

Apomorphine is a powerful emetic, but has little effect on the intestine. Codeine (methyl morphine) produces purging in animals more readily than morphine, whilst apocodeine gives rise to purging without any vomiting; it is to this last substance that I wish to draw particular attention.

The Action of Apocodeine.—Little has been written concerning its mode of action. Guinard² showed that with it vomiting was not produced as in the case of apomorphine. Murrell³ experimented with the drug and considered it of value as an expectorant. Roviart⁴ used subcutaneous injections in the treatment of patients suffering from constipation, and reported favourably on its action. Subcutaneous injections of apocodeine into cats and dogs in doses of 0.03 gram produce purgation in every case, in a time generally varying between five minutes and half an hour after injection. Vomiting does not occur. In only one case has an injection been made in man, and in this case, in which there was no constipation 2 c.cm. of a 1 per cent. solution of apocodeine HCl. (about $\frac{3}{8}$ gr.) was injected under the skin of the left arm. There was some slight irritation at the seat of injection which quickly passed off, and within the hour two soft motions were passed. There was no feeling of nausea at any time.

The mode of action of this body is remarkable, and worthy of investigation. It cannot act centrally on the brain, as increased peristalsis can still be seen in animals when the vagi and cord are cut; nor can it act at the extreme periphery, because when applied directly to the living intestine all movements of that part cease. By the injections of moderate quantities of this body into anaesthetised cats, dogs, or rabbits, it is easy to show that certain ganglionic cells are paralysed. The superior cervical ganglia can be paralysed either by injecting the drug into the circulation, or by painting it directly with a dilute solution; in either case stimulation of the nerve in the neck produces no effect on the pupil, hairs, salivary glands, etc., whilst stimulation of the post-ganglionic fibres still gives the ordinary results.

The ganglionic cells on the chorda tympani are paralysed because after injection of apocodeine stimulation of the chorda gives no increased submaxillary secretion, although the secretory neurons are active, because the exhibition of pilocarpin still gives rise to a greatly augmented secretion.

The vagus nerve is paralysed, but the inhibitory neuron is intact because stimulation of the vagal endings by muscarine still inhibits. The most important evidence, however, is derived from the use of nicotine, the stimulating action of which is entirely cut out by apocodeine. When nicotine is injected into the circulation of normal animals it produces (1) vaso-constriction; (2) rise of blood pressure; (3) inhibition of peristaltic movements. These effects are very readily seen both in cats and dogs, and we now know—mainly owing to the work of Langley—that they are due to stimulation of the ganglionic nerve cells. All these nicotine effects are absent if the animal has previously had a dose of apocodeine, and hence apocodeine must act either on the same ganglionic cells as nicotine (paralysis) or it must act on some part of the nervous mechanism more peripherally. But it cannot act on the peripheral nerve endings, because suprarenal which acts here still produces its normal effects, and for the further reason that apocodeine applied directly to gut paralyses it; hence one is forced to the probability that it paralyses the inhibitory ganglionic cells. If this is so, apocodeine should act in a manner diametrically opposite to that of nicotine, which is the case; that is, it causes (1) vaso-dilatation; (2) fall of blood pressure; (3) increased peristaltic movements. The absence of effect on the stomach by apocodeine may be explained on the probability that the sympathetic gives few, if any, fibres to the stomach. Fig. 4 shows the typical effect of a small injection of apocodeine.

In conclusion, I wish to draw attention to the following facts with regard to apocodeine. It lowers blood pressure, produces vaso-dilatation, and increases peristaltic movements—all probably as a result of its sedative action on sympathetic inhibitory ganglia. It does not produce vomiting or give rise to other ill-effects, and I therefore hope that it will receive an extensive trial as a hypodermic purgative. Finally, I would suggest that a 1 or 2 per cent. solution of the

hydrochloride be used which should be neutral, and filtered before use. Two or three c.cm. may be injected for a dose.

REFERENCES.

- ¹ Mackenzie and Dixon, *Edinburgh Med. Journal*, November, 1898.
² *Thèse de Lyon*, 1893 (May, June, July). ³ *BRITISH MEDICAL JOURNAL*, 1891, vol. 1. ⁴ *Semaine Médicale*, 1900, No. 50, p. 422.

MEMORANDA:

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

NOCTIPHOBIA.

IN regard to the subjective symptoms of neurasthenia, in addition to those of claustrophobia and agoraphobia, I should like to draw attention to a third—"noctiphobia," or the fear of night and its darkness and silence. I have had two patients, neurasthenics, in whom this symptom was well developed; and as the disorder started with frights at night, the patients having been awakened from their sleep, one by the presence of a burglar in the room, and another by sounds mysterious and unearthly which, by a strange coincidence, seemed to be the continuation of those heard in the interrupted dream, it might be classed under the heading of traumatic neurasthenia, as shock was definite and severe in both cases. Briefly, the symptom I wish to draw attention to is as follows:

During the day time the patient is as normal as a neurasthenic can expect to be, but towards nightfall uneasiness comes on, with a sense of oppression and impending ill of a vague and shapeless kind. As darkness deepens the patient's distress increases—windows are fastened, doors bolted, and all preparations are made for security and defence. When bedtime arrives the patient goes to bed but not to sleep, tossing from side to side and panic-stricken if by chance a window should rattle or the door creak. In vain the patient tries to reason himself out of what he knows to be groundless fears. The obsession persists, and night after night the same sufferings are gone through with. Besides broken nights, the patient all day long looks forward with uneasiness and dread to the oncoming night, and thus neither night nor day brings refreshment or complete relaxation. Companionship in no wise mitigates his condition. At night he is, as it were, cut off and isolated from all help and solace, alone with his great fear. In both these patients ordinary neurasthenia antedated the symptoms which I have attempted to describe, which was, as it were, engrafted on the main ill.

St. Louis, U.S.A.

J. R. CLEMENS, M.D.

FOREIGN BODIES IN THE CORNEA.

THE extraction of small particles of iron or stone from the surface of the cornea is generally such an easy matter and, provided due precautions are taken, is attended with so little reaction, that it might well appear presumptuous to relate a method which I have found on occasions to be serviceable.

When the little brown or black speck is situated, as is generally the case, towards the middle of the outer aspect, the enlarged pupil which follows the instillation of cocaine makes it very difficult and often impossible to see the offending particle. To obviate this and to secure a clear view of the object to be removed, I find it useful to instil a drop of eserine sulphate (1 per cent. solution), or, preferably, 1 or 2 per cent. solution of pilocarpin hydrochloride, so as to neutralize the mydriatic effect of the cocaine. In this way one has the anaesthetic effect of cocaine without its drawbacks, for the eserine spreading the iris as a curtain behind the dark speck renders it visible and its removal comparatively easy, and that irrespective of the direction in which the patient is looking.

There are doubtless many in active practice who may have found some such method as I mention of service, but its usefulness has so often forced itself on my attention, especially when scraping the so-called iron scale (the ferrous-ferrie oxide), which follows the deposition of iron in the corneal substance, that I thought a word about it might prove acceptable.

Portmadoc.

WALTER WILLIAMS, M.B.

The concessions recently granted to the Junior Officers of the Royal Army Medical Corps are now to be extended to the officers of the Indian Medical Service.

Captain H. P. MEAKIN, I.M.S., officiating Second Surgeon, Presidency General Hospital, Calcutta, has been appointed First Surgeon, and Captain J. C. H. LEICESTER, I.M.S., to act as Second Surgeon during the absence on deputation of Captain B. C. Oldham and Captain L. Rogers respectively.

FREE PASSAGES FOR OFFICERS' FAMILIES.

ATTENTION was drawn by a correspondent in a recent issue to the last paragraph of the Army Veterinary Royal Warrant of March 26th, 1902, wherein passages are granted for the families of officers of that Department on change of stations, under the conditions laid down in the Allowance regulations. Our correspondent suggested that a similar boon is much needed for officers of the Army Medical Service, owing to the constant moves they have to make and the heavy drain on their resources entailed in providing passages for wives and families. Such a concession, moreover, would be likely to diminish the number of such moves. The veterinary service, in which the movements of officers are comparatively few, is much smaller than the medical, and this may have weighed with those who control the purse. The true remedy for the constant change of station in the medical service is an adequate establishment, which we trust will before long be made up.

IMPERIAL YEOMANRY.

TEMPORARY-CAPTAIN E. F. N. CURREY, Medical Officer, 21st Battalion, resigns his commission, and is granted the honorary rank of Captain in the Army, retaining his uniform, July 23rd.

Temporary-Captain H. W. WHYTE, Medical Officer 25th Battalion, is granted the honorary rank of Captain in the army, and allowed to retain his uniform, October 9th.

Temporary Major W. J. NAISMITH, M.D., D.S.O., Medical Officer (unattached), relinquished his commission, is granted the honorary rank of Major in the army, and retains his uniform, October 7th.

ROYAL ARMY MEDICAL CORPS (VOLUNTEERS).

Mr. GEORGE ASHTON, M.B., is appointed Surgeon-Lieutenant in the Manchester Companies, October 11th.

VOLUNTEER INFANTRY BRIGADE BEARER COMPANY.

SURGEON-CAPTAIN J. A. BOYD, M.B., from the 1st Dumbarton Volunteer Rifle Corps, is appointed Surgeon-Captain Argyll and Sutherland Highlanders, and to command under Par. 55A Volunteer Regulations, August 1st.

Surgeon-Captain D. CHRISTIE, M.B., from the 1st Dumbarton Volunteer Rifle Corps, is appointed Surgeon-Captain Argyll and Sutherland Highlanders, August 1st.

VOLUNTEER RIFLES.

SURGEON-MAJOR R. A. PRICHARD, 3rd Volunteer Battalion Royal Welsh Fusiliers, is promoted to be Surgeon-Lieutenant-Colonel, October 11th.

Surgeon-Lieutenant W. R. SMITH, M.D., 1st Nottingham (Robin Hood) Rifles, resigns his commission, October 11th. Mr. GEORGE G. T. ELDER is appointed Surgeon-Lieutenant in the same Corps, October 11th.

Surgeon-Captains D. McMILLAN, M.B., and J. RITCHIE, M.B., 5th Volunteer Battalion Argyll and Sutherland Highlanders, are promoted to be Surgeon-Majors, October 11th.

MEDICO-LEGAL AND MEDICO-ETHICAL.

THE CHARGE OF PERJURY: FURTHER CHARGE OF MANSLAUGHTER.

IN the case of Henry John Herring, alias Enrita William Hoffmeister, whose committal for perjury in connexion with evidence given at an inquest has already been reported, a further charge of manslaughter was preferred by the Public Prosecutor on October 11th at Willesden. The prisoner was defended by Mr. Freke Palmer. After evidence had been given by several witnesses, the Bench made an order for committal, fixing bail in £1,000—£500 as prisoner's own surety and two others in £250 each, twenty-four hours' notice being given to the police. The two charges of manslaughter and perjury will be preferred at the Central Criminal Court next week.

FEE TO MEDICAL WITNESSES.

G. E. is not obliged to give evidence until his proper fee, one guinea, has been paid, but he must raise the objection before he has been sworn, else it will be too late. Perhaps as both the parties are very poor, he might accept half a guinea if paid beforehand.

LEX—(a) Ought certainly to answer the question proposed, which is merely designed to enable the authorities to judge whether the case against the prisoner is a strong one or not. (b) Unfortunately he is not entitled to a fee for doing so.

PURCHASE VALUE OF PRACTICE.

PARTNER asks: (1) What is the usual selling price of an extra share to a partner in a good class practice? (2) Should the price be based on the gross or the net receipts?

**. (1) From one and a-half to two years' purchase. It is usually stated in the partnership deed under what conditions a junior partner may obtain an increased share. (2) The price is based on the gross receipts.

MEDICAL ADVERTISING.

A CORRESPONDENT sends us an advertisement which he says appeared for several days in the *Western Morning News*, announcing that "Dr. ——— has resumed his practice at" an address which is set out in full. We agree with our correspondent that such advertisements are objectionable. Unfortunately fashionable physicians and surgeons in London and Dublin, particularly in the latter city, announce in the columns of daily newspapers their return to town, and so long as this continues it will be quoted as a precedent and justification for such advertisements as these.

VISITS ON NEWCOMERS.

ENQUIRER.—Any kind of canvassing for patients is undignified and should be avoided. With regard to calling upon newcomers, if a medical man in doubtful cases would ask himself the question, "Would I call if I were not a doctor but were living here as a country gentleman," he would seldom have much difficulty in coming to a decision as to whether the proposed visit should be made.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF CAMBRIDGE.

Degrees.—At a congregation on October 9th the following medical degrees were conferred: M.D.: C. H. Reissmann, St. John's, M.B. and B.C.: G. D. Franklin, King's; J. M. Bennion, St. John's; E. H. Kitchen, Downing.

Appointments.—Dr. D. Macalister has been appointed Assessor to the Regius Professor of Physic: Mr. R. C. Punnett, Caius, Demonstrator of Comparative Anatomy; and Mr. R. S. Gregory, St. John's, Demonstrator of Botany.

Examinations.—The First, Second, and Third M.B. Part I, will begin on December 8th; the Third M.B. Part II, and the M.C. Examinations on December 9th. The names of candidates are to be sent in by November 24th.

UNIVERSITY OF LONDON.

CONVOCAION.

A GENERAL meeting of Convocation was summoned to be held at the University on Tuesday last, October 14th. Sir E. H. Busk, the chairman, was ready to take the chair at 5 o'clock, but as a quorum (50) of members was not present, he, at 5.30, adjourned the meeting until January, 1903.

UNIVERSITY OF GLASGOW.

THE following have passed the First Professional Examination for the degrees of Bachelor of Medicine (M.B.) and Bachelor of Surgery (Ch.B.) in the subjects indicated (B., Botany; Z., Zoology; P., Physics; C., Chemistry):—

W. W. Adamson (B. P.), A. Aitchison (B. P.), W. Allan (B. Z.), T. M'C. Anderson (B. P.), J. Atkinson (B. P.), H. Bertram (B. P.), D. P. Bremner (B. C.), J. N. Brown, M.A. (B. P.), J. Cameron (B. P.), W. R. Cammock (Z. C.), G. Campbell (B. Z. P. C.), W. A. Campbell (B. P.), J. P. Carmichael (P.), M. I. T. Cassidy (B. P.), H. H. Christie (B. P.), A. B. Cluckie (B.), J. Coutts (B. Z. P. C.), T. L. Craig (B. P.), N. Davie (B. P.), A. Dick (Z. P.), J. C. Dick (Z. P.), J. A. Doctor (B.), R. Donald (P. C.), J. R. Drever, M.A. (B. C.), R. J. Driscoll (P.), J. Dunbar (Z.), A. W. Eadie (B. P.), E. M. Eaton (B. P.), W. M. Fairlie (B. P.), T. L. Fleming (P. C.), G. Fletcher (B. P.), G. M. Fraser (B. P.), J. W. Georgeson (C.), W. Gilfillan (B. Z. P.), R. Govan (B. P.), J. V. Grant (P.), T. P. Grant (B. P.), A. H. Gray (C.), J. D. Gray (B. P.), D. Hamilton (B. P.), W. T. Hardie (B. C.), J. D. Mart (B. P.), J. D. Kidd (C.), J. T. Kirkland (C.), G. Ligertwood (P. C.), A. Macaulay (P.), J. McCartney (C.), J. M. McDonald (B.), J. M'Farlane (B. P.), R. M'Inroy (Z. P. C.), J. H. M'Kay (B. P.), W. A. M'Kellar (B. P.), M. D. Mackenzie (B. Z. P. C.), T. C. Mackenzie (B. P.), A. A. C. McNeill (B. P.), C. J. G. Macquarie (B. P.), I. C. Marshall (B. P.), W. Matheson (B. Z. P. C.), R. May (B.), J. C. Middleton (B. P.), A. F. Miller (B. Z. P.), J. W. Miller (B.), W. Miller (C.), P. Mitchell, M.A. (C.); R. W. Mitchell (C.), H. W. Moir (Z.), H. Morton (B.), P. O'Brien (B. P.), P. J. O'Hare (C.), J. Oswald (B.), J. H. Paul (B. P.), F. G. Robertson (B. P.), J. H. A. Robertson (C.), M. M. Rodger (Z. P.), W. J. Rutherford (B.), W. W. Scott (B. Z.), J. Sharp (B.), R. W. Simpson (C.), A. H. Sinclair (B. C.), W. Smellie (B. Z. P. C.), J. A. Smith (B.), J. Steedman (B. P.), J. Stevenson (B. P.), W. Stevenson (Z.), J. Stewart (B. P.), J. T. W. Stewart (P.), M. J. Stewart (B. P.), J. A. Struthers (B. P.), D. L. A. Tate (P. C.), R. S. Taylor (B. P.), K. Todd (Z.), M. Turnbull (Z. C.), J. M. Walker (B. P.), H. Watson (B. Z.), J. Weir (B. P.), J. K. Welsh (B. P.), D. J. Williams (P. C.), G. H. Wilson (B. P.), S. Wilson, M.A. (B. P.); W. M. T. Wilson (Z.), M. Youdelevitz (B. Z. P. C.).

Women: J. M. Andrew (B. Z.), M. M. Buchan (B. Z.), A. Picken (B. Z.), J. H. Stewart (B. Z.).

THE following have passed the Second Professional Examination for the degrees of Bachelor of Medicine (M.B.) and Bachelor of Surgery (Ch.B.) in the subjects indicated (A., Anatomy; P., Physiology; M., Materia Medica and Therapeutics):—

A. A. Aitken (A. P., M.), W. S. Allan (P.), A. W. Anderson (P., M.), H. G. Anderson (M.), J. Bain (P., M.), A. R. Barrowman (M.), R. D. Bell, M.A. (M.), G. T. Bogle (P.), T. Brodie (A.), C. Brown (A.), T. M. Campbell, M.A. (P., M.), R. B. Carslaw, M.A. (M.), T. G. Copestake (M.), C. M. Drew, M.A. (P.), H. H. Fulton (M.), W. H. Gillatt (M.), W. M. Gilmour (A.), D. L. Graham (M.), J. Graham (M.), G. M. Gray (M.), L. L. Greig (M.), S. H. Harris (P.), A. R. F. Hay (M.), J. W. Hay (P.), J. C. Henderson (M.), R. V. Howell (P.), A. Hunter (P., M.), A. Y. Hutchison (A. P., M.), J. R. Kerr (A. P.), J. Kerr (A.), W. J. Logie (M.), P. Lowe, M.A., B.Sc. (P., M.), T. S. Macaulay (M.), J. D. M'Callum, M.A. (A. P., M.), D. C. M'Cormick (M.), N. M'Dougall (A. P., M.), J. B. M'Ewan (M.), T. D. M'Ewan (M.), D. Macfadyen (M.), J. M'Farlane (M.), R. Macfarlane (M.), J. D. Macfie (P., M.), A. S. M.

Macgregor (A., P., M.), J. M'Houl (M.), C. G. Mackay (A., P., M.), D. J. McLeish, M.A. (M.), M. T. D. M'Murich (P., M.), A. B. M'Pherson (A.), R. C. Macpherson (P., M.), J. Marshall (P., M.), W. B. M. Martin (A., P.), J. Moffatt (P., M.), J. Muir (M.), M. Munro (M.), J. Murdoch (A., P., M.), F. A. Murray (A., P.), G. C. Nielson (M.), T. Orr (A.), H. H. Patrick (M.), J. Pearson (A., P., M.), J. C. Pickup (M.), A. M. Pollock (M.), J. Porter (M.), W. M. Rae (P.), J. W. Richmond (P., M.), B. H. Robertson, M.A. (M.), R. T. C. Robertson (A.), J. M. Ross (A., P.), W. H. Sieger (P., M.), R. A. Slater (P., M.), G. G. Smith, B.Sc. (M.), M. W. Smith (P., M.), W. R. Taylor (P.), W. Templeton (M.), J. W. Thomson (M.), W. Y. Turner, M.A. (A., P., M.), T. M. Watt (M.), D. W. Wilson (A., P., M.), G. Wilson (A.).

Women: B. S. Alexander (P., M.), A. A. Baird, M.A. (P.), M. T. Gallagher (M.), J. H. M'Ilroy, M.A., B.Sc. (M.), F. Mann (M.), M. W. Millar (P.), H. R. L. Reid (P.), J. E. Shaw (M.), L. Smellie (M.), A. M. Yates (M.).

The following have passed the Third Professional Examination for the degrees of Bachelor of Medicine (M.B.) and Bachelor of Surgery (Ch.B.) in the subjects indicated (P., Pathology; M., Medical Jurisprudence and Public Health):

J. W. Arthur (P.), T. Ballantyne (P.), A. F. Bell (P.), T. Bennett, M.A. (P.), W. T. Bolton (P., M.), R. G. Bradford (P., M.), J. Brown (P., M.), C. H. Browning (P., M.), R. Bruce (P.), D. L. Carmichael (P.), A. E. Clark (P.), J. Cross (P., M.), J. Forsyth (P., M.), J. Glover (P., M.), W. Harvey (M.), J. M. Huey (P., M.), A. Jamieson (M.), A. D. Kennedy (P.), T. Lovett (P., M.), D. Macaulay (M.), J. F. Macdonald (P., M.), A. S. M'Millan (P., M.), A. M'Whan (P., M.), J. B. Morton (P., M.), A. H. Napier (P., M.), J. C. Fairman, M.A. (P., M.), D. Penman (P.), G. Richmond (P., M.), P. H. Robertson (M.), L. D. Shaw (P., M.), J. B. Stevenson (M.), W. D. H. Stevenson, M.A. (M.), J. A. Thom (P., M.), J. Turnbull (M.), J. Walker, M.A. (M.), R. Wallace (P., M.), R. Watson (M.), K. T. Wells, M.A. (M.), G. H. Wildish (P., M.), H. Young (P., M.), J. Young (Glasgow) (P., M.), W. Young (M.).

Women: J. Auld (P., M.), A. W. Cameron (P., M.), J. G. Duncan (P.), J. E. F. Gilmour (P., M.), M. Hardy (P., M.), A. W. Maclean (P., M.), M. H. Scott (P., M.), J. G. Waddell (P., M.).

UNIVERSITY COLLEGE, LIVERPOOL.

MEETING OF GOVERNORS.

A MEETING of the Governors was held on October 13th, under the presidency of Sir Edward Lawrence, who, in moving the adoption of the report, said that Manchester and Liverpool were in accord as to the steps to be taken before the formation of a new university. The grounds for the opposition of Yorkshire College, Leeds, would be heard before the Privy Council, but he trusted that it would shortly be known that the efforts to lay the foundation of a Liverpool university had been successful.

Mr. E. K. Muspratt said that the donations to the fund for an independent university amounted to about £170,000, which was not half the amount required. The Chancellor of the Exchequer had given only £3,000, and had hinted to the deputation which waited on him that it might be well satisfied that the amount was not smaller. But when the university was actually founded the Exchequer would, he hoped, be more liberal. An endowment fund was wanted for professorships, lectureships, and for an increase in the library.

The Treasurer (Mr. Robert Gladstone) observed that the local rates last year amounted to £1,200, and expressed the wish that the City Council could see its way to free the institution from this annual drain.

UNIVERSITY OF DURHAM.

At the Convocation holden on Saturday, September 27th, the following degrees and diplomas were conferred, namely:

Doctor in Medicine.—C. O. Bodman, M.B., B.S., Durham; P. Boobyer, M.B., M.S., Durham; S. H. Hawley, M.B., Durham; H. Smurthwaite, M.B., B.S., Durham; H. R. D. Spitta, M.B., B.S., Durham; J. B. Stephenson, M.B., B.S., Durham; S. D. Turner, M.B., B.S., Durham; J. C. Velenski, M.B., B.S., Durham.

Doctor in Medicine for Practitioners of Fifteen Years' Standing.—G. A. Edsall, M.R.C.S., L.R.C.P., L.S.A.; E. H. Ellison, M.A., M.R.C.S., L.R.C.P., L.S.A.; G. W. H. French, F.R.C.S.; J. H. Gough, M.R.C.S., L.R.C.P., F.R.C.S.E.; G. F. A. Harris, M.R.C.S., M.R.C.P.; H. W. Haydon, M.R.C.S., L.R.C.P., L.S.A.; J. A. Jones, M.R.C.S., L.R.C.P., L.S.A.; J. E. London, M.R.C.S., L.R.C.P., L.S.A.; A. E. W. Ramsbottom, L.R.C.S.I., L.M.; W. L. Symes, L.R.C.S., F.R.C.P.I., L.M.; O. A. Wickham, M.R.C.S., L.R.C.P., L.S.A.; L. H. Williams, M.R.C.S., L.S.A.

Bachelor in Medicine (M.B.).—R. Bigg, M.R.C.S., L.R.C.P., St. Bartholomew's Hospital; A. B. Bradford, St. Thomas's Hospital; Annie Tomblason Brunyate, London School of Medicine for Women; J. Cooper, B.Sc., College of Medicine, Newcastle-upon-Tyne; Ida Emilie Fox, London School of Medicine for Women; J. W. Gibson, College of Medicine, Newcastle-upon-Tyne; G. Mack, College of Medicine, Newcastle-upon-Tyne; L. C. Newton, College of Medicine, Newcastle-upon-Tyne; Monica Lucien Mary Robertson, London School of Medicine for Women; T. C. Ruthenford, M.R.C.S., L.R.C.P., St. Thomas's Hospital; G. W. Smith, M.R.C.S., L.R.C.P., Guy's Hospital; B. E. Spurgin, College of Medicine, Newcastle-upon-Tyne; C. R. Stewart, St. George's Hospital; J. B. Waters, College of Medicine, Newcastle-upon-Tyne; F. G. Wilson, College of Medicine, Newcastle-upon-Tyne; R. Younger, College of Medicine, Newcastle-upon-Tyne.

Bachelor in Surgery (B.S.).—R. Bigg, M.R.C.S., L.R.C.P., St. Bartholomew's Hospital; A. B. Bradford, St. Thomas's Hospital; Annie Tomblason Brunyate, London School of Medicine for Women; J. Cooper, B.Sc., College of Medicine, Newcastle-upon-Tyne; Ida Emilie Fox, London School of Medicine for Women; J. W. Gibson, College of Medicine, Newcastle-upon-Tyne; G. Mack, College of Medicine, Newcastle-upon-Tyne; L. C. Newton, College of Medicine, Newcastle-upon-Tyne; Monica Lucien Mary Robertson, London School of Medicine for Women; T. C. Ruthenford, M.R.C.S., L.R.C.P., St. Thomas's Hospital; G. W. Smith, M.R.C.S., L.R.C.P., Guy's Hos-

pital; B. E. Spurgin, College of Medicine, Newcastle-upon-Tyne; C. R. Stewart, St. George's Hospital; J. B. Waters, College of Medicine, Newcastle-upon-Tyne; F. G. Wilson, College of Medicine, Newcastle-upon-Tyne; R. Younger, College of Medicine, Newcastle-upon-Tyne.

Bachelor in Hygiene (B.Hy.).—Emmeline Da Cunha, L.M. & S. Degrees, Bombay University; Esther Molyneux Stuart, M.B., C.M., Edinburgh.

Diploma in Public Health (D.P.H.).—Esther Molyneux Stuart, M.B., C.M., Edinburgh.

PUBLIC HEALTH AND POOR-LAW MEDICAL SERVICES.

ENGLISH URBAN MORTALITY IN THE THIRD QUARTER OF 1902.

[SPECIALLY REPORTED FOR THE BRITISH MEDICAL JOURNAL.]

THE vital statistics of the seventy-six large towns dealt with in the Registrar-General's weekly returns are summarized in the accompanying table. During the three months ending September last, 112,972 births were registered in these towns, equal to an annual rate of 30.5 per 1,000 of their aggregate population, estimated at 14,862,900 persons in the middle of the year. In London the birth-rate last quarter was 28.9 per 1,000, while it averaged 31.2 per 1,000 in the seventy-five large provincial towns, among which the rates ranged from 18.5 in Bournemouth, 19.7 in Hastings, 21.4 in Halifax, 21.9 in Bury, 22.5 in Hornsey, 22.8 in Huddersfield, and 23.3 in Brighton and in Bradford, to 36.6 in East Ham, 36.7 in Warrington, 37.7 in South Shields, 37.4 in St. Helens, 37.5 in Gateshead, 37.7 in Wigan, 39.9 in Merthyr Tydfil, and 42.8 in Rhondda.

During the quarter under notice 56,603 deaths were registered in these seventy-six towns, corresponding to an annual rate of 15.3 per 1,000 persons living. The rates in the several towns ranged from 6.6 in Hornsey, 8.3 in Handsworth, 9.2 in King's Norton, 9.3 in Bournemouth, 9.6 in Walthamstow, 9.9 in Willesden, and 10.6 in Smethwick, to 18.0 in Salford, 18.1 in Manchester and in Newcastle, 18.2 in Hanley, 18.6 in Bootle, 19.3 in Wigan, 19.6 in Middlesbrough, and 21.2 in Liverpool. In London the rate of mortality was 15.3 per 1,000, being equal to the mean rate in the seventy-five other large towns.

The 56,603 deaths from all causes in these seventy-six towns last quarter included 9,505 which were referred to the principal epidemic diseases: of these, 119 resulted from small-pox, 1,370 from measles, 711 from scarlet fever, 769 from diphtheria, 1,332 from whooping-cough, 662 from "fever" (principally enteric), and 4,542 from diarrhoea. The death-rate from these diseases averaged 2.56 per 1,000 in the seventy-six large towns; in London this death-rate was equal to 2.71 per 1,000, while it averaged 2.50 per 1,000 in the seventy-five other large towns, among which the death-rates from these epidemic diseases ranged from 0.64 in Handsworth, 0.74 in Hornsey, 0.79 in Bournemouth, 0.88 in Newport (Mon.), 0.90 in Halifax, 0.91 in Hastings and in York, and 1.00 in King's Norton, to 3.98 in West Ham, 4.12 in Rhondda, 4.20 in Liverpool, 4.24 in Hanley, 4.70 in Wigan, 4.76 in Bristol, 4.84 in Bootle, and 5.17 in Portsmouth. The 119 fatal cases of small-pox registered during last quarter included 73 which belonged to London, 15 to Swansea, 7 to Liverpool, 4 to Tottenham, 4 to Walthamstow, 3 to West Ham, and 3 to Gateshead. The 1,370 deaths from measles were equal to an annual rate of 0.37 per 1,000; in London the death-rate from this disease was 0.30 per 1,000, while it averaged 0.40 per 1,000 in the seventy-five large provincial towns, among which measles showed the highest proportional fatality in Bristol, Hanley, Rochdale, Stockton-on-Tees, Gateshead, Newcastle, Cardiff, and Rhondda. The 711 fatal cases of scarlet fever corresponded to an annual rate of 0.19 per 1,000; in London the scarlet fever death-rate was only 0.12 per 1,000, while it averaged 0.22 in the seventy-five other large towns, and was highest in West Bromwich, Birmingham, Liverpool, St. Helens, Wigan, Bolton, Burnley, and Middlesbrough. The 769 deaths from diphtheria were equal to an annual rate of 0.21 per 1,000, which was also the rate of mortality in London from this disease; among the large provincial towns diphtheria was proportionately most fatal in Bristol, Hanley, Wigan, Bury, Burnley, Middlesbrough, Rhondda, and Merthyr Tydfil. The 1,332 fatal cases of whooping-cough registered in the seventy-six towns last quarter corresponded to an annual rate of 0.36 per 1,000; in London whooping-cough caused a death-rate of 0.41 per 1,000, while the mean rate in the seventy-five other large towns was 0.34 per 1,000, the highest rates being recorded in Leyton, Portsmouth, Norwich, Hanley, Wigan, Barrow-in-Furness, South Shields, and Tynemouth. The 662 deaths referred to different forms of "fever" were equal to an annual rate of 0.18 per 1,000, which was slightly in excess of the "fever" death-rate in London; among the seventy-five large provincial towns the greatest proportional mortality from "fever" occurred in West Ham, Portsmouth, Ipswich, Grimsby, Birkenhead, Liverpool, Wigan, and Merthyr Tydfil. The 4,542 fatal cases of diarrhoea corresponded to an annual rate of 1.22 per 1,000; in London the death-rate from this disease was 1.44 per 1,000, while it averaged 1.13 per 1,000 in the seventy-five other large towns, and was highest in Portsmouth, Plymouth, Liverpool, Bootle, Wigan, and Preston.

Infant mortality, measured by the proportion of deaths under 1 year of age, was equal to 1.46 per 1,000; in London the proportion was 1.51 per 1,000, while it averaged 1.44 per 1,000 in the seventy-five other large towns, and ranged from 56 in Handsworth, 66 in Hornsey, 70 in Bournemouth and in King's Norton, 91 in Bury, 95 in Smethwick, and 97 in West Hartlepool, to 184 in Norwich, 186 in Liverpool, 193 in Middlesbrough, 194 in Plymouth, 200 in Preston, 216 in Portsmouth, and 225 in Bootle.

The causes of 652, or 1.2 per cent., of the deaths registered in the seventy-six large towns last quarter were not certified, either by a registered medical practitioner or by a coroner. The causes of all the deaths were duly certified in Croydon, Hornsey, Tottenham, East Ham, Brighton, Bournemouth, Southampton, Great Yarmouth, Burton-on-Trent, King's Norton, Derby, Newport (Mon.), and Cardiff; while the highest

MEDICAL NEWS.

THE extensions at the Dover Hospital erected as a memorial of the late Queen Victoria have been completed, and the institution has been reopened for the reception of patients.

PRESENTATION.—Dr. J. Owen James, who is leaving Aber-tillery, has been presented with a gold watch by the workmen of the Tillery Collieries and friends in the district as a mark of their esteem.

FUND FOR CANCER RESEARCH AT THE MIDDLESEX HOSPI-TAL.—Mr. Charles David has sent to the Treasurer of the Middlesex Hospital the sum of £125, being five years' dona-tions in advance to the fund for developing cancer research.

DR. W. COLLINGRIDGE, Medical Officer of Health City of London, will preside at the tenth annual meeting of the Church Sanitary Association, which will be held at the Church House, Westminster, S.W., on Wednesday next at 3.45 p.m.

THE first clinical lecture of the winter session in connexion with the North East London Post-Graduate College will be delivered at 4 p.m. on Thursday, October 23rd, in the Totten-ham Hospital, N. The subject is Heart Affections in Child-hood. To this and to the succeeding lectures all medical practitioners desirous of attending are invited.

THE Odontological Society of Great Britain gives notice that it is now prepared to receive applications for grants in aid of the furtherance of scientific work in connection with dentistry. Further particulars can be obtained on application to the Hon. Secretary, Scientific Research Committee, Odontological Society, 20, Hanover Square, London, W.

THE third annual dinner for medical men residing in West Somerset will be held at the London Hotel, Taunton, on Friday, October 31st, at 6.30 p.m., after the annual meeting of the West Somerset Branch of the British Medical Association, which will take place on that afternoon at the Taunton and Somerset Hospital. The price of the dinner tickets is 7s. 6d. each, for guests 5s. Further particulars can be obtained from Dr. W. B. Winckworth, 3, Carlton Terrace, Taunton.

THE ASSOCIATION OF PUBLIC VACCINATORS.—The annual meeting of the Association of Public Vaccinators of England and Wales will be held at the Trocadéro Restaurant, Picca-dilly Circus, London, W., on Saturday, October 25th, at noon. It will be followed by a conference, at which Dr. Francis Bond, of the Jenner Society, will read a paper, en-titled The Need for an Enquiry into the General Sub-ject of Vaccination Administration; Dr. E. J. Edwardes, Secretary of the Imperial Vaccination League will read a paper on Public Vaccination in Germany; Dr. A. Maude a paper on Some Clinical Aspects of Revaccination; and Dr. A. E. Cope will discuss some points in the law and practice of vaccination. The annual dinner will be held at 7 p.m., and among those who have expressed their intention to be present is the Right Hon. Henry Chaplin, M.P. In the course of the evening Dr. Copeman will give a lantern demon-stration on small-pox and vaccination.

THE MEDICAL SICKNESS AND ACCIDENT SOCIETY.—The usual monthly meeting of the Committee of the Medical Sickness, Annuity and Life Assurance Society was held on September 26th at 429, Strand, W.C., Dr. de Havilland Hall in the chair. The accounts presented show that during the summer months the sickness experience of the Society has been higher than is usual at this period of the year. The claims had arisen from a great variety of causes. In no previous year have the members of the Society met with so many acci-dents, and not a few serious. Many had arisen from injuries to which medical men are especially exposed, such as septic wounds on the fingers or hand caused by operations, but, in addition, a large number of riding and driving mishaps have helped to swell the claim list. Of these more than half are attributed to "falls from bicycles," and the most serious acci-dent during this year was due to a fall from a tricycle. The reserves now amount to over £160,000, an increase partly due to the influx of new members and partly to the fact that a large number of those who joined the Society when the limit of sick pay was £4 4s. a week have availed themselves of the alteration of rule allowing them to secure £6 6s. a week.

Prospectuses and all information on application to Mr. F. Addiscott, Secretary, Medical Sickness and Accident Society, 33, Chancery Lane, London, W.C.

MEDICAL VACANCIES.

The following vacancies are announced:

- ABERGAVENNY: MONMOUTHSHIRE ASYLUM.**—Junior Assistant Medical Officer, male, not over 27 years of age. Salary, £150 per annum, increasing to £200, with board, lodging, and washing. Applications to the Medical Superintendent by October 22nd.
- BIRMINGHAM: GENERAL HOSPITAL.**—Surgical Casualty Officer. Appointment for one year, but eligible for re-election. Salary, £50 per annum (non-resident). Applications to the House Governor by November 1st.
- CENTRAL LONDON OPHTHALMIC HOSPITAL**, Gray's Inn Road, W.C.—(1) House-Surgeon. Salary at the rate of £50 per annum, with board, residence, and laundry allowance. (2) Refraction Assistant. Appointments for six months. Applications to the Secretary by October 27th.
- DOWN COUNTY INFIRMARY.**—House Surgeon, unmarried. Salary, £60 per annum, with board and residence. Applications to Dr. Tate, Downpatrick, by October 30th.
- EAST LONDON HOSPITAL FOR CHILDREN**, Shadwell.—(1) Officer for the Electrical Department. (2) Pathologist and Registrar; must be M.R.C.P. Lond. or F.R.C.S. Eng. Honorarium, £100. (3) Assistant Physician; must be F.R.C.P. Lond. or M.R.C.P. Lond. Applications to the Secretary for (1) by October 25th, and for (2) and (3) by November 1st.
- EDMONTON URBAN DISTRICT COUNCIL.**—Medical Officer of Health. Appointment for one year. Salary, £150. Applications to the Clerk to the Council, Town Hall, Edmonton, by October 22nd.
- GATESHEAD UNION.**—Resident Assistant Medical Officer to the Workhouse. Salary, £150 per annum, with furnished apartments, rations, and washing. Applications to the Union Clerk, Poor-law Union Offices, Gateshead, by October 27th.
- GREAT NORTHERN CENTRAL HOSPITAL**, Holloway, N.—(1) Pathologist and Curator of the Museum. Salary, 50 guineas per annum. (2) Assistant Anaesthetist. Honorarium, 10 guineas. Applications to the Secretary by October 30th.
- GREYSBY AND DISTRICT HOSPITAL.**—Resident House-Surgeon. Salary, £80 per annum, with board, lodging and washing. Applications to the Honorary Secretary by November 15th.
- HOSPITAL FOR SICK CHILDREN**, Great Ormond Street, W.—House Surgeon, un-married. Appointment for six months. Salary, £20, washing allowance, £2 10s., with board and residence. Applications, on forms provided, to be sent to the Secretary by October 21st.
- INVERNESS: NORTHERN INFIRMARY.**—House-Surgeon. Salary, £100 per annum, with board, etc. Applications to the Secretary 15, High Street, Inverness, by Oct 20th.
- JENNER INSTITUTE OF PREVENTIVE MEDICINE.**—Assistant Bacteriologist for the Serum Department, Aldenham, Herts. Salary, £200 per annum, with furnished rooms. Applications to the Secretary, Jenner Institute, Chelsea Gardens, S.W., by November 1st.
- LANCASTER: COUNTY LUNATIC ASYLUM.**—Assistant Medical Officer, unmarried, not exceeding 30 years of age. Salary, £150 per annum, with board, etc., and prospect of increase. Applications to the Medical Superintendent.
- LENZIE: WOODLEE ASYLUM.**—Assistant Medical Officer. Salary, £125 per annum, with board, lodging, and washing. Applications to Dr. Marr, Medical Super-intendent.
- LIVERPOOL: STANLEY HOSPITAL.**—Honorary Anaesthetist. Applications to the Chairman of Committee by October 21st.
- LIVERPOOL ROYAL INFIRMARY.**—Assistant Honorary Physician. Applications to the Chairman of the Committee by October 31st.
- LONDON LOCK HOSPITAL**, Harrow Road, W.—House-Surgeon to the Male Hospital. Salary, £80 per annum, with board, lodging, and washing. Applications to the Secretary by October 31st.
- MACLESDALE GENERAL INFIRMARY.**—Junior House Surgeon. Salary, £70 per annum, with board and residence. Applications to the Chairman of the House Committee.
- MANCHESTER: COUNTY ASYLUM**, Prestwich.—Junior Assistant Medical Officer, unmarried and under 35 years of age. Salary, £150 per annum, increasing to £250, with board, furnished apartments, and washing. Applications to the Medical Superintendent.
- MANCHESTER HOSPITAL FOR CONSUMPTION AND DISEASES OF THE THROAT AND CHEST.**—Medical Officer for the In-patient Department, Bowdon. Salary, £100 per annum, with board, apartments, washing, and railway contract to Man-chester. Applications to the Secretary by October 20th.
- METROPOLITAN HOSPITAL**, Kingsland Road, N.E.—Assistant Surgeon; must be F.R.C.S. Eng. Applications to the Secretary by October 20th.
- NEW HOSPITAL FOR WOMEN**, 144, Euston Road, N.W.—(1) Senior Assistant to the Out-patient Department. (2) Clinical Assistant. Applications to the Secretary by October 25th.
- NEWPORT AND MONMOUTHSHIRE HOSPITAL.**—Assistant House Surgeon. Salary, £50 per annum, with board and residence. Applications to the Secretary by October 28th.
- NORTH EASTERN HOSPITAL FOR CHILDREN**, Hackney Road, N.E.—(1) House-Physician. (2) House Surgeon. Appointments for six months. Salary at the rate of £80 per annum, with board, residence, and laundry allowance in each case. Applications to the Secretary, 27, Clement's Lane, Lombard Street, E.C., for (1) by October 13th, and for (2) by November 3rd.
- NORWICH: NORFOLK AND NORWICH HOSPITAL.**—Assistant House-Surgeon. Appointment for six months. Board, lodging and washing provided. Honorarium, £20. Applications to the Secretary by November 4th.
- NOTTINGHAM WORKHOUSE INFIRMARY.**—Assistant Medical Officer. Salary, £160 per annum, with furnished apartments, board, washing, etc. Applications to the Clerk to the Guardians, Shakespeare Street, Nottingham.
- PADDINGTON GREEN CHILDREN'S HOSPITAL**, W.—(1) House-Physician. (2) House-Surgeon. Appointments for six months. Salary at the rate of 50 guineas p-r annum, with board and residence in each case. Applications to the Secretary by October 25th.
- ROYAL FREE HOSPITAL**, Gray's Inn Road, W.C.—(1) Male House-Physician. (2) Male House-Surgeon. (3) Female House-Physician. (4) Female House-Surgeon. Appointments for six months. No salary, but board, etc., provided in each case. Applications to the Secretary by October 25th.
- 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 November 3rd.
- ST. MARYLEBONE INFIRMARY**, Ladbroke Grove Road, W.—Male Second Assistant Medical Officer. Salary, £50 per annum, with board, lodging, etc. Personal applica-tion to the Medical Superintendent any morning before October 22nd.
- ST. MARY'S HOSPITAL**, Paddington, W.—(1) Pathologist. Salary, £250 per annum. (2) Bacteriologist. Salary, £150 per annum. Applications to the Dean by October 23rd.
- SALISBURY: FISHERTON ASYLUM.**—Assistant Medical Officer, unmarried. Salary, £150 per annum, with board, lodging, and washing. Applications to Dr. Finch, Salisbury.
- SHEFFIELD ROYAL INFIRMARY.**—House-Surgeon. Salary, £190 per annum, ad-vancing £10 per year for second and third years, with board, lodging, and washina. Applications, endorsed, "Applications for the post of House-Surgeon," to be sent to the Secretary by November 1st.
- SHEFFIELD UNIVERSITY COLLEGE.**—(1) Professor of Physiology, (2) Demonstrator of Bacteriology. Applications to the Registrar.
- STOCKPORT INFIRMARY.**—Assistant House and Visiting Surgeon. Salary, £20 per annum, with residence, board, and laundry. Application to the Secretary by October 27th.

WESTMINSTER GENERAL DISPENSARY, Gerrard Street, Soho, W.—Honorary Surgeon. Applications to the Secretary by October 27th.
WOLVERHAMPTON AND STAFFORDSHIRE GENERAL HOSPITAL,—House Physician. Salary, £100 per annum, with board and lodging. Applications to the House Governor by October 30th.
WORCESTER CONSUMPTION SANATORIUM—Resident Medical Officer. Applications to Dr. Dixey, Woodgate, Malvern.

MEDICAL APPOINTMENTS.

ABRAM, J. H., M.D., M.R.C.P. Lond., appointed Honorary Physician to the Liverpool Royal Infirmary, *vice* Richard Caton, M.D. Edin., F.R.C.P. Lond., resigned.
ARMOUR, Donald John, M.B., M.R.C.P., F.R.C.S., appointed Honorary Surgeon to the St. Marylebone General Dispensary.
BRYDENE, J. M., M.R.C.S., L.R.C.P., B.C., M.B., appointed Resident Medical Officer, Bright Ward, Guy's Hospital.
DAWES, Joseph William, M.B., M.C. Edin., appointed Medical Officer of Health for the Borough of Longton, *vice* William Joseph Dawes, M.R.C.S. Eng.
DE BOINVILLE, V., M.B., B.S. Edin., appointed Assistant House-Surgeon to the Salisbury Infirmary.
FRENGLEY, Joseph P., M.D., B.S., B.U.I., appointed a District Health Officer under the Department of Public Health of the New Zealand Government.
LEVICK, G. D. B., L.R.C.P. Lond., M.R.C.S. Eng., appointed District Medical Officer of the Hendon Union.
LEWIS, G. H., M.B., Ch.B. Edin., appointed House-Surgeon to the Northampton General Infirmary, *vice* Beaumont Percival, M.B., B.C. Cantab., resigned.
OKELL, George, jun., L.R.C.P. Irel., appointed Certifying Factory Surgeon for the Winsford District of the county of Cheshire.
PHILLIPS, D., M.R.C.S., L.R.C.P. Lond., appointed Medical Officer to the Great Western Railway Servants at Llandilo, *vice* W. H. Lloyd, M.R.C.S. Eng., L.S.A.
ROLL, G. Winfield, B.A., M.B., B.C. Cantab., F.R.C.S. Eng., appointed Honorary Ophthalmic Surgeon to the St. Mary's Hospital for Sick Children, Plaistow, E.
ROWLAND, F., L.R.C.P., L.R.C.S. Ed., appointed District Medical Officer of the Solihull Union.
SHORE, Harry, M.D. Durh., D.P.H., appointed Honorary Surgeon to the Walsall and District Hospital, *vice* F. W. Willmore, deceased.
SPEARMAN, B., B.C., M.B. Cantab., appointed House-Physician to the Northampton General Infirmary, *vice* G. H. Lewis, M.B., Ch.B. Edin., who has been appointed House-Surgeon.
STRAID, Geoffrey, M.D. Brux., L.R.C.P. Lond., M.R.C.S., appointed Honorary Physician to the Walsall and District Hospital, *vice* F. W. Sydenham, appointed Surgeon to Eye, Ear, and Throat Department of Walsall Hospital.
WALKER, A. W. H., M.D. Brux., L.R.C.P. Lond., M.R.C.S. Eng., appointed Certifying Factory Surgeon for the Harrogate District of the county of York.
WAREHAM, Sidney J., F.R.C.S. Eng., L.R.C.P. Lond., L.S.A., appointed Honorary Medical Officer to the St. Mary's Hospital for Sick Children, Plaistow, E.

DIARY FOR NEXT WEEK.

TUESDAY.

Pathological Society of London, 20, Hanover Square, W., 8.30 p.m.—Opening Address by the President, Sir J. Burdon Sanderson, Bart., Mr. F. C. Abbott and Mr. S. G. Shattock: Macroglossia Neurofibromatosa (Lantern Demonstration). Dr. F. W. Andrews: Diffuse Thickening of the Skull of a Child. Dr. F. E. Batten: A Specimen of Poliocephalitis Inferior. Card specimens by Dr. Thurstield.

WEDNESDAY.

Dermatological Society of Great Britain and Ireland, 20, Hanover Square, W., 5 p.m.
Hunterian Society, London Institution, Finsbury Circus, E.C., 8.30 p.m.—Dr. Seymour Ward: The postponed First Hunterian Lecture on the Cardiac Muscle from a Clinical Point of View.

FRIDAY.

Clinical Society of London, 20, Hanover Square, W., 8 p.m.—Exhibition of Clinical Cases, followed by discussion. Patients will be in attendance from 8 p.m. to 9 p.m.

POST-GRADUATE COURSES AND LECTURES.

Charing-cross Hospital, Thursday, 4 p.m.—Gynaecological Demonstration.
 Hospital for Sick Children, Great Ormond Street, W.C., Thursday, 4 p.m.—Mental Deficiency in Children (Lantern Demonstration).
 Medical Graduates' College and Polyclinic, 22, Chancery Street, W.C. Demonstrations will be given at 4 p.m. as follows: Monday, skin; Tuesday, medical; Wednesday, surgical; Thursday, surgical; Friday, eye.
 National Hospital for the Paralyzed and Epileptic, Queen Square, W.C.—Lectures will be given at 3.30 p.m. as follows: Tuesday, Methods of Examining Cases; Friday, Optic Neuritis.
 North-East London Post-Graduate College, Tottenham Hospital, N., Thursday, 4 p.m.—Clinical Lecture: The Heart Affections of Childhood.
 Post-Graduate College, West London Hospital, Hammersmith Road, W.—Lectures will be delivered at 5 p.m. as follows: Monday, Some Diseases of the Stomach; Tuesday, Chorea; Wednesday, Surgical Anatomy; Thursday, Treatment of Some Injuries and Emergencies; Friday, Gastric Ulcer.
 Westminster Hospital, Broad Sanctuary, S.W., Tuesday, 4.30 p.m.—Demonstration of Chest Cases.

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 orders or stamps with the notice not later than Wednesday morning in order to ensure insertion in the current issue.

BIRTHS.

BURTON-BROWN.—On September 14th, at 3, Via Venti Settembre, Rome, the wife of F. H. Burton-Brown, M.A., M.D.—twin sons.
WARWICK BROWN.—On September 28th, the wife of A. Warwick Brown, C.M., M.B., D.Sc., M.A. Aberd., 5, Price's Avenue, Cliftonville, Margate, of a daughter.

MARRIAGES.

BRANDT-WILLARD.—On the 15th, at the Church of the Incarnation, New York, by the Rev. Dr. W. Grosvenor, T. Egerton Brandt, B.A., M.D., to Marion Bradford, daughter of Edward A. Willard, of New York.
ENNECERUS-HOAR.—On October 3rd, the silver wedding day of the bride's parents, at Salehurst Church, Robertsbridge, Sussex, Wilhelm Victor Ennecerus, Oberleutnant in the 10 Rheinischen Infanterie-Regiment No. 161, and Adjutant of the Landwehrbezirks, Coblenz, son of Col. Ennecerus, of Frankfurt-on-Main, to Amy Margaret, only daughter of Charles Hoar, M.B., C.M. Aberd., of Robertsbridge, and granddaughter of the late Augustus Waller, M.D., F.R.S.
TURNER-PRITCHARD.—On October 14th, at St. Peter's Church, White Park, N.W., by the Rev. Dr. Tremlett, Bernard Roworth Turner, B.A., M.B., B.C. Cantab., of Oundle, Northamptonshire, to Emma Beatrice, second daughter of Urban Pritchard, M.D. Edin., F.R.C.S. Eng., of 26, Wimpole Street.

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

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

QUERIES.

HEMIPLEGIA IN PLUMBISM.

R. P. C. writes: A plumber, aged 38, suffered from lead poisoning some years ago. Two years ago he had a "stroke" with left hemiplegia. He has gradually recovered from this, with the exception of a slight drooping of the eyelid, but he is totally deaf. Is there any treatment likely to benefit his condition?

A MEDICAL PATIENT.

URICACIDÆMIA writes: Would some fellow member who suffers from chronic muscular gout and slight chronic constipation kindly advise from personal experience as to a reliable natural aperient water for use, *primo mane*, or other preparation certainly eliminative of uric acid? I am over 60 and, *malgré* great abstinence from animal nitrogen and intoxicants, I suffer.

CASHEW BARK IN DIABETES.

ENQUIRER writes: While in Madeira lately my attention was drawn to the fact that the bark of the cashew tree (*Anacardium occidentale*) is often prescribed by the local medical men in cases of diabetes mellitus with fairly good results. As I find that none of our textbooks refer to this plant in the treatment of this disease, may I ask whether any of your readers have heard of it in connexion with the treatment of diabetes?

CYCLING AND SEA VOYAGES DURING PREGNANCY.

B. J. asks: (1) Up to what time may a pregnant lady, as a rule, indulge with safety in moderate cycling? (2) Is there much danger in the same getting sea-sick during the last two or three months of gestation, sea trips in view being of four hours' duration?

. (1) As long as she can do so without discomfort. (2) This depends on the patient's idiosyncrasy—whether she is easily made sea-sick or not. She should not risk a bad attack of sickness which might prove difficult to stop.

CHYLURIA FOLLOWING PARTURITION.

DR. J. CRAIK TAYLOR (Stewarton, Ayrshire) asks for suggestions (or references to literature) for the treatment of the following case:—Mrs. W., aged 28, after her confinement four years ago, developed some condition which produced chyluria, the which has persisted ever since. The urine passed during the day is practically normal, but that passed during the night is milk like with a specific gravity of 1.200: treated with ether it clears and shows fat globules under the microscope, which also reveals a few blood corpuscles and crystals of sodium urate and calcium oxalate. Periodically she passes clots of chyle, which occasion her great pain. She has never resided or been abroad; her blood contains no flaria though examined on six occasions at different times of day and night. There is no enlargement of the superficial glands, neither is there any evidence of tuberculous disease in any of the members of the family. She is pale, easily irritated, and depressed. At present she is on a nutritious dietary, and is taking the mineral acids.

LONG HOURS OF WORK IN FACTORIES, ETC.

B. asks where can he get any information, physiological or sociological, on the influence of over-long hours of work on men, women, or young persons 14 to 18 years of age? Are there any "fatigue" diagrams or statistics showing the amount of work performed hour by hour and the diminution of output of energy as the day or work goes on? Is there any special information of this sort referring to steam laundries or workshops of that class?

. Our correspondent will find in *Les Filatures de Lin: Etude d'Hygiène Professionnelle*, by Dr. Gilbert, Medical Inspector attached to the Belgian Government (reviewed in the BRITISH MEDICAL JOURNAL of May 31st, p. 1341), statistical information as to the influence of the age of commencing work and of the duration of work on the health of operatives in linen factories. As much of the work in these factories is done in an artificially-humidified atmosphere, it is to some extent comparable to laundry work. In the volume *Dangerous Trades*, edited by Dr. Oliver, there is an article on the Physiology and Pathology of Work and Fatigue in which reference is made to other investigators on the subject. In the same work one of H.M. Inspectors of Factories has an article on