

instances simple large curves at this rate occurred; in other instances the large curves described by the foot movement were notched at the top, indicating a probable fusion of two vibrations into one large curve. Thus, it is evident that the large movements executed by the foot are by no means necessarily a true indication of the actual vibration in the calf muscles.

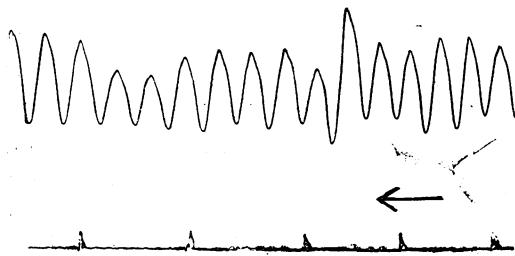


Fig. 8.

The tendency to fusion which sometimes exists in cases of tremor was pointed out by Dawson Williams and Wolfenden,⁵ who examined cases of *paralysis agitans*, disseminated sclerosis, etc., by placing the hand (fingers or palm) on an india-rubber bag connected with a recording tambour. In a case of *paralysis agitans* they obtained large curves at the rate of 5.1 per second; these were notched at the summit, indicating a true rate of 10.2. So in disseminated sclerosis giving 5.2 large waves per second there was evidence of secondary waves, pointing to a true rate of 10.4. In some tracings they noted alternate smaller waves, recalling the appearances seen in a tracing of a "dicrotic" pulse. Herringham⁶ also noted the tendency to fusion in some tremors.

It is hardly necessary to remark that I do not affirm the occurrence of fusion in ankle clonus generally, but only that such may occur, as in the case described above, and that the foot movement may only show half the real rate of vibration in the muscle.

So high a rate of vibration in ankle clonus as 14 per second is interesting in regard to its relation to the character of the discharge, tonic influence, etc., from the motor cells of the spinal cord. Horsley and Schäfer⁷ state that the automatic action of the nerve cells of the cord appears to be never capable of originating a rhythm of greater frequency than 10 per second. But, while we know that the integrity of the spinal cord is essential for the occurrence of ankle clonus and cognate phenomena, we have no definite knowledge as to what relation the cord bears to the rate of vibration.

REFERENCES.

¹ *Diseases of the Nervous System*, London, 1886, vol. i, p. 13. ² *Brain*, iii, p. 179. ³ *BRITISH MEDICAL JOURNAL*, 1885, i, p. 112. ⁴ *Journal of Physiology*, 1890, xi, p. 482. ⁵ *BRITISH MEDICAL JOURNAL*, 1888, i, p. 1049. ⁶ *Loc. cit.* ⁷ *Ibid.*, vii, p. 106.

MEMORANDA:

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

SUPRARENAL EXTRACT IN GASTRO-INTESTINAL HAEMORRHAGE.

Apropos of Mr. Thelwall Thomas's interesting article upon the haemostatic properties of suprarenal extract which appeared in the *BRITISH MEDICAL JOURNAL* of November 23rd, it may interest some of your readers to know that the drug is often of the greatest value in the treatment of severe haematemesis. During the past eighteen months the results I have obtained from its employment have been so uniformly satisfactory that I have quite abandoned all other remedies in its favour, and believe that in at least five cases death would certainly have ensued from loss of blood had preference been given to the more orthodox methods of treatment. The plan usually adopted was to administer 10 fluid ounces of a freshly-prepared decoction containing 2 grs. of the desiccated gland to the ounce, as soon as possible after an attack of

haematemesis, and to repeat the dose at the end of two hours. In two instances, where melena was the sole symptom, three doses were given in four hours. In no case were any unpleasant symptoms observed, though occasionally the first dose produced an inclination to vomit. The cases which afford the most immediate and striking results are those in which the ulcer is comparatively recent, and is situated near the cardiac end of the stomach, as, for example, in the acute disease of young adults, and in that which sometimes complicates cirrhosis of the liver and valvular disease of the heart. In chronic ulcers of the pyloric region, on the other hand, where the eroded vessel is often of large size and so firmly embedded in fibrous tissue as to be incapable of contraction, experience will probably show that suprarenal tissue, in common with other haemostatics, is of little value: but even in such cases an effort should be made to irrigate the stomach with a strong solution through a soft tube.

I might also mention that the constant slight haemorrhage of gastric cancer often ceases entirely with one dose a day, while enemata of a similar character will often control the bleeding from an inoperable cancer of the rectum.

London, N.

W. SOLTAU FENWICK, M.D.

A BREEDING PLACE OF MOSQUITOS.

The accompanying photograph of a plantain illustrates what I believe to be, hitherto, an unobserved source of mosquitos. Each year the old leaves wither, and are cut down, leaving cup-shaped hollows, marked *c* in the photograph. These are



filled with a watery fluid, partly the exudation of the plantain and partly due to rain, and I have found myriads of mosquitos, together with eggs and larvae, in these cavities. These plantains are cultivated to a large extent in Rhodesia for their ornamental value, but I feel sure not wisely.

Enkeldoorn, Rhodesia, South Africa.

A. DUNLEY-OWEN.

MOVABLE KIDNEY WITH RENAL COLIC: NEPHROR-RHAPHY: CURE.*

Mrs. W., aged 45, with five children, had suffered for six or seven years, from uncomfortable sensations in the abdomen with periodical attacks of acute pain in the left lumbar region shooting down to the groin. On palpation the left kidney was found to be freely movable, but as the urine had no pus, blood, or casts, an abdominal belt with a pad on the left side was tried and gave great relief. However, the periodical attacks of pain still recurred from time to time with increasing frequency and severity till in August, 1898, the attack was so severe that she fainted, and was with difficulty brought to. After each of these attacks I examined the urine myself, and had it also examined by the Clinical Research Society, but without any evidence of stone.

However, after the severe attack in August she consented to allow me to operate and discover the cause of these attacks. On September 22nd, 1898, by means of the ordinary incision, I exposed the kidney, and finding the pedicle was sufficiently long, was able to draw it into the wound. The kidney looked perfectly normal in appearance and size, but was rather loosely attached in its bed to the fascia of the quadratus lumborum and psoas muscle. No stone could be felt externally in the pelvis of the kidney or in the substance. The kidney was split open by an incision to the pelvis, and the substance carefully examined. The ureter was palpated carefully to the brim of the pelvis, but no stone was found. Three sutures were then passed through the cortex of kidney. The kidney was then sutured to the top of the incision as high up as possible, the wound closed, and a drainage tube inserted. The tube was removed on the third day.

For a fortnight the case ran an uninterrupted course to recovery, the temperature never being over 99.4° . At the end of the fortnight the patient had a rather sharp attack of cystitis, due, I am afraid, to a catheter not being thoroughly sterilised. However, this attack ended in a week, and the patient left the home twenty-three days after the operation.

It is now three years since the operation, and there has been no return of the symptoms, the periodic attacks of acute pain having entirely disappeared. The only explanation of these pains that I can find is that the kidney was so loose in its position that at certain times it caused a kink in the ureter, and that the urine, being unable to reach the bladder, caused these severe attacks of pain simulating renal colic from a calculus, acting in the same way as a full bladder which cannot be emptied in consequence of a stricture or any other cause, or that the kidney by its loose attachment twisted the ureter and thus caused a similar obstruction.

I have mentioned this case, as the fixing of the kidney was made by passing silk sutures through the cortex of the kidney, and not by suturing the capsules. Three years have now passed, and there is no evidence that these silk sutures have cut through, as is alleged against this mode of procedure.

L. COLE-BAKER, M.D.,
Assistant Physician, Royal Portsmouth Hospital.

FOREIGN BODY IN LUNG: EXTRUSION BY PARIETAL ABSCESS.

On August 28th I was called in to see a child, aged 12 years, whom I found to be suffering from localised inflammatory trouble in the upper part of the right lung. This caused intense pain, more than is expected in an acute attack of acute bronchitis, extremely rapid and shallow breathing, together with great sleeplessness and unaccountable irritability of the nervous system generally. The pain was so great that the child was afraid to cough, yet there was no sign of pleurisy or pneumonia. Moreover, the pain could be exactly located by the child placing her finger over the spot, and I noticed that day by day this spot changed its position in an outward and downward direction, the lung in its path taking on the auscultatory signs of bronchitis, whereas the parts previously affected gradually lost those signs.

At the end of the first week the pain was experienced directly beneath the lower angle of the scapula, and now signs of localised pneumonia presented themselves, and

* This case was shown before the South East Hants District of the Southern Branch of the British Medical Association.

shortly those of pleurisy. The area now involved had a radius of about 3 inches. At the end of the third week the child was greatly better, the lung and pleura having quite healed, but 4 inches from the lower angle of the scapula and 5 inches from the nipple and a little to the left of a vertical line from the axilla a very painful red spot appeared, which in a couple of days resembled a boil. This was regularly poulticed, and I soon found that I had a large abscess to deal with, which burst through the skin, giving off a large quantity of pus. There was no connection with the pleural cavity, and the lung was now doing its work quite well. On September 25th a foreign body made its appearance at the opening of the abscess; this I extracted, and found it to be a head of wild barley (hordeum murinum).

On showing this to the child's mother I now learned for the first time that the child had "swallowed a wild grass" on August 21st, or a week before she got seriously ill. This evidently had found its way into the trachea by means of a deep inspiration, and had travelled through the main bronchus to the lung, setting up the above described trouble in its train. The wild grass is an inch and a quarter in length, and has several long awns or spikelets, which being compressible considerably help its progress onward by a kind of spring, whereas the spiculae or barbs with which each awn is furnished prevent the grass from travelling backward. In addition, the grass has a short, sharp stalk, which pierced everything with which it came in contact.

The child was quite well a few days after the removal, when the wound quickly healed.

A. BARNES HUGHES, M.B., C.M.

CASE OF PUPERAL FEVER TREATED BY ANTISTREPTOCOCCUS SERUM.

A. H., a multipara, was delivered on January 20th, 1901. As the second stage was tedious and the patient felt herself getting exhausted, forceps were applied. On the third day she had a rigor, her temperature registered 103° , her pulse was 120. She complained of pain in her left shoulder and hip. The skin was slightly jaundiced. An intrauterine douche of biniodide of mercury was administered. She was douched daily with various antiseptics—viz., biniodide, chinosol, and creolin—and for the following four days her evening temperature was 102.5° , and her pulse 120. She was able to take only very little nourishment, bread tasted like wood. On the ninth day her temperature had dropped to 100° and her pulse to 96, and her general condition was improved, but on the tenth day she had another rigor, not so severe as the first, but her general condition was infinitely worse. She presented a pinched, anxious expression; her skin was quite jaundiced; her temperature was 104° and her pulse 140. Ten c.c.m. of antistreptococcus serum with digitalin $\frac{1}{10}$ gr. and atropine $\frac{1}{100}$ gr. were injected. Her temperature dropped for about an hour to 103° when it returned to 104° ; the pulse remained the same.

On the morning of the eleventh day the temperature had dropped to 101° , her pulse was 120, and her general condition was greatly improved. She had slept better and had a little appetite. The pain in her joints was not so severe. On the morning of the twelfth day the temperature had dropped to 101° , but it rose to 104° in the evening. Her pulse was 120. On the morning of the thirteenth day the temperature dropped to 100° , while the pulse was 124. As her temperature still kept up another injection of serum was given at 2.15 P.M. At 3.15 P.M. her temperature rose to 103° ; at 9.15 P.M. it had dropped to 102° ; her pulse was 132. On the morning of the fourteenth day her temperature had dropped to 100° , and her pulse was 96. From this time she gradually got better.

I do not think that douching by itself would have pulled her through. The serum reduced the temperature, but had apparently no effect on the pulse.

No bacteriological examination of the blood was made.
H. HUGHES, M.R.C.S., L.R.C.P., L.S.A., L.M.
Penrhynedraeth.

THE King Edward's Hospital Fund for London has received the fourth annual grant of £1,000 from the trustees of the London Parochial Charities to be applied to the maintenance of convalescent hospitals.

him, as joining the different kinds of practice, and instructive or general clinical purposes.

He was a Fellow, or Member, of the Medico-Psychological Association, the Neurological Society, the Clinical, and Royal Medical and Chirurgical Societies; also of the Medical, the Obstetrical, and West London Medico-Chirurgical Societies, of which last he was at one time Vice-President, and he expressed to the writer how much he enjoyed the meetings of this Society, and how much interested he was in the practice at the Dispensary above mentioned.

He was the author of *A Directory of Justices in Lunacy*, and of various articles in the *Dictionary of Psychological Medicine*, in the *West Riding Asylum Medical Reports*, the *Medico-Chirurgical Transactions*, the *Journal of Mental Science*, and the weekly medical press. Among the last he had a closer connection with the *Lancet*. He usually chose practical subjects for his published articles; such, for example, as forcible feeding of the insane, the relations between menstruation and insanity, and between the change of life and insanity, the premonitory symptoms of insanity, the prevention of suicide in the insane, cases on the borderland of insanity. Other contributions were on arachnoid cysts, and the histology of the blood in the insane, and some lectures on mental diseases were published in the *Medical Times and Gazette* in 1883. Two subjects in which he was much interested latterly were the prognosis in different forms of insanity, and suicide by the insane.

Dr. Sutherland was a man of wide sympathies and broad interests. He was wise enough to accept enjoyment from any innocent pleasure which offered itself as a relaxation from the anxieties and monotony of professional work. He was possessed of much social tact and consideration for others, was thoroughly good-hearted, made for himself many friends, and retained their friendship. Tactful, sympathetic, unassuming, and courteous, a pleasant companion, and a genial host; he was always a great favourite with those of his medical contemporaries who had the pleasure of knowing him, and always held their respect and esteem. He had many solid and serious mental tendencies, did not confine his attention solely to his profession, and was deeply interested in works bearing on religious subjects. During his later years a congenial marriage widened his already wide social relations, enhanced his interest and pleasure in life, and matured his qualities. He leaves a gap not easily filled.

W. J. M.

UNIVERSITIES AND COLLEGES.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

ANNUAL MEETING OF FELLOWS AND MEMBERS.

MR. H. G. HOWSE, President, took the chair at the annual meeting of Fellows and Members held at the College on November 21st, 1901.

The PRESIDENT said that in response to a request made at the last annual meeting the Council had added to the annual report a list of Honorary Fellows, Fellows, and Members whose deaths had been reported during the year. The report of the Council was now sent to all those Fellows and Members who had registered their names as wishing to receive the report annually.

Members and the Election of the Council.

Dr. T. MORTON moved:

That this annual meeting of Fellows and Members adheres to the opinion, which it has regularly expressed during the last seventeen years, that a certain proportion of the College Council should be elected by the Members. As, however, the Council has hitherto refused to entertain this proposal, it is hereby invited to suggest some alternative means by which the Members may be admitted to that share in the direction of the affairs of the College to which they are entitled on account of their Membership, their numbers, their professional status, their large contribution to the College income, and by the fact that in them alone is vested the whole of the College property.

He said that his motion raised the whole question of the right of Members to representation on the Council that had been urged year after year, and would be continually put forward until some reform in this direction was conceded.

Mr. J. SMITH in seconding said that the President of the

College would hold a more dignified and important position if he represented the Members, and was not elected by the small number of Fellows who voted.

Mr. F. W. COLLINGWOOD said that it was not too late for the Council to give a moderate degree of extension of the franchise to the Members.

Surgeon-Major INCE looked forward to the establishment of a national and imperial amalgamation of the various examining bodies in the United Kingdom.

Mr. CORNISH thought that there should be a State examination entirely independent of the Royal Colleges. He believed that medical students would in future go abroad, where they could get their education much cheaper, and be registered all the same. He suggested that the Members of the College should apply to the Privy Council for what they wanted.

Mr. W. G. DICKINSON feared that self-interest was the only thing that could induce the Council to grant the request of the Members.

Mr. G. H. HILLS said that the College would fade into insignificance unless it attracted the medical students, who were going more and more to provincial schools.

Mr. MORTON (Putney) said in regard to midwifery legislation the Council was ready to barter away the privileges of the Members.

Mr. BATEMAN recommended that the Members should interest Parliament in the matter, and offered to join with any other Member in that object by contributing £100 to have the whole matter threshed out.

The motion was then put and carried by a large majority.

The First Year of the Curriculum.

Mr. GEORGE BROWN moved:

That this meeting regrets that the Council has adopted the policy of contravening the regulations of the General Medical Council in the matter of the recognition of scientific institutions, thereby acting disloyally to the General Medical Council, and setting an example which, if followed by other licensing bodies, must result in materially lowering the standard of medical education.

He said that two or three years ago the curriculum was raised from four to five years, but the Royal Colleges accepted one year spent at certain Board Schools and higher grade schools as one out of the five years which should be spent at a *bona-fide* medical school. The Irish and Scotch Colleges demanded explanations, and the representative of the Royal College of Surgeons blurted out that the five years system was found not to pay, so that some system had to be devised to attract the students under other regulations.

Mr. T. BRYANT said that Mr. Brown's statement was not in accordance with the facts.

Mr. BROWN replied he was present when Mr. Bryant made the statement.

Surgeon-Major INCE, who thought the question delicate, wished to move the previous question, but the meeting objected to his views, and advised him to vote against the motion.

Mr. T. BRYANT explained that he did use the words alluded to, but they referred to a totally different subject.

Mr. BROWN invited Mr. Bryant to explain in the medical journals what his words did apply to. The Medical Acts evidently intended that the General Medical Council should be the supreme body in the matter of medical education.

Mr. NELSON HARDY in seconding said that the annual report of the Council showed that it wished to shield itself under the action of the Conjoint Examining Board.

Mr. T. R. ATKINSON said that it was extreme presumption to dictate to the Conjoint Colleges what they should do.

Mr. JOSEPH SMITH supported the motion.

Mr. BRYANT said it was a great pity that any subject still *sub judice* should be discussed.

Mr. DICKINSON said Mr. Bryant used that argument a year ago.

Mr. BRYANT said that the matter was just where it was a year ago.

Surgeon-Major INCE thought that the meeting had not the *data* for the discussion of the matter.

Mr. DICKINSON showed that the *data* were in the report of the Council.

Mr. BROWN pointed out that full reports were obtainable at the office of the General Medical Council.

The CHAIRMAN, in reply to Mr. Nelson Hardy, said that it was impossible to avoid quoting the Conjoint Examining Board in the annual report, because they acted together. The Council had acted for the best interests of the profession at large and to maintain the legal rights of the College.

The motion was then put and carried.

Amendment of the Medical Acts.

Dr. G. DANFORD THOMAS moved :

That this meeting concurs generally in the suggested amendments to the Medical Acts mentioned as desirable in the letter quoted on pages 5 and 6 of the report. This meeting regrets, however, that the Council declines to actively promote even those amendments of which it approves, and trusts that it will at least give hearty support to the Bill of the British Medical Association when it comes before Parliament.

He asked the Council to accept six copies of the Bill for their consideration at a convenient time.

Mr. DICKINSON seconded the motion, and the CHAIRMAN, after stating that he would accept the six copies on behalf of the Council, then put the motion from the chair and declared it carried.

Election of Representatives on General Medical Council.

Mr. BRINDLEY JAMES moved :

This meeting is of opinion that the representatives of the College in the General Medical Council should be elected jointly by the Fellows and Members of ten years standing.

This was seconded by Mr. J. C. SMITH, and supported by Mr. COLLINGWOOD.

The CHAIRMAN said that it was the necessary that the representative of the College on the General Medical Council should be chosen from the Council of the College.

The motion was then put and carried.

Admission of the Public to the Annual Meetings.

The following motion proposed by Dr. HERBERT SNOW, and seconded by Mr. BRINDLEY JAMES, was not carried :

That it is inadvisable to continue to hold the annual meeting with closed doors; and that the Council be requested to sanction the free admission of the public to the gallery.

The proceedings then terminated.

Mr. JOHN SPENCER FERRIS, M.B. Lond., M.R.C.S. Eng. (Uxbridge) writes : I attended the meeting at the College of Surgeons last Thursday, and was surprised to find only about 40 members, though we were told there were 16,000 of them. We cannot expect the Council seriously to consider the subject of representation while members by non-attendance show such a feeble interest in the question.

UNIVERSITY OF CAMBRIDGE.

DR. LAURENCE HUMPHREY has been appointed University Lecturer in Medicine for five years from Christmas next.

Cardiff Infirmary has been recognised by the Medical Board as a place of clinical study.

Mr. D. G. Sutherland, of St. John's College, has been awarded the Certificate of Research for his work on certain spore-bearing anaerobic organisms, considered as criteria in the bacteriological examination of water-supplies.

At the Congregation on November 21st, the following degrees were conferred. M.B. : O. F. F. Grünbaum, Trinity; T. W. S. Paterson, Caius. M.B. and B.C. : J. H. P. Fraser, Jesus.

UNIVERSITY OF EDINBURGH.

OCTOBER EXAMINATIONS.

THE following are some of the statistics of the recent October examinations :

Medical Preliminary.—Entered for examination, 151 (including 17 women). English, 69 passed and 40 failed; mathematics, 72 passed and 52 failed; Latin, 61 passed and 64 failed; Greek, 17 passed and 3 failed; French, 32 passed and 56 failed; German, 2 passed and 5 failed; Arabic, 1 failed; Syriac, 1 passed.

First-Year Students of Medicine.—The number who passed the preliminary at one university examination was 45. Passed preliminary to two University examinations, 9; passed preliminary partly with outside exemptions, 17; passed preliminary entirely with outside exemptions, 60; exempted by a degree in arts or in science, 10; completed preliminary, 141, as against 128 last November; partly completed preliminary, 3; formerly completed preliminary or otherwise accounted for, 88; total first-year students of medicine (including extra-academical graduation women students), 232.

Women Students.—The number matriculated is : Arts, 245; science, 1; medicine, 4; music, 16. There are 21 non-matriculated women students, and 84 extra-academical graduation students of medicine. Thus the total number of women students in connection with the University is 371, as compared with 345 in November of last year.

UNIVERSITY OF WALES.

The annual meeting of the Court of the University was held at Aberystwith on November 22nd, when Dr. Isambard Owen, Senior Deputy-Chancellor, presided.

It was announced that the King had come to the decision with much regret, and after full consideration, that it would not be quite suitable that the Sovereign should remain the Chancellor of any University. His Majesty expressed the pleasure with which he had watched, during the last five years, the early success of the University, and its steady advance, and the diligent care with which its business, both academic and general, had been administered by its authorities and officers, the high standard of learning they had reached, and the industry with which the students strove to attain to it. The King added that it would afford him pleasure to retain a titular connection with the University, and should it be agreeable to its members would have great satisfaction in assuming and bearing the honorary title of Protector of the University of Wales.

The Deputy-Chancellor said that while deep regret would be felt that His Majesty was unable to continue in the office of Chancellor all would appreciate the reasons which had led him to take that step and would feel that the spontaneous offer on His Majesty's part to assume an honorary connection with the University was most gracious.

A resolution was adopted expressing loyal gratitude to His Majesty for the services he had rendered to the University during his tenure of office as Chancellor during the past five years, and gratefully accepting his offer to assume the title of Protector of the University.

The Court subsequently resolved to ask the Prince of Wales to accept the post of Chancellor.

ROYAL NAVY AND ARMY MEDICAL SERVICES.

REORGANISATION OF THE ARMY MEDICAL SERVICE.

We have received a further large batch of letters, much of the same distinctive tenour as the first, on the proposals of the Committee, which apparently seem less liked the more they are looked at. The following are summaries :

DISGUST writes : What are the salient features of this new scheme? (1) Four tremendous examinations, with certain advantages for high marks; (2) four chances of being dismissed the service, each handicapped with disgrace, the final with ruin; (3) insidious trenching on the one great asset of the R.A.M.C.—the right to retire on £1 a day after twenty years service; (4) not one of the evils resulting from under-manning grappled with. Had the Committee simply recommended increase of establishment and increased pay, with charge pay, the various evils which press would soon have disappeared, and the R.A.M.C. been popularised.

STREFFORD writes : Let me add my testimony against several of the proposals of the Committee : (1) By what reasoning could the Committee imagine that young medical men, already weary of examinations during a severe curriculum, would deliberately join a service in which there would be no rest from such examination for twenty years of their lives? (2) What gratuity is preferable—the old £1,250 at ten, or the new £1,000 at nine, years service? (3) There is no guarantee of the one inducement to serve—£1 a day pension after twenty years service. (4) What proof exists that the best officers, executive or administrative, can be selected by marks attained in a theoretical examination? (5) By paragraphs 51 it appears that medical officers of the Guards may not belong to the R.A.M.C., and yet may become Surgeon-Generals or even Director-General. These be "privileges" without justice.

SPERO MELOREA writes : We serving abroad simply regard this new scheme as warranted to keep good men out of the service as a career. The most clamant evils—excessive foreign service, constant moves, insufficient leave, private or study, resulting from under-manning—are not considered at all. No expert evidence of the true needs of the service was called, or, if received, considered. The examinations alone would defeat the scheme. How comes it the Indian Medical Service is not reckoned professionally incompetent without them? Tampering with pensions at twenty years service is quite fatal.

A DISGUSTED ONE writes : Senior medical officers in India regard the new scheme as most disappointing and disheartening : (1) I assert that the R.A.M.C. as medical officers are more up-to-date than their detractors seem to know or are willing to allow; it is therefore entirely uncalled for to seek to convert them into a mere "mandarin corps." They claim to be truly practical men in their duties, and such knowledge cannot be acquired as mere bookworms. (2) They are simply astounded at the wild proposal to invalidate the one great attraction—retirement on £1 a day at twenty years—by substituting a gratuity of £2,500 (para. 45 of the report). (3) Accelerated promotion by examination marks they fear may and could be worked with injustice towards individuals, considering that men would be examined under totally dissimilar conditions. (4) The slight reference to Indian pay in an appendix gives no assurance, and is wholly unsatisfactory. (5) There is no attempt to equalise the disproportionate tours of home and foreign service. (6) The proposed rates of pay proper seem generous, but there is no certainty that the allowances may or may not be included. Finally, in what other branch is an officer who fails to pass an examination placed in a "supernumerary list," thereby losing time both for promotion and pension?

ANOTHER INDIAN CORRESPONDENT writes : Personally, I and many others engaged to serve with a right to pension of £1 a day after twenty years' service, is that to be abrogated? Then, indeed, the total wreck of the Army Medical Service is effected. I have served eighteen years, with only two and a-half at home. To be called upon to pass severe examinations on ten different subjects, and if one fail to pass a mere theoretical examiner to submit to the forfeiture of a life's service is monstrous.

X. Y. Z writes : In my protest against this scheme I ask, was it not the quantity rather than the quality of the R.A.M.C. that was chal-

MEDICAL NEWS.

THE American Medical Association will hold its annual meeting at Saratoga, New York, in June, 1902, when it is expected that fully 5,000 delegates from all parts of the United States will be present.

A MEETING promoted by the British Medical Temperance Association was held recently at Guy's Hospital, under the chairmanship of Mr. Charters Symonds, when a paper on the advantages of total abstinence was read by Dr. Claude Taylor, and led to an interesting discussion.

We are asked to state that the twenty-third annual dinner of the past and present students of the Leeds School of Medicine will be held on Thursday next, December 5th, at the Queen's Hotel, Leeds. Mr. C. J. Wright will preside, and further particulars can be obtained from the honorary secretaries, Mr. H. M. Birkett and Mr. H. Wales, at the Medical School, Leeds.

CAMBRIDGE MEDICAL GRADUATES CLUB.—The smoking concert of the Cambridge Medical Graduates Club was held at St. James's Hall on Wednesday, November 21st, and was well attended by members of the club and their guests, and also by members of the Oxford Medical Graduates Club as guests of the Cambridge Club. The number present was 218.

THE OBSTETRIC DEPARTMENT AT ST. THOMAS'S HOSPITAL.—The term of office of Dr. C. J. Cullingworth as Obstetric Physician to St. Thomas's Hospital expired under the age-limit in June last. He was invited to continue in the office for a further period of three years, but being desirous of diminishing the amount of his work, and not wishing to hinder the ordinary course of promotion, he suggested that his colleague Dr. Walter Tate should be associated with him as full Obstetric Physician, and become responsible for the large share of the ward work. This proposal was unanimously supported by the medical staff, and, some technical difficulties having been overcome, Dr. Tate was at the Court of Governors on November 20th elected an additional Obstetric Physician to the hospital, with charge of twenty-one beds. Dr. Cullingworth will retain charge of seven beds.

ROYAL DENTAL HOSPITAL OF LONDON.—The annual dinner of the staff and past and present students of this hospital took place at the Hôtel Métropole on November 23rd. Mr. W. H. Woodruff occupied the chair, and in proposing the toast of "The King" alluded to the new designation of the hospital, and to the fact that the King had become its Patron. In toasting "The Past and Present Students" he stated that the new entry this year was 55, the largest that had ever been. Mr. E. G. Batts and Mr. G. Sheppard responded. Dr. Washbourn, C.M.G., in proposing "The Hospital and School," said that during the past two years, while in South Africa, he had found that many men were incapacitated from service on account of defective teeth. Mr. R. Winch and Mr. W. B. Paterson replied. Mr. Norman Bennett proposed the health of the visitors, and Mr. H. F. Waterhouse, Dean of Charing Cross Hospital, responded. Mr. W. E. Harding, of Shrewsbury, an old fellow student of the Chairman, proposed his health, and the Chairman replied.

MEDICAL VACANCIES.

The following vacancies are announced:

BEVERLEY DISPENSARY AND HOSPITAL.—Medical Officer and Dispenser. Salary, £160 per annum. Applications to the Clerk by December 2nd.

BIRMINGHAM AND MIDLAND FEE HOSPITAL FOR SICK CHILDREN.—(1) Resident Medical Officer. (2) Senior Surgical Officer. Salary, in each case, £60 per annum with board, washing, and attendance. Applications to the Secretary, Children's Hospital, Steelhouse Lane, Birmingham, by December 4th.

BIRMINGHAM AND MIDLAND HOSPITAL FOR SKIN AND URINARY DISEASES.—Clinical Assistant. Applications to the Secretary by December 5th.

BRADFORD CHILDREN'S HOSPITAL.—House-Surgeon. Salary, £100 per annum, with board, residence, and washing. Applications to the Secretary by December 9th.

BRIGHTON: SUSSEX COUNTY HOSPITAL.—(1) Second House-Surgeon and Anæsthetist. Salary, £70 per annum, with board and residence. (2) Third House-Physician. Candidates must be unmarried, and under 30 years of age. Applications to the Secretary by December 11th.

BUXTON: DEVONSHIRE HOSPITAL.—(1) House-Surgeon. Salary, £100 per annum. (2) Assistant House-Surgeon. Salary, £50 per annum. Furnished apartments, board, and lodgings provided in each case. Applications to the Secretary by January 25th, 1902.

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 by December 9th.

CHELSEA HOSPITAL FOR WOMEN, Fulham Road, S.W.—Resident Medical Officer. Unmarried. Salary, £60 per annum. Applications to the Secretary by December 7th.

CROYDON GENERAL HOSPITAL.—(1) Senior House-Surgeon. Salary, £105 per annum. (2) Junior House-Surgeon. Salary, £60 per annum. Board, laundry and residence provided in each case. Applications, endorsed "Senior" or "Junior," to be sent to the Secretary, December 2nd.

DOWNPATRIOT: DOWN DISTRICT LUNATIC ASYLUM.—Assistant Medical Officer, unmarried, and not exceeding 34 years of age. Salary, £150 per annum, increasing to £200, with furnished apartments, board, washing, and attendance. Applications to the Resident Medical Superintendent by December 17th.

DUBLIN: CHILDREN'S HOSPITAL, Temple Street.—House-Surgeon. Salary, £50 per annum, with apartments. Applications to the Honorary Secretary, Medical Board, by December 5th.

DUBLIN: DR. STEEVENS'S HOSPITAL.—House-Surgeon. Salary, £100 per annum, with apartments, fire, and light. Applications to the Governors and Guardians by December 9th.

DUBLIN: ROYAL HOSPITAL FOR INCURABLES, Donnybrook.—Resident Medical Officer. Salary, £100 per annum, with board and furnished apartments. Applications to Mr. John J. Thompson, Registrar, at the Hospital, by December 6th.

EAST LONDON HOSPITAL FOR CHILDREN, Shadwell, E.—House-Physician. Board, residence, etc., provided and honorarium of £25 at the completion of six months satisfactory service. Applications to the Secretary by December 14th.

GLASGOW UNIVERSITY.—Additional Examiners for Degrees in Medicine, with special reference to (1) Chemistry, (2) Materials Medica and Therapeutics, (3) Zoology, (4) Practical Medicine, systematic and clinical, (5) Surgery systematic and clinical. Salary for (1), (2), and (4), £30, and for (4) and (5), £50. Applications to the Secretary of the Glasgow University Court, 91, West Regent Street, Glasgow, by December 3rd.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.—House-Physician; unmarried. Appointment for six months. Salary, £20; washing allowance, £2 10s.; with board and residence. Applications to the Secretary by December 4th.

ITALIAN HOSPITAL, Queen Square, W.C.—Honorary Surgeon. Applications to the Secretary by December 2nd.

KING'S COLLEGE, London.—Demonstrator of General Pathology and Bacteriology. Applications to the Council by December 7th.

LEWES: EAST SUSSEX COUNTY COUNCIL.—Medical Officer of Health. Salary, £200 per annum, with fees, etc. Applications to the Clerk of the County Council, County Hall, Lewes, by December 19th.

MANCHESTER: HOSPITAL FOR CONSUMPTION AND DISEASES OF THE THROAT AND CHEST.—Resident Medical Officer for the In-patient Department, Bowdon. Salary, £10 per annum, with board, apartments, washing, and railway contract to Manchester. Applications to the Secretary by December 7th.

MANCHESTER: OWENS COLLEGE.—Assistant Lecturer in Pathology. Stipend, £15 per annum. Applications to the Registrar by December 4th.

MANCHESTER: ST. MARY'S HOSPITAL, Quay Street.—House-Surgeon and Resident Obstetric Assistant Surgeon. Appointment for one year, but eligible for re-election. Salary, £100 per annum, with board and residence. Applications to the Secretary by December 5th.

MIDDLESEX HOSPITAL, W.—Medical Officer and Registrar to the Cancer Department. Salary, £100 per annum, with board and residence in the College. Applications to the Secretary-Superintendent by December 14th.

NORTH STAFFORDSHIRE INFIRMARY AND EYE HOSPITAL, Har'bill, Stoke-upon-Trent.—House-Surgeon. Salary, £120 per annum, increasing £10 per annum, with furnished apartments, board, and washing. Applications to the Secretary by December 5th.

NORTH-WEST LONDON HOSPITAL, Kentish Town Head.—(1) Resident Medical Officer. (2) Assistant Resident Medical Officer. Appointments for six months; the junior officer is eligible for the senior post. Salary in each case at the rate of £50 per annum, with board, residence, and washing. Applications to the Secretary by December 2nd.

NOTTINGHAM GENERAL HOSPITAL.—House-Surgeon. Salary, £100 per annum, rising to £120, with board, lodgings, and washing. Applications to the Secretary by December 13th.

NOTTS COUNTY LUNATIC ASYLUM, Snainton.—Medical Superintendent, married, and over 31 years of age. Salary, £600 per annum, with unfurnished house, coal, light, washing, etc. Applications to the Clerk to the Committee of Visitors by December 18th.

PAISLEY: INFECTIOUS DISEASES HOSPITAL.—Resident Physician. Salary, £120 per annum, with board, washing, and attendance. Applications to the Town Clerk, Union Buildings, Paisley, by December 11th.

PEEDE DISTRICT ASYLUM, Murthly.—Assistant Physician, unmarried, and not over 30 years of age. Salary, £110 per annum with furnished apartments, board, attendance, etc. Applications to Dr. Bruce at the Asylum.

ST. MARY'S HOSPITAL MEDICAL SCHOOL, Paddington.—Obstetric Tutor. Applications to the Dean by December 11th.

ST. MARYLEBONE GENERAL DISPENSARY, 77, Welbeck Street, W.—Resident Medical Officer. Salary, 100 guineas per annum, increasing to 120 guineas, with furnished apartments, attendance, coal and light. Applications to the Secretary by December 9th.

ST. PANCRAS AND NORTHERN DISPENSARY, 126, Euston Road.—Honorary Physician. Applications to Mr. P. P. Bodkin, Honorary Secretary, 22, Gordon Street, W.C., by December 2nd.

ST. THOMAS'S HOSPITAL.—Assistant Obstetric Physician, must be M.R.C.P.Lond. Applications to Mr. E. M. Hardy, Treasurer's Clerk, by December 6th.

SCHOOL BOARD FOR LONDON.—Medical Officer, must give his whole time. Salary, £200 per annum, rising to £21,000. Applications, on forms provided, to be marked outside "Application for the Post of Medical Officer," to be sent to the Clerk of the Board by January 1st, 1902.

STAFFORD: STAFFORDSHIRE GENERAL INFIRMARY.—House-Surgeon. Salary, £120 per annum, with board, lodgings, and washing. Applications to the Secretary by December 11th.

THROAT HOSPITAL, Golden Square, W.—Three Honorary Anæsthetists. Applications to the Secretary by December 7th.

TENTERDEN HOSPITAL.—House-Surgeon. Salary, £50 per annum, with board, laundry, and washing. Applications to the Chairman of the Joint Committee by December 9th.

WEST HAM HOSPITAL, Stratford.—Jun'or House-Surgeon. Salary, £75 per annum, the board, residence, etc. Appointment for one year, but eligible for the post of Senior House-Surgeon. Salary, £100. Applications marked "Jun'or House-Surgeon" to be sent to the Secretary.

WEST LONDON HOSPITAL, Hammersmith Road, W.—(1) House-Physician: (2) House-Surgeon. Appointments for six months. Board and lodgings provided. Applications to the Secretary-Superintendent by December 25th.

WILTS COUNTY ASYLUM.—Assistant Medical Officer: unmarried. Salary, commencing at £150 and rising to £180 per annum, with board, residence, attendance, and washing. Applications to the Medical Superintendent by December 14th.

WINCHESTER: ROYAL HANTS COUNTY HOSPITAL.—House-Physician; unmarried. Salary, £65 per annum, rising to £75, with board, residence, etc. Applications to the Secretary by December 9th.

MEDICAL APPOINTMENTS.

AIRD, I., M.B., B.S. Edin., appointed Certifying Factory Surgeon for the Bangor District of County Down.

ARMSTRONG, A. J. M. L.R.C.P. Lond., M.R.O.S. Eng., appointed Medical Officer for the Southgate District of the Edmonton Union.

CANT, Arthur, M.B., B.Ch. (Birmingham University), M.R.C.S., L.R.C.P. Lond., appointed Medical Officer to the Marston Green Cottage Homes, Medical Officer for the Collihill and Marstoke Districts of the Morden Union, and Public Vaccinator for Collihill, Warwickshire.

CUTHBERT, W. H., L.R.C.P., L.R.C.S. Edin., appointed Medical Officer of Health to the Frinton-on-Sea Urban District Council.

EVANS, Thomas, M.B., appointed Medical Officer to the Holborn Union Workhouse, *vice* G. Cowie, M.B., C.M.A., *abrd*, resigned.
 GOOD, J. Percy, M.B., Ch.B.Vict., appointed District Medical Officer to the Pendleton Branch Dispensary of the Salford Hospital, *vice* Harold Bailey, M.B., Ch.B.Vict., *resigned*.
 HALLIDAY, F. W., M.R.C.S., L.R.C.P., *Lord*, appointed Surgeon for the D Division of the Leeds City Police.
 HEALEY, G. H., L.R.C.P., *Edin*, M.R.C.S., *Eng*, appointed Surgeon for the A Division of the Leeds City Police.
 HUTTON, J. W., M.R.C.S., L.R.C.P., *Lord*, appointed Surgeon for the C Division of the Leeds City Police.
 INGLE, C. D., M.R.C.S., L.R.C.P., *Lord*, appointed Certifying Factory Surgeon for the Sonoma District of the County of Somerset.
 JOHNSTONE, R. J., M.B., B.Ch., B.A., R.U.I., appointed Assistant to the Gynaecologist to the Royal Victoria Hospital, Belfast.
 KENNINGTON, E. M.C.O.S., L.R.C.P., *Lord*, appointed District Medical Officer of the Asylum Union.
 LONG, Sydney H., M.B., *Qaantab*, appointed Physician to the Jenny Lind Infirmary for Sick Children, Norwich.
 MONTPENY, H. J., M.B., B.Ch., B.A.O.B.E.U.I., appointed Honorary Anaesthetist to the Royal Victoria Hospital, Belfast.
 MUSCHAMP, R., L.R.C.P., L.R.C.S., *Edin*, appointed Medical Officer of Health for the Yeadon Urban District, *vice* C. J. H. McLean, M.D., *Edin*, *resigned*.
 PRESTON, L. L., M.B., B.S., Durh., appointed Medical Officer of Health to the St. Helens Urban District Council.
 REID, A., M.R.C.S., L.R.C.P., appointed House-Surgeon to the Paddington Green Children's Hospital.
 REID, R. Watson, M.B., Ch.B., appointed House Physician to the Paddington Green Children's Hospital.
 RICHMOND, J. D., M.B., B.S., *Glask*, appointed Assistant to the West Derby Union Infirmary, *vice* A. B. Hope-Simpson, M.R.C.S., L.R.C.P., *Lord*, *resigned*.
 SECCOMBE, J. W., M.B., M.R.C.S., L.R.C.P., appointed Junior House-Surgeon to the Radcliffe Infirmary, Oxford.
 SECCOMBE, P. J. A., M.B., B.C., *Qaamb*, appointed District Medical Officer of the Uxbridge Union, *vice* P. J. Slevin, L.R.C.P., L.R.C.S., *Irel*.
 SINCLAIR, Norman J., M.B., Ch.B., *abrd*, appointed Medical Officer of Health for the Burgh of Leith, and Police Surgeon, *vice* T. W. Parkinson, M.D., *Edin*, *resigned*.
 WOODCOCK, H. de Carle, L.R.C.P., L.R.C.S., *Edin*, appointed Surgeon for the B Division of the Leeds City Police.

DIARY FOR NEXT WEEK.

MONDAY.

Otological Society of the United Kingdom, 17, Chandos Street, Cavendish Square, W., 4.30 P.M.—Annual Meeting.—Cases and Specimens will be shown by Mr. Richard Lake, Dr. Cobbold, Mr. William Milligan, Dr. Dundas Grant, Mr. C. A. Ballance, Dr. Herbert Tilley, Mr. F. C. Abbott, Dr. Urban Pritchard, Mr. C. H. Fagge, Mr. L. A. Lawrence, Dr. G. Cathcart, and Mr. Arthur Cheatle.

WEDNESDAY.

Obstetrical Society of London, 20, Hanover Square, W., 8 P.M.—Specimens will be shown by the President (Dr. Horrocks), Mr. Maxwell, Dr. Wilson, Dr. Amund Dr. St. John (introduced by Dr. St. John), Dr. D. Lockyer, Dr. G. Smith, who will show a portion of an unoperated uterus, Dr. Robert Sanderson: A Case of Combined Vaginal and Abdominal Hysterectomy for a Pregnancy of four and a-half months Complicated by Cancer of the Cervix.

FRIDAY.

West London Medico-Chirurgical Society, West London Hospital, Hammersmith Road, W., 8.30 P.M.—Clinical Meeting.—Mr. Keetley, Dr. Seymour Taylor, Dr. Saunders, and others, will show cases.

West Kent Medico-Chirurgical Society, Royal Kent Dispensary, Greenwich Road, S.E., 8.45 P.M.—Dr. James F. Goodhart: The Purvis Oration on General Practice, an Original Research, to be followed by a Conversation.

POST-GRADUATE COURSES and LECTURES.

Charity Cross Hospital, Thursday, 4 P.M.—Demonstration of Surgical Cases. Hospital for Consumption and Diseases of the Chest, Brompton, Wednesday, 4 P.M.—Lecture on Bronchiectasis. Hospital for Sick Children, Great Ormond Street, W.C., Thursday, 4 P.M.—Lecture on Medical Consequences of Adenoid Vegetations. London Throat Hospital, 204 Great Portland Street, W., Wednesday, 5 P.M.—Practical Demonstrations. Medical Graduates' College and Polyclinic, 22, Chenies Street, W.C.—Demonstrations will be given at 4 P.M. as follows: Monday, skin; Tuesday, medical; Wednesday, surgical; Thursday, surgical; Friday, throat. National Hospital for the Paralysed and Epileptic, Queen Square, W.C.—Tuesday, 8.30 P.M.—Lecture: Surgery of Nervous System. West London Hospital, Hammersmith Road, W.—Lectures will be delivered at 5 P.M. as follows:—Monday: Anaesthesia in Rectal Operations. Tuesday: Medical Anatomy. Wednesday: Surgical Anatomy. Thursday: Uterine Haemorrhage. Friday: Skin Cases.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 8s. *ed.*, which sum should be forwarded in post-office orders or stamps with the notice not later than Wednesday morning, in order to ensure insertion in the current issue.

BIRTH.

POTTS.—On November 27th, at 160, Hagley Road, Edgbaston, Birmingham, the wife of W. A. Potts, M.D., of a son.

MARRIAGES.

DAWSON-ROBERTS.—On November 25th, at St. Saviour's, Oxton, Birkdale, by the Rev. E. D. Pollock, assisted by the Rev. C. O. Rippon and the Rev. W. E. Nixon, Harry G. Dawson, L.R.C.P., L.R.C.S., F.R.M., son of Major H. Dawson, late 14th Hussars, of Kildare and Lincolnshire, to Katie, eldest daughter of Edmund Roberts, Queen's Own, Oxton.

MOSLEY-DONSON.—On November 28th, at Burley Parish Church, Leeds, by the Rev. J. Cookhill, Vicar of Kettlewell, assisted by the Rev. J. Longbottom, Vicar of St. John's, Leeds, and the Rev. D. Walker, Vicar of the Parish Vicar, Ashtown, Ashtown, F.G.S., Threlkeld, second daughter of Joseph Donson, M.D., Thornville, Burley, Leeds. At home January 7th, 8th, and 9th, Larchmont, Clayton, near Bradford.

NAIRN-KING.—In St. Columba's U. P. Church, Helensburgh, on November 26th, by the Rev. A. C. Welch, B.D., Minister of the Church, assisted by the Rev. Robert Barclay, M.A., West Parish Church, Greenock, Cuthbert Nairn, M.B., O.M., Greenock, to Mairi Melville, youngest daughter of John King, Esq., Auchengower, Helensburgh, and Cove, Dumbartonshire.

DEATHS.

ASPINALL.—At 11, Evelyn Gardens, South Kensington, London, on the 18th inst., Dr. Thomas Aspinall (late of Darwen), after a short illness.

DOBIE.—On November 2nd, at Townfield House, Keighley, William Dobie, M.D., J.P., aged 67 years.

LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

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 weeks.

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 *Attitoy, London*. The telegraphic address of the MANAGER of the BRITISH MEDICAL JOURNAL is *Articulate, London*.

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

QUERIES.

T. E. S. asks: Is cornet playing likely to cause any ill-effects in a fairly strong youth aged 18?

X. Y. Z. asks for suggestions in the treatment of a case of intercostal neuralgia, following shingles, in a lady aged 63. He has tried the usual remedies, and has had the nerves excised in two intercostal spaces.

GUNSHOT HEADACHE.

SPORTSMAN will be thankful for any advice or hint as to the best treatment for "gunshot headache." A piece of indiarubber held between the teeth has been tried with some benefit. The pain comes on after the second or third shot.

TRAINING OF FEEBLEMINDED YOUTH.

B. H. (Yorkshire) desires to hear of any institution for the training and teaching a trade to a youth of somewhat deficient mental capacity.

* * * If the youth can be certified as "imbecile," the Royal Albert Asylum, Lancaster, would be a suitable institution. Particulars could be obtained from the Secretary, Mr. J. Duggins. If only slightly deficient, application might be made to Miss Dendy (Honorary Secretary Lancashire and Cheshire Association for Care of Feeble-minded), 13, Clarence Road, Withington, Manchester.

INCOME TAX.

C.P.C. writes: I lately informed the income tax assessor that I was going to appeal against my assessment, and sent up a list of deductions which I always understood were allowed. He wrote back: "Rent, taxes, etc., are not permissible deductions from a physician's income." I should be very glad of any information on this important matter. I believe medical men usually deduct one-third or one-half of their rent and taxes in cases where they practise their profession in their dwelling houses.

* * * We have referred the query to the Income Tax Repayment Agency 6, Chichester Road, W. They reply: "The surveyor of taxes is unquestionably wrong; the only tax not a permissible deduction is income tax. 'C.P.C.' should deduct two-thirds of rent, rates, and taxes. The Agency ask whether he will give them the name of the district in which the surveyor acts.

ANSWERS.

PUZZLED.—There is no known parasite of man which could produce such results.

VERITAS.—We could not publish the letter without the signature of the writer.

IGNORAMUS might consult *Diseases of the Thyroid Gland and their Surgical Treatment*, by J. Berry, B.S., F.R.C.S. London: J. and A. Churchill, 1901. 14s.

LETTERS, NOTES, Etc.

THE DUFFERIN HOSPITALS FOR INDIA.

We have received a letter from a lady who signs herself "M.D. late Dufferin Service," which we do not feel at liberty to publish, but the gist of her communication is that the reason for the non-success of the Dufferin hospitals among purdah women is largely to be found, not in the admission of women of lower class, but in the fact that the Indian-trained medical women, so largely employed by the Dufferin Association, are not capable of undertaking serious surgical work. It can hardly be expected, she adds, that a lay association should appreciate the fact that the mere passing of an examination does not make all those who pass equally capable of important surgical work. The admission of medical women to the Councils of the Dufferin Association is, she considers, urgently called for in the interests, not only or chiefly of these medical women, but of the patients of the Dufferin Association.