendent, County Asylum, Tickliver, Derby.
- DEVONPORT: ROYAL ALBERT HOSPITAL.**—Assistant House-Surgeon for six months. Salary at the rate of £40 per annum, with board, lodging, and washing. Applications to the Chairman of the Medical Committee by October 25th.
- HALIFAX ROYAL INFIRMARY.** Third House Surgeon, unmarried. Salary £80 per annum, with residence, board, and washing. Applications to the Secretary by October 17th.
- HULL CITY AND COUNTY LUNATIC ASYLUM.**—Second Assistant Medical Officer. Salary, £150 per annum, with board, apartments, and washing. Applications (on forms provided) endorsed "Assistant Medical Officer," to be addressed to the Chairman of the Asylum Committee, care of the Town Clerk, Town Hall, Hull, by October 19th.
- HULME DISPENSARY.** Dale Street, Manchester.—House-Surgeon. Salary, £150 per annum, with board, etc. Applications to the Honorary Secretary of the Medical Committee by October 20th.
- KENT AND CANTERBURY HOSPITAL.**—House-Surgeon; unmarried. Salary, £100 a year, with board and lodging. Applications to the Secretary by October 15th.
- LANCASTER COUNTY ASYLUM.**—Assistant Medical Officer. Salary commencing at £125 per annum, with usual allowances. Applications to the Medical Superintendent.
- LEICESTER INFIRMARY.**—House-Surgeon. Salary, £120, rising £10 per annum until the third year, with board, apartments, and washing. Applications to the Secretary, 24, Friar Lane, Leicester, by October 29th.
- LONDON: FENJIE HOSPITAL AND DISPENSARY.**—Resident Medical Officer. Salary, £80 per annum, with full board. Applications to the Secretary, 172, Shaftesbury Road, W.C.
- LONDON SCHOOL BOARD.**—Medical Officer for the training ship "Shaftesbury," off Grays. Salary, £100 per annum, increasing to £150, and 1s. for each boy examined prior to admission to the ship. Applications to Mr. W. Mason, Acting Clerk to the Managers, School Board Offices, Victoria Embankment, by October 18th.
- LONDON TEMPERANCE HOSPITAL.** Hampton Road, N.W.—Assistant Resident Medical Officer. Appointment for six months. Honorarium at the rate of 50 guineas per annum, with board, residence, and washing. Applications to the Secretary by October 23th.
- MACCLESFIELD GENERAL INFIRMARY.**—Junior House-Surgeon. Salary, £70 per annum, with board and residence. Applications to the Chairman of the House Committee.
- MARGATE: ROYAL SEA-BATHING HOSPITAL.**—Resident Surgeon. Salary, £100 per annum, with board and residence. Applications to the Secretary, at the offices, 30, Charing Cross, London, S.W., by October 25th.
- NOTTINGHAM CHILDREN'S HOSPITAL.**—House-Surgeon. Appointment for six months but eligible for re-election, salary at the rate of £100 per annum. Applications to the Secretary, Mr. A. F. Kirby, St. Peter's, Church Walk, Nottingham.
- PADDINGTON GREEN CHILDREN'S HOSPITAL.** W.—Surgeon to Out-patients; must be F.R.C.S. Applications to the Secretary by November 3rd.
- QUEEN CHARLOTTE'S Lying-in Hospital.** Marylebone Road, N.W.—Assistant Resident Medical Officer. Appointment for four months. Salary at the rate of £50 per annum, with board, residence, and washing. Applications to the Secretary by October 22nd.
- ROYAL FREE HOSPITAL.** Gray's Inn Road, W.C.—(1) Two House-Physicians. (2) One House-Surgeon. (3) One Casualty Surgeon. Appointment for six months. No salary, but board, etc. provided. Applications to the Secretary by October 29th.
- ROYAL HOSPITAL FOR DISEASES OF THE CHEST.** City Road, E.C.—House-Physician. Appointment for six months but eligible for re-election. Salary at the rate of £40 per annum, with furnished apartments, board, and washing. Applications to the Secretary by October 23rd.
- RYDE: ROYAL ISLE OF WIGHT HOSPITAL.**—Resident House-Surgeon. Salary, £70 per annum, and fee of £10 for lectures to nurses. Applications to the Secretary by October 16th.
- ST. PANCRAAS AND NORTHERN DISPENSARY.** Euston Road, N.W.—Two Honorary Physicians. Applications to the Honorary Secretary, 23, Gordon Street, W.C., by November 3rd.
- SALFORD ROYAL HOSPITAL.**—Second Junior House-Surgeon. Salary, £70 per annum, with board and residence. Applications to the Chairman of the Board of Management by October 15th.
- SOUTHAMPTON: ROYAL SOUTH HANTS AND SOUTHAMPTON HOSPITAL.**—Assistant House-Surgeon. Appointment for six months. Salary at the rate of £45 per annum, with rooms, board, and washing. Applications to the Secretary before November 1st.
- SUNDERLAND INFIRMARY.**—(1) House-Physician, (2) House-Surgeon. Salaries, £80 rising to £100 per annum, with board and residence. Applications, endorsed "Applications for Resident Medical Appointment," to the Secretary, by October 17th.
- TAUNTON: TAUNTON AND SOMERSET HOSPITAL.**—Assistant House-Surgeon. Appointment for six months. Salary at the rate of £30 per annum, with board, lodging, and laundry. Applications to the Honorary Secretary.
- TIVERTON INFIRMARY AND DISPENSARY.**—House-Surgeon, unmarried. Salary, £80 and board, lodging and washing. Applications to the Honorary Secretary by October 31st.
- STOURBRIDGE DISPENSARY.**—House-Surgeon. Salary, £120 increasing to £130, with furnished rooms, etc., £25 and allowance for travelling expenses. Applications to the Secretary by October 16th.
- WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL.**—House-Physician. Salary, £100 a year, with board, lodging, and washing. Applications to the Secretary by October 18th.
- WORCESTER GENERAL INFIRMARY.**—House-Surgeon. Salary, £100 per annum, with board and residence. Applications to the Secretary by October 27th.

MEDICAL APPOINTMENTS.

- BROWN, John, M.D.** D.P.H. Vict. Univ., reappointed Medical Officer of Health for the Borough of Baccup.
- BROWN, J. Percival, M.B.** Ch.B. Vict. Univ., appointed Junior House-Surgeon to the Macclesfield General Infirmary.
- DURRANT, Charles E.** L.R.C.P. Lond., M.R.C.S. Eng., appointed House Physician to the General Lying-in Hospital, York Road, London.
- FISHER, Charles, M.R.C.S.** L.R.C.P., appointed Resident Medical Officer to the Victoria Hospital for Sick Children, Chelsea.
- GEORGE, James, M.D.** Glasgow, appointed Professor of Clinical Medicine in the University of Glasgow, vice McCall Anderson, M.D. Glasgow, resigned.
- GILLBRAND, William, M.R.C.S.** appointed Medical Referee under the Workmen's Compensation Act for Bolton in County Court Circuit No. 5.
- GIMSON, K. C.** M.B., B.C. Camb., appointed Certifying Factory Surgeon for the Witham District of Essex.
- HALL, J. Basil, M.C.** Cantab., appointed Honorary Assistant Surgeon to the Bradford Royal Infirmary.
- LAURENCE, Lewis, M.B.** Ch.B. Edin., appointed House-Surgeon to the Victoria Hospital, Bournemouth.

MENZIES, F. N., M.B., Ch. B. Edin., appointed Senior Resident Physician at the Brompton Hospital for Consumption and Diseases of the Chest.

MILLIGAN, W. J., M.A., M.B., Ch. B., F.R.C.S. Edin., appointed Anaesthetist to the Great Northern Central Hospital.

MILES, P. H., M.D. Edin., M.R.C.S. Eng., appointed Ophthalmic Surgeon to the Wrexham Infirmary, *vice* William Charnley, M.D., deceased.

PLUMLEY, Arthur George Grant, M.B. Lond., M.R.C.S., L.R.C.P., L.D.S. Eng., appointed Dental Surgeon to the Oatton Hospital and Wakefield General Dispensary.

RUBRA, H. H., M.B., M.R.C.S. Eng., L.R.C.P. Lond., appointed Assistant Anaesthetist to the Great Northern Central Hospital.

SLATER, B. H., M.B., Ch. B., M.R.C.S., L.R.C.P., appointed Honorary Assistant Surgeon to the Bradford Royal Infirmary.

SMITH, F. Emalie, M.B., Ch. B. Edin., appointed Junior House-Surgeon to the Great Northern Central Hospital.

SPENCE, Arthur D., M.B., Ch. B. Edin., appointed House-Surgeon to Tottenham Hospital.

DIARY FOR NEXT WEEK.

MONDAY.

West London Post-Graduate Medical Graduates' College and Course. West London Hospital, 22, Chancery Street, W.C., 4 P.M.—**Mr. Malcolm Morris:** Consultation. (Skin.)

TUESDAY.

Pathological Society of London. 20, Hanover Square, 8.30 P.M.—**Mr. Churton:** A Case of Pulmonary Valvulitis. Dr. Poynton and Dr. Paine: The Etiology of Rheumatic Fever. (Lantern Demonstration.)

Chelsea Children's Society. Holy Trinity Parish Hall, Pavilion Road, Sloane Square, S.W., 8.30 P.M.—Open-
ing Address by the President, Dr. William Ewart, on a Clinical View of some of the Mechanisms of the Heart and its Valves.

Medical Graduates' College and Course. 22, Chancery Street, W.C., 4 P.M.—**Mr. W. H. Broadbent:** Consultation. (Medical.)

WEDNESDAY.

Medical Graduates' College and Course. 22, Chancery Street, W.C., 4 P.M.—**Mr. James Cantlie:** Consultation. (Surgical.)

London Throat Hospital, 204, Great Portland Street, W., 5 P.M.—**Dr. Furlong:** Potter. Examination of Larynx.

THURSDAY.

Central London Throat, Nose, and Ear Hospital, 5 P.M.—**Dr. Wyatt Wingrave:** Morbid Anatomy and Pathology of the Pharynx.

Harveian Society of London. Stafford Rooms, Tichborne Street, Edgeware Road, W., 8.30 P.M.—**Dr. W. Mansell Mouillon:** On the Advantages of Early Operation in Cases of Acute Inflammation of the Appendix.

Ophthalmological Society of the United Kingdom.—Patients and Card Specimens at 8 P.M. Chair at 8.30 P.M. Papers.—**Mr. Nettleship:** Cases of Blindness from Bullet Wound of the Orbit. **Mr. C. Worth:** Orthoptic Treatment of Convergent Strabismus. **Mr. E. D. Batten:** Eclipse Sighting with Choroido-retinitis and Obstruction of a Retinal Artery. **Dr. David Wood:** Case of Cysticercus in the Eye.

Charing Cross Hospital. Post-Graduate Course, 4 P.M.—**Mr. Stanley Boyd:** Surgical Cases.

West London Post-Graduate Medical Graduates' College and Course. West London Hospital, 22, Chancery Street, W.C., 4 P.M.—**Dr. J. Hutchinson:** Consultation. (Surgical.) 3 P.M.—**Dr. Harrison Low:** Class. Practical Application of Roentgen Rays. (Demonstration.)

Royal College of Physicians of London. 4 P.M.—**Dr. T. Clifford Allbutt:** The Harveian Oration.

FRIDAY.

Medical Graduates' College and Course. 22, Chancery Street, W.C., 4 P.M.—**Dr. St. Clair Thomson:** Consultation. (Nose and Throat.) 5.15 P.M.—**Mr. Hayward Pinch:** The Clinical Examination of the Bladder.

Society for the Study of Disease in Children. 11, Chandos Street, W., 5.30 P.M.—Cases will be shown by **Dr. D. B. Lees, James Taylor, George A. Sutherland, George Carpenter, James H. Sequerra, and by Messrs C. Clement Lucas, Alfred H. Tubby, Sydney Stephenson.**

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 ensure insertion in the current issue.

BIRTHS.

BANHAM.—On October 4th, at the Cedars, Wool, Dorset, the wife of C. W. R. Banham, M.R.C.S., L.R.C.P., of a daughter.

COPENAX.—At COPENAX, 1 W., on October 6th, 1900, the wife of Alfred H. Copeman, B.A., M.R.C.S., L.R.C.P., of a daughter.

MARSH.—On October 6th, at St. Martin's, Aldington, Hythe, Kent, the wife of H. Rupert Marsh, M.R.C.S. Eng., L.R.C.P. Lond., of a daughter.

MASTERMAN.—On September 12th, at Jerusalem, the wife of E. W. J. G. Masterman, F.R.C.S., F.R.E.S.D., D.P.H. Cantab., of a daughter.

POTTS.—On October 5th, at the Bethnal Green Infirmary, N.E., the wife of W. J. Potts, M.D., of a son.

ROBERTSON.—On October 6th, at 5, Rhodes Street, Halifax, the wife of Andrew Robertson, M.A., M.B. and Ch. B. Edin., of a son.

THOMSON.—On October 9th, at 14, Chancery Crescent, Edinburgh, the wife of John Thomson, M.D., F.R.C.P. Edin., of a son.

MARRIAGES.

GODSON-ENTWISLE.—On October 3rd, at the Parish Church, Cheshire, by the Rev. J. Godson, M.A., Vicar of Ashby-Parkville, the Rev. N. Brady, M.A., Rector of Warrington, uncle of the bridegroom and the Rev. F. A. Madsons, M.A., Rector of John Baptist, B.A., M.D., B.C. Cantab., D.P.H. Cantab., second son of Alfred Godson, M.A., M.B., M.R.C.S. Eng., J.P., of Cheshire House, Cheshire, to Alice Maude Greke, the youngest and only surviving child of the late Thomas Entwisle, of Linden House, Cheshire.

SPONG-PICKERING.—On October 4th, at St. Luke's Church, Newtown, Pennsylvania, by the Rev. Edward Ritchie, Major C. S. Spong, B.Sc., F.R.C.S., D.S.O., youngest son of the late William Nash Spong, F.R.C.S., of Faversham, Kent, to Mary Bansey, only daughter of the late Henry Y. Pickering, of Titusville, and of Mrs. Pickering, Newtown, Pennsylvania.

DEATHS.

CORNER.—Ann Corner, wife of Frances Mead, of Manor House, Poplar, aged 66.

COWAN.—On October 6th, at Wigan, suddenly, of pneumonia, Richard Hamilton Cowan, M.R.C.S. Eng., L.S., youngest son of the late Richard Hamilton Cowan, Esq., K.N., of Southsea. No cause.

SEMPLE.—On October 4th, 1900, at 14, Kenilworth Park, Rathgar, Dublin, Major John Semple, R.A.M.C., aged 45 years, late of Kasauli, India.

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, 5. Operations.—1 p.m., Tu., 2.30; o.p., F., 2.

CENTRAL LONDON THROAT, NOSE, AND EAR. Attendances.—M. Tu. Th. S., 2; Tu. F., 5. Operations.—1 p.m., Tu., 2.30; o.p., F., 2.

CHARING CROSS. Attendances.—Medical and Surgical, daily, 1; Women, W., 1; S. 9.30; Tu. Th., 9.30; Dental, M. Th., 8.45; Throat and Ear, F., 9.30; Electro-Therapeutics, Tu. Th., 9.30; Children, Tu. F., 1; Ophthalmic, W., 9.30; Orthopaedic, Th., 1. Operations.—W. Th. F., 3; S., 2.

CHELSEA HOSPITAL FOR WOMEN. Attendances.—Daily, 1.30. Operations.—M. Tu. Th., 2.

CITY ORTHOPEDIC. Attendances.—O.p., M. Tu. Th. F., 2. Operations.—M., 4.

EAST LONDON HOSPITAL FOR CHILDREN. Operations.—M. Tu. 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., 2.30. Operations.—M. W. Th. F.

GUY'S. Attendances.—Medical, 1 p.m., M. Tu. Th. F., 1.30; o.p., M. W. Th. F., 12; Surgical, 1 p.m., daily, 1.30; o.p., M. W. Th. F., 12; Obstetric, 1 p.m., M. Tu. Th. F., 1.30; o.p., Th. S., 12; Eye, 1 p.m., M. Tu. Th. F., 1.30; o.p., M. Tu. Th. F., 12; o.p., Ear, Tu. Th., 12; Skin, Tu. Th., 12; Throat, F., 12; Dental, daily, 9.30. Operations.—Tu. F., 1.30; (Ophthalmic), M., 1.30; Th., 2.

HOSPITAL FOR WOMEN, Soho. Attendances.—O.p., M., 9; Tu. W., 12; Th., 9; F.S., 12. Operations.—M. Th., 2; Th. S., 9.30.

KING'S COLLEGE. Attendances.—Medical and Surgical, daily, 2; Obstetric, daily, 2; o.p., daily, 1.30; Eye, M. W. Th. F., 1.30; Ear, Tu., 2.30; Throat, M., 1.30 F., 2; Dental, M. Th., 10; Skin, M., 10. Operations.—M. Tu. Th. F., 2.

LONDON. Attendances.—Medical, daily, 1 p.m., 2; o.p., 1.30; Surgical, daily, 1.30 and 2; Obstetric, M. Tu. Th. F., 2; o.p., W. S., 1.30; Eye, Tu. S., 9; Ear, W., 9; Skin, Th., 9; Dental, M. Tu. Th. F., 9. Operations.—Daily, 2.

LONDON TEMPERANCE. Attendances.—Medical, 1 p.m., M., 2.30; Tu. F., 3.30; Th., 2.0; O.p., M. Tu. W. F., 1; Surgical, 1 p.m., M., 2; Th., 3; O.p., M. Th., 1.30. Operations.—Th., 4.

LONDON THROAT, Great Portland Street. Attendances.—Daily, 2; Tu. F., 6. Operations.—Daily, 9.30.

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

MIDDLESEX. Attendances.—Medical and Surgical, daily, 1.30; Obstetric, Tu. Th., 1.30; o.p., M., 9; W., 1.30; Eye, Tu. F., 9; Ear and Throat, Tu. F., 9; Skin, Tu., 4; Th., 9.30; Dental, M. F., 9.30; Th., 9.30. Operations.—M. Tu. Th. F., 2.

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

NORTH LONDON HOSPITAL FOR WOMEN. Attendances.—Daily, 2; Ophthalmic, W. S., 9.30. Operations.—Tu. F., 9; Th., 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, Frith Street. Attendances.—M. S., 3; Tu. F., 9; W., 2.30; Th., 7.30. Operations.—Tu., 2.

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., 9.30; Throat, Nose, and Ear, W., 9.30. 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.—O.p., M., 2; 1 p.m., Tu. Th., 2.30.

ROYAL WESTMINSTER OPHTHALMIC. Attendances.—Daily, 1. Operations.—Daily, 2.

ST. BARTHOLOMEW'S. Attendances.—Medical and Surgical, daily, 1.30; Obstetric, M. W., 2; o.p., W., S., 9; Eye, M. Tu. W. Th. F., 2; o.p., M. Th., 2; Throat, Tu. F., 2; Skin, Tu. F., 2; Larynx, M. Th., 2; Orthopaedic, Tu., 1.30; Dental, Tu. F., 9; Electrical, M. Tu. Th. F., 1.30. Operations.—Daily, 1.30; (Ophthalmic), Tu. F., 2; Abdominal Section for Ovariotomy, W., 2.

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

ST. MARK'S. Attendances.—Fistula and Diseases of the Rectum, males, S., 2; females, W., 9.30. Operations.—Tu., 3.30; 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, W. S., 10; Children's Medical, M. Th., 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), 2; S., 4. Operations.—W. F., 2.

ST. THOMAS'S. Attendances.—1 p.m., 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, W., 10.30; Electro-Therapeutics, Th., 2; Mental Diseases, Th., 10; Dental, Tu. F., 2; X-Rays, Tu. F., 2; Vaccination, W., 11.30. Operations.—Daily, 2; (Ophthalmic), Th., 2; (Gynaecological), Th., 2; (Throat), M., 9.30; (Ear), Th., 9.30.

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

THROAT, Golden Square. Attendances.—Daily, 1.30; Tu. F., 6.30. Operations.—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, M. Th., 2; Ear, Tu. F., 2; Orthopaedic, W., 2; Diseases of Women, W. S., 2; Electric, M. Th., 3.15; Skin, Tu. F., 2; Throat and Nose, Tu. F., 2; S., 10. Operations.—Daily, about 2.30; F., 10.

WESTMINSTER. Attendances.—Medical and Surgical, daily, 2; Obstetric, M. Tu. F., 2; Eye, Tu. F., 9.30; Ear, 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 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 *Articulate, London*.