

the walls of the alveoli, but that there was never any evidence of absorption by the alveolar walls. Indeed, he states that the alveolar cells in the newly-born guinea-pig are non-nucleated, and that the nuclei which are visible on the alveolar wall belong to the endothelium of blood vessels and to the cells of the connective tissue. He says that the small nucleated cells in the alveolar walls are practically absent. The particles, however, are taken up after a few hours, both in the alveoli and in the lymph spaces, by phagocytes. In opposition to Arnold, he states that the first cells to take up particles are lymphocytes, small macrophages, and polynuclear cells, and that at a later period come the epithelioid macrophages, which resemble alveolar epithelium, but which are derived from the endothelium of the blood vessels and lymphatics. He says that in the blood vessels there were also a large number of similar polynuclear leucocytes, lymphocytes, and macrophages.

PASSAGE FROM LUNG TO PLEURA.

The older observers noted from time to time the presence of inhaled particles in the parietal pleura. Von Knauff, for instance, refers to the presence of particles in the adenoid tissue of the pleura mediastinalis. The lymphatics of the pulmonary pleura, too, are filled with particles after prolonged inhalation, these particles being derived from the superficial alveoli. Grawitz, by blowing fine particles of dust, etc., into the trachea of rabbits, found isolated particles in the costal pleura after twenty-four hours. Aufrecht repeated this experiment, using an emulsion of cinnabar. Fleiner injected Indian ink into the pleural cavity, and found (after an interval of from five to forty-five minutes), that the corpuscles were taken up by the pleura costalis and the pleura mediastinalis, but not by the pleura pulmonalis. The absorption is dependent upon the normal respiratory movements, for by producing a pneumothorax absorption is prevented. The particles then pass partly into the lymph glands at the back of the chest (intercostal glands), and partly into the glands along the internal mammary artery, behind the manubrium sterni, and in front of the trachea. The supraclavicular glands are also found filled with Indian ink.

In the pleura there appears to be a natural passage of lymph from the cavity to the parietal pleura, and any particles which should pass through the pulmonary pleura into the cavity are absorbed by the parietal pleura and taken to the glands. There would also appear to be a passage, though not an easy one, from the superficial alveoli of the lung to the pleural cavity through the lymphatics of the pulmonary pleura.

Pembrey and I have made a number of experiments in this connexion, using soot, cinnabar, and emery powder, and experimenting upon 14 rabbits. The experimental animal was placed in an airtight chamber, to which was connected a special arrangement for the delivery of soot particles. By a slight modification of the apparatus we were able to use heavy particles, such as cinnabar and emery. The inhalation lasted three-quarters of an hour, and the animal was killed at varying periods. Some were killed by a blow at the back of the head immediately after the experiment, others twelve hours later, and others at the end of a week. The trachea was immediately ligatured, the thorax opened, a cannula was passed into the pulmonary artery, the blood washed out with a saline solution at a temperature of 37° to 38°, and a picro-sublimate solution was then injected. The object of this procedure was to fix the alveoli in a condition of distension without disturbing their contents. The lungs and heart were then placed in picro-sublimate solution and hardened in the usual way.

In all cases the air which was breathed by the animals was heavily laden with particles, and the animals on removal from the chamber were completely black, red, or brown, according to the nature of the inhalation, and in all the animals which were killed at an early period the respiratory tract from the nose downwards was lined with particles.

With regard to the soot inhalations, we found by making control observations that great care had to be exercised in drawing conclusions, inasmuch as the ordinary laboratory rabbits frequently had a large number of cells filled with soot in their lungs. In the conclusions which we have drawn we have made every allowance for this fact. We have, more-

over, made control experiments upon newly-born guinea-pigs.

The two chief lines of defence against the entrance of particles into the lungs are the nose and larynx; the mucus over the turbinate bones retains an enormous amount of dust; animals upon which tracheotomy has been performed are therefore in an unfavourable condition, and exact conclusions cannot be drawn from experiments made upon them. Violent respiratory movements facilitate the entrance of particles into the lungs, and easily lead to rupture of minute blood vessels in the lungs. Small areas of collapse are frequently seen in the lungs of animals which have inhaled soot or dust. Particles getting into the alveoli are then got rid of in the following manner:

Some pass through into the lymphatics, and either reach the bronchial glands, where they are retained, or are retained in the adenoid tissues (peribronchial and perivascular), and thence may be excreted to the bronchi by means of cells; whilst some are taken up by cells and thus passed into the bronchi, and are ultimately extruded through the upper air passages.

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- ³ Peiper, *Zeit. f. klin. Med.*, viii. ⁴ *Ger. etc., klin. Arb.*, von Rosbach u. Sehwald, 1800, Jena. ⁵ *Arch. f. path. Anat.*, lxxi, 1877, p. 414. ⁶ *Virchow's Archives*, 1888, p. 98. ⁷ *Amer. Journ. of Anat.*, vol. i, No. 1, November, 1901, ⁸ *Staubinhalation und Staubmetastase*, 1886. ⁹ *Virchow's Archiv*, Band viii, 1869, p. 326. ¹⁰ *Ann. de l'Inst. Pasteur*, vol. iii, 1889, p. 337.

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

THE TREATMENT OF AGUE BY INTRAMUSCULAR INJECTION OF QUININE.

PRACTITIONERS who have had experience of the treatment of malaria by both intramuscular and hypodermic injections of quinine solution will scarcely endorse Colonel Smyth's condemnation of the intramuscular method and his preference for the hypodermic. The latter injections are often very painful, and may give rise to tender swellings (notwithstanding gentle friction) which are persistent and which may break down and form abscesses. Hypodermic injection into the forearm may cause a paralysis of one or more fingers, which does not pass off for some time.

On the other hand, intragluteal injections are practically painless and the swellings soon disappear, while their effect on the fever is fully as favourable and rapid as in the case of the hypodermic method. In one patient I injected 5 gr. to 10 gr. of quinine twice a day for six weeks into the gluteal muscles without a bad effect of any kind, and with most satisfactory results on his fever. In the practice of a tropical hospital under my direction, in which cases of pernicious malaria were numerous, we abandoned the hypodermic method for the intragluteal with the happiest results.

Of course, the strictest antiseptic precautions must be used, or abscess will follow. A sterilizable serum syringe should be used, which should be sterilized after each injection. The skin should be cleansed with turpentine and spirit, and 5 gr. to 10 gr. of the acid quinine hydrochlorate dissolved in a drachm or less of water, and boiled. The syringe, which before use is washed out with hot water, takes the solution up while hot, and injects it deeply into the gluteal muscles. Finally, the puncture is sealed with collodion, and friction is employed to diffuse the solution. Although this method is invaluable in severe cases, most people during an ordinary attack of fever would prefer to take their quinine by the mouth.

Bexhill.

A. G. WELSFORD, M.D., F.R.C.S.

In the BRITISH MEDICAL JOURNAL of November 15th Lieutenant-Colonel John Smyth, A.M.S., remarks on the above treatment of ague that a recent writer "seems under the impression that he is more or less the inventor of the method, and is not sure whether it should not go by his name."

In the *Medical Times and Gazette* of July 10th, 1876, will be

found, under the heading of "Notes on the Treatment of Fever," a short article by me based on the careful observation of over 200 cases of agues treated by small subcutaneous injections of quinine sulphate in the British Seamen's Hospital for the year 1869, thirty-three years ago.

I was led to practise this method as an improvement on the older one of sprinkling quinine over a small blistered surface in cases where the drug was not tolerated by the stomach, a practice quite common in the East. I thought it at the time my own discovery, but afterwards learned that the late Dr. McCaith, of Smyrna, had forestalled me. I am not aware of any earlier claim. I began with 2 gr., but experience proved that 1-gr. doses sufficed. The muriate of quinine was found to be less efficacious than the sulphate. My experience of this method, which I have continued since, substantially agrees with that of Dr. John Smyth.

JOHN PATTERSON, M.D.,
Late Surgeon-Superintendent British Seamen's Hospital,
Constantinople.

REPORTS

ON

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

KASR-EL-AINI HOSPITAL, CAIRO.

A CASE OF SUBCUTANEOUS HERNIA CEREBRI (? TRAUMATIC
PORENCEPHALUS) IN AN ADULT.

By LLEWELLYN PHILLIPS, M.B., F.R.C.S.

The condition observed in the following case is an unusual one.

History.

Ibrahim Ali, an Egyptian, aged 18, was struck on the head by a piece of timber on July 9th, 1901. He was admitted to the Mansourah Hospital, where a compound depressed fracture of the left half of the frontal was discovered, the fragment of bone being bodily depressed. The pulsation of the brain was visible and he was concussed.

The depressed bone was not elevated. He did not fully recover consciousness until July 24th. He continued weak for some time and slightly delirious. He was discharged from the hospital on August 7th. The wound had completely healed, and pulsation was visible.

He was first seen by me in the out-patient department at Kasr-el-Aini Hospital on October 2nd, and admitted a few days later. He then had a pulsating swelling, the size of a tangerine orange, over the site of the fracture, namely, the left half of the frontal bone between the external angular process and the hairy portion of the scalp. Pulsation was not affected by pressure on the temporal artery. Around the edge of the swelling there was a raised edge of bone, and over its most prominent portion there was a loose plate of bone. The scar was situated on the swelling. This prominence appeared shortly after his discharge from Mansourah Hospital. Pressure over the swelling caused a sensation of giddiness. His mental condition was rather weak, and he used to call out at times with attacks of pain, but there were no regular fits. There was no paralysis.

Dr. Fischer examined his eyes for me, and reported that there was intense optic neuritis of both eyes, both optic discs being much swollen. The neuritis in the left eye seemed to be of rather older standing, and there were signs of commencing atrophy. The vessels were enlarged and tortuous. There were no haemorrhages.

He was kept in bed, and chloral hydrate and potassium bromide were administered. Under this treatment the attacks of pain became less, but the swelling did not markedly decrease for some weeks. Early in November a decrease in the size of the swelling became manifest, and in the middle of the month elastic pressure was made over the swelling by means of cotton-wool and bandages. This produced no cerebral symptoms. By December 1st the swelling had completely disappeared, and now the slightly-raised edge of the bone was to be felt very distinctly, as well as the loose plate of bone over the former fracture. Dr. Fischer made a further

report of his eyes; the swelling of the right optic disc had quite disappeared, the disc being slightly paler than normal; the left optic disc was still swollen (+ 5 D), and the physiological cup was filled up. His temperature during his stay in hospital during the first days ranged between 37° and 37.8° F., after which it became quite normal.

Remarks.

The diagnosis seemed at first to be sarcoma of the frontal bone following the fracture, but the after-history completely disproves that. The optic neuritis would have been quite compatible with such a disease.

In children a condition of so-called traumatic meningocele is not uncommon after fracture (the disease being really traumatic porencephalus), Quervain¹ having collected some fifty odd cases, and I myself have seen two others, one in England and one in Egypt, but these were simple fractures, and the patients always children or infants. Only one case of an adult have I been able to find a record of. Still, considering all these facts, no other diagnosis is possible except hernia cerebri or traumatic porencephalus, the unusual feature being its late occurrence after the wound had completely healed, a septic factor being absent.

No operation seemed feasible, and, indeed, the patient recovered without one.

REPORTS OF SOCIETIES.

CLINICAL SOCIETY OF LONDON.

HOWARD MARSH, F.R.C.S., President, in the Chair.

Friday, November 28th, 1902.

RUPTURED CRUCIAL LIGAMENTS AND THEIR REPAIR BY OPERATION.

MR. A. W. MAYO ROBSON (Leeds) described the case of a miner, aged 41, admitted to the Leeds General Infirmary, November, 1895, for lameness, the result of an accident nine months before, when he was almost buried by a fall of earth and sustained numerous injuries, besides the one to the joint in question:

On admission, the right knee was swollen but free from tenderness. When the muscles were pressed the bones were in good position, but as soon as the muscles were relaxed the tibia fell backward until stopped by the ligamentum patellae, and on manipulation the head of the tibia could be brought forward in front of the femur, there being also free lateral movement of the head of the tibia on the femur and some fluid in the joint. Not only were all the ligaments relaxed, but the crucial ligaments had been ruptured. On November 21st, 1895, the joint was opened by a semilunar incision carried across the front and dividing the ligamentum patellae. The synovial membrane was found inflamed, and there was excess of fluid in the joint. Both crucial ligaments were found completely ruptured, having been torn from their upper attachments, the ends being in a shreddy condition. They were stitched in position by means of catgut ligatures, the anterior being stitched to the synovial membrane and tissues on the inner side of the external condyle, and the posterior, which was too short and was split in order to lengthen it, was fixed by sutures to the synovial membrane and cartilage on the outer side of the inner condyle. The wound was then stitched up by means of buried catgut sutures, and was closed superficially by interrupted silkworm gut sutures. Complete restoration of the normal movements of the joint occurred. The stitches were removed on December 4th, and on the 14th plaster of paris was applied, and he was allowed to get about on a Thomas's splint and to go home. The plaster was removed in a month, after which movement gradually returned under massage. When seen on October 24th, 1901, the patient was walking without a limp and could run. He said that his leg was perfectly strong, and that he could work eight hours a day at his old employment of getting coal, and that he had never been off work a day on account of his knee since the year of his accident. The joint could be extended to the straight line and flexed just beyond the right angle, there being no abnormal lateral or antero-posterior mobility whatever.

The author had not discovered any other case in which these ligaments had been repaired, which he trusted was a sufficient excuse for his recording a single case.

In reply to the PRESIDENT and Mr. W. G. SPENCER, Mr. ROBSON said that generally it was inadvisable to operate upon acutely inflamed joints. In his case, as the limb was absolutely useless nine months after the accident, the only alternative was amputation.

HEPATIC ABSCESS.

Lieut.-Col. W. K. HATCH, I.M.S., read a paper on this subject. In the Sir Jamssetjee Jejeebhoy Hospital and in private practice he had seen upwards of 1,000 cases. The disease was

¹ Quervain, De la Céphalhydrocèle Traumatique. *Chippault, Travaux de Neurologie Chirurgicale*. 1898. T. iii.

towards the gentleman who formed the subject of it, a friendliness which the latter fully recognized and reciprocated. It speaks highly for Mr. Hakes's nobility of character and for his reputation as a surgeon that in spite of the strong line of action he took up he seems never to have made a personal enemy; and that his professional brethren, however little they might sympathize with it, never ceased to hold him in the highest esteem, both as an able surgeon and as an honourable gentleman.

For eighteen years he was a member of the Liverpool School Board, in the work of which he took an active part, and of which he was Vice-Chairman for some years.

In private life he was a singularly amiable man. He was fond of recreations such as billiards, chess, tennis, tricycling, and archery, winning prizes in the last, both at local and national meetings. He married Agnes, daughter of the late Mr. Robert Bickersteth, but had been a widower since 1891. He is survived by one daughter.

His funeral took place at St. James's Cemetery on November 26th, and was largely attended by the members of the medical profession as well as by the clergy of all schools, and by representatives of many charities and organizations with which he was connected.

JOHN LLOYD, M.B.LOND., M.R.C.S.,

Small Heath, Birmingham.

LATE on the evening of December 1st, almost suddenly, and at the end of a hard day's professional work, there passed away one of the oldest and best known of Birmingham's medical practitioners. A hard and constant worker from the days of his boyhood, he had preserved a sound constitution, and was strong and well physically—except for the anginal trouble by which his life was ended—until the hour of his death.

He was born in 1827, in Soho, Birmingham, and was employed in his youth—as had also been several generations of his ancestors—in the famous foundry of Bolton and Watt. He remembered well Watt's first steam engine, which was erected at the foundry, and which stood there into the days of the writer of this notice. Endowed with great natural ability and energy, John Lloyd's leisure time was spent in his youth in adding to his own knowledge and in imparting knowledge to others, with the result that before he was 20 years of age he took to the scholastic profession as a means of living, and settled at Goole, in Yorkshire. Wearying of the limitations of the teaching calling, however, he matriculated at the London University, and entered Queen's College, Birmingham, as a medical student when he was 30 years of age.

During his college career he carried off nearly all the prizes open to him, and qualified as M.R.C.S.Eng. in 1864. A few months later he was appointed Senior Demonstrator of Anatomy at his College, and in the following year was raised to the important position of Professor of Anatomy. The duties of this professorial appointment he discharged with remarkable success; but when a few years later the two local medical colleges—Queen's and Sydenham—amalgamated, he resigned his professorship and began general practice in the house where on Monday last he died. He had graduated M.B. in the University of London in 1867.

Mr. Lloyd was a man of exceptional ability, and of varied attainments, a great lover of Nature, a born musician, a gifted artist, and a graceful writer of verse. He was a talented chess-player, and had held the championship of the Midland counties on several occasions in his younger days. He was a great reader in many branches of literature and learning, philosophical and religious questions having for him a great attraction. He laboured for nearly forty years in a heavy practice, and never considered himself when his services were required. He had been a widower for several years, and leaves two sons, one of whom is Professor Jordan Lloyd, of Birmingham.

ABEL MIX PHELPS, M.D.,

Professor of Orthopaedics, New York Post-Graduate School.

WE regret to announce the death of Dr. A. M. Phelps, the well-known American orthopaedic surgeon, which occurred on October 6th, 1902, from abdominal trouble, from which he

had been suffering for some time. Dr. Phelps was born at Alburg Springs, Vermont, on January 27th, 1851. He belonged to a family in which there have been many distinguished men, among others the Hon. Edward J. Phelps, late American Minister to England, and the Hon. W. W. Phelps, late American Minister to Germany. Dr. Phelps graduated at the University of Michigan in 1873, and was immediately appointed Surgeon to the Vermont Central Railroad and to large iron companies. After some years he went to Germany, where he worked for four years under Schede, Esmarch, Volkmann, Billroth, and Thiersch. He at that time was keenly interested in orthopaedic surgery, and introduced the American methods in the Allgemeines Krankenhaus at Hamburg. In 1885, shortly after his return to America, he was called to the Chair of Orthopaedic Surgery in the University of Vermont. Later he occupied for a number of years the same Chair in the University of New York. As a further recognition of his labours in this branch of surgery he was, in 1894, elected President of the American Orthopaedic Association. In 1901 he became President of the Medical Society of the State of New York. He was also a member of the New York Academy of Medicine. After the last International Medical Congress in Paris he was invited to deliver lectures and operate at various of the clinics in German Universities. At the time of his death he was Visiting Surgeon to the City Hospital, Blackwell's Island, and was Professor of Orthopaedics in the New York Post-graduate School. In a resolution passed by his colleagues, and signed by Drs. Thomas E. Satterthwaite, Robert T. Morris, and Reginald H. Sayre, it is stated that "Dr. Phelps was a man of enthusiasm and force, great originality, and firm convictions. Lucid in thought and expression, a bold and skilful operator, he was also a successful teacher and leader in his chosen field, operative orthopaedics. Early recognized as a pioneer, his name will be held in honourable esteem wherever scientific orthopaedics are practised. Those who were associated with him more intimately knew the tender side of his nature. In a wider circle he will be best remembered as an honest and true friend."

DR. CALDWELL STEPHEN, who died on November 28th at Evelyn Gardens, South Kensington, was born in Montreal, Canada, in 1860. He studied at McGill University, where in 1887 he gained the degrees of M.D. and C.M. He subsequently came to London, obtained the L.R.C.P. and L.S.A., and afterwards the D.P.H.Camb. He commenced practice in Sutherland Avenue, but moved later to South Kensington. Dr. Stephen had been ailing for some time, and knew that he was suffering from a serious affection of the heart as a result of repeated attacks of rheumatic fever. Of late he had been much troubled with insomnia, dyspnoea, and angina pectoris. But for the state of his health he would, without doubt, have taken a high position in London, for he was a thoroughly practical, resourceful, and well-informed practitioner. His loss is deeply mourned by a wide circle of patients, by whom he was greatly beloved for his kindly and sympathetic nature, his uprightness of character, and earnest endeavours to allay suffering. His sad death has come as a shock to his many friends, who had been captivated by his attractive personality. The interment took place at Kensal Green Cemetery amid many manifestations of sincere regret from a large gathering of friends, patients, and colleagues. The greatest sympathy is felt for his widow, who by her unremitting care contributed vastly to the relief of his sufferings.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are Dr. Leonard Landois, Professor of Physiology in the University of Greifswald, aged 64; Dr. Ernst Friedrich Bitter, formerly Professor of Gynaecology in the University of St. Petersburg, aged 62; Dr. Ernst Mehnert, Professor of Anatomy in the University of Halle, aged 38; Dr. Nathaniel Feuer, Professor of Ophthalmology in the University of Buda-Pesth, aged 58; Dr. Karl Burger, a laryngologist of Bonn, aged 58; Dr. William Henry Haynes, President of the Brooklyn Society for Neurology, aged 46; and Dr. Friedrich Dornbluth, a well-known hygienist of Frankfort, author of works on school sanitation, hygienic gymnastics, etc., aged 77.

Surgeon R. Stitt; Ophthalmology, Passed Assistant-Surgeon T. D. Myers. Instruction in signals, Manual of the Sword and Extracts from Tactics, by an officer not yet designated. Naval Law, Mr. E. P. Hanna, solicitor of the Navy Department. The School occupies a portion of the buildings formerly used as the Naval Observatory, which have been remodelled in order to adapt them to the requirements of the new work just undertaken. The School begins its career with a class of twelve Assistant-Surgeons recently appointed.

HEALTH OF THE UNITED STATES ARMY.

FROM the annual report of the Surgeon-General of the United States Army for the fiscal year ending June 30th, 1902, which has recently been issued, it appears that the rates of admission for disease and injury, the rate of discharge for disability, and the mortality-rate for the calendar year 1901 all show a considerable diminution as compared with the corresponding rates of the previous year.

The admissions in 1901 constituted 1,791.59 per 1,000 of strength, as compared with 2,311.81 in 1900, and with 1,502.47, the mean annual rate of the previous ten years. The rate of discharge for disability was 19.95 in 1901, as compared with 22.60 in 1900, and with 16.69 for the decade, and the death-rate from all causes was 13.94 per 1,000 men, as compared with 22.74 and 11.91 respectively. Deaths from disease constituted 9.58 per 1,000 of mean strength, as compared with 15.79 in 1900, and with 8.49 during the years of the decade, and deaths from injury 4.36, as compared respectively with 6.95 and 3.42. During the year the mean strength of the army consisted of 92,491 men, of whom 81,885 were regulars, and 10,606 volunteers. The admission-rate for troops serving in Porto Rico was 1,367.74 per 1,000 of strength, in the United States 1,550.25, in Cuba 1,557.49, and in the Pacific Islands and China 1,928.14. The death-rate from all causes was 5.29 per 1,000 of strength in Cuba, 6.90 in the United States, 7.81 in Porto Rico, and 17.95 in the Pacific Islands and China. Deaths from disease constituted only 3.21 per 1,000 in Cuba, 4.68 in the United States, and 12.40 in the Pacific Islands and China. The mean strength of the commands were: In Porto Rico 1,153, in Cuba 5,297, in the United States 26,515, and in the Pacific Islands and China 59,526.

The most prevalent disease during the year 1901 was malaria, but the death-rate from it was exceedingly small. The most deadly malady was tuberculosis, of which 452 cases were reported in the course of the year, equivalent to an admission-rate of 4.89 per 1,000, the death-rate being 1.03 per 1,000. The number of cases of typhoid fever reported during the year were 594, with 78 deaths. In the army as a whole, 125 cases of small-pox were reported, 37 of which proved fatal; all these occurred in the Philippines. A large number of cases of measles was reported for 1901, while scarlet fever was infrequent. Dengue was very prevalent among the troops in the Philippines, constituting 31.67 cases per 1,000 of strength. Only 14 cases of yellow fever occurred in the army throughout the year. Since the early part of the current year cholera has attacked a limited number of American soldiers, and there have been some deaths. Alcoholism has kept at much the same ratio during the past year as in the years immediately preceding. The number of cases of insanity reported in 1901 was 166. An insignificant number of soldiers suffered from bubonic plague in the Philippines in the early part of the year, but the disease seems now to have disappeared from among the civil as well as the military population. The cases of heat-stroke numbered 207, equivalent to 2.24 per 1,000. During the calendar year 1901 there were entered on the reports of the sick and wounded of the army—mean strength 92,491—17,736 cases, or 191.77 per 1,000 of strength, with 407 men discharged for disability, respectively, to 4.40 and 4.36 per 1,000 of strength.

MEDICO-LEGAL AND MEDICO-ETHICAL.

A "SPECIALIST ON THE TEETH."

WE learn from a report in the *Manchester Daily Despatch* of December 2nd that a person named J. H. H. Loft was summoned under the Dentists Act for using an addition or description, namely, "Specialist on the Teeth," implying that he was registered under the Act or that he was specially qualified to practise dentistry. The Bench rejected the defence, which was that he had not used the words "dentist, dentistry, or dental," which it was admitted would amount to such an implication, and inflicted a fine of £10 and costs.

The perverse ingenuity of unqualified persons is constantly being exercised to devise forms of words which shall attract the public without bringing themselves within the reach of the provisions of the Medical Acts or the Dentists Act. The satisfaction with which we record this conviction is in nowise diminished by the fact that, in answer to a correspondent, we had expressed only last week a doubt whether a prosecution on a nearly similar count would succeed.

INFECTIOUS DISEASE NOTIFICATION.

WE learn from the *Newcastle Evening Chronicle* of November 28th, 1902, that Dr. John Veitch Easton, a medical practitioner in Newcastle, was summoned at the Police-court by the local authority for that he unlawfully did not, as soon as he became aware that a patient under his care was suffering from small-pox, notify to that effect to the Medical Officer of Health. The Town Clerk prosecuted, and Mr. T. Dodds defended. Dr. Armstrong, Medical Officer of Health for Newcastle, and a sister of the patient gave evidence. The Bench gave judgment to the effect that the Medical Officer of Health had been amply justified in bringing the case before them, but after a consideration of the circumstances, on which the Chairman of the Bench adverted, they decided to dismiss the case.

THE MEDICAL PROFESSION AND CRIME.

MEMBER.—The parents of the child can institute proceedings against the man.

INFORMATION AS TO PATIENT IN ASYLUM.

M. A. A. writes: A. has a brother whom he has not seen for some time, and eventually finds he is confined in a private asylum for the insane. A. informs his medical man B. and B. writes for A. to the medical officer and owner of the asylum (C.) to inquire what condition the patient is considered to be in. C. replies to B. and says he is not justified in giving information as to any one he has in his asylum. Is C. correct? If so, how can A. find out whether his brother is properly detained as an inmate of the asylum? The patient appeared to A. to be quite rational.

*A. himself had better write direct to C., frankly and fully explaining all the circumstances, and asking C. what the patient's general mental state now is.

MEDICAL ETIQUETTE.

LEX.—As both doctors appear to have been summoned, the family should be allowed to choose between them. Although Dr. B. arrived first, Dr. A.'s position as family medical attendant may naturally make them prefer him. Dr. B. is, of course, entitled to be paid for his visit.

INSURANCE.—Where a practitioner gives a certificate to the executors of a deceased patient for the purpose of an insurance company, the usual charge made is, we believe, one guinea.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF OXFORD.

Fellowship in Physiology.—There will be an election at Brasenose College in March, 1903, to an Ordinary Fellowship, of the value of £200 a year, tenable for seven years, after an examination in the subjects recognized in the Honour School of Animal Physiology. Weight will be attached to such work, whether published or not, which may be submitted, exhibiting research in some subject of physiological study. The examination, which may at the discretion of the examiners include a practical examination in one or more branches of the subject, will begin on Tuesday, February 24th, and will not in any case last more than four days. Candidates, who must have passed all the examinations required by the University for the degree of Bachelor of Arts, are requested to send to the Principal their names and testimonials, together with any work which they may submit, on or before January 31st.

UNIVERSITY OF CAMBRIDGE.

Appointments.—Dr. D. MacAlister has been appointed one of the *Sex Viri*, and a member of the Boards for Indian Civil Service Studies and for Agricultural Studies; Dr. Guillemard, a member of the Antiquarian Committee; Dr. Barclay-Smith and Mr. T. P. Strangeways, St. John's, members of the State Medicine Syndicate; Mr. W. M. Fletcher, Trinity, a member of the Special Board for Medicine; Professor Woodhead, Dr. Collingridge, Mr. J. E. Purvis, St. John's; Dr. Tatham, and Dr. Lane Notter examiners in State Medicine.

Degrees.—At the congregation on November 29th, Mr. J. H. H. Manley, Emmanuel, was admitted to the M.D. degree; Mr. W. E. Moore Ede, King's, to the M.B. degree; and Mr. L. Reynolds, Trinity, to the B.C. degree.

UNIVERSITY COLLEGE, CARDIFF.

Memorial to the late Principal.—On November 28th a meeting of the General Committee of the Principal Viriamu Jones Memorial Fund was held, presided over by Mr. H. M. Thompson. A good deal of discussion took place, but it was finally decided to raise a fund of £1,000 to erect a statue to the memory of the late Principal. To carry out this object, and to raise the necessary funds, an executive Committee was appointed. It was also decided that, in the event of the money being provided, Mr. W. Goscombe John should be commissioned to execute the work.

UNIVERSITY COLLEGE, SHEFFIELD.

MR. J. S. MACDONALD has been appointed Professor of Physiology in succession to Professor Myers-Ward, who has been appointed Lecturer in Physiology at Charing Cross Hospital. Mr. Macdonald, who is at present Assistant Lecturer in Physiology at University College, Liverpool, will take up the duties of his new appointment in January next.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

THE following gentlemen having passed the necessary Examination and conformed to the By-laws, have been admitted Members of the College:

W. B. Ainger, St. Bartholomew's Hospital; J. B. Albury, St. Mary's Hospital; F. H. Alexander, University College Hospital; A. J. Beadel, Guy's Hospital; C. C. Bell, M.B. Toronto, Toronto University and University College Hospital; H. F. Bellamy, M.D. Lausanne, Charing Cross Hospital; H. Bentley, B.A. Camb., Cambridge University and Guy's Hospital; D. H. B. Bett, M.B., Ch.B. New Zealand, New Zealand University and University College Hospital; G. Bever, London Hospital; W. N. Blatchford, University College, Bristol; T. M. Body, St. Bartholomew's Hospital; G. A. Bosson, University College Hospital; S. A. Boyd, Charing Cross Hospital; C. R. Bradley, St. George's Hospital; W. A. Breud, M.A. Camb., B.Sc. Lond., Cambridge University and King's College Hospital; R. H. Bridges, St. Thomas's Hospital; J. H. Burgess, St. Mary's Hospital; E. P. G. Causton, B.A. Camb., Cambridge University and St. Mary's Hospital; W. A. Cerswell, M.B. Toronto, Toronto University and University College Hospital; C. L. Coode, B.A. Oxon.; Oxford University and London Hospital; G. C. Cross, Middlesex Hospital; Millais Culpin, London Hospital; H. J. Cundell, St. Mary's Hospital; T. A. Davies, M.B. Edin., Edinburgh University; H. B. Day, King's College Hospital; W. L. M. Day,

B.A.Oxon., Oxford University and Guy's Hospital; H. Devine, University College and Royal Infirmary, Bristol; E. W. Dewey, St. George's Hospital; C. Dix, St. Bartholomew's Hospital; R. S. Drew, B.A.Camb., Cambridge University and St. Mary's Hospital; H. L. Driver, St. George's Hospital; G. P. Duprey, L.D.S.Eng., Middlesex Hospital; R. J. Dwyer, Toronto University and University College Hospital; W. T. Evans, Cardiff and University College Hospital; H. S. Faber, St. George's Hospital; E. O. Faulkner, St. Mary's Hospital; E. Faulkes, Guy's Hospital; W. A. Fish, M.D., C.M.Toronto, Trinity College, Toronto, and University College Hospital; W. H. Fisher, B.A.Camb., Cambridge University and London Hospital; M. A. M. Fitzmaurice-Kelly, St. Mary's Hospital; J. H. Frazer, M.D. Edin., Edinburgh University and Charing Cross Hospital; H. Gardner, University College Hospital; A. F. B. Gomess, King's College Hospital; H. U. Gould, Cambridge University and St. Bartholomew's Hospital; A. L. B. Green, Aberdeen University and St. Bartholomew's Hospital; A. Gregory, Yorkshire College and General Infirmary, Leeds; G. Griffin, London Hospital; J. W. Gromitt, Guy's Hospital; A. J. Hall, M.B., B.S. New Zealand, Otago University, New Zealand and London Hospital; W. J. Harrison, M.B., B.S. Durh., Durham University and St. Thomas's Hospital; J. H. Hart, St. Thomas's Hospital; F. Harvey, St. Bartholomew's Hospital; H. E. Heapy, University College and Royal Infirmary, Liverpool; C. A. Hewavitarne, University College Hospital; E. C. Hodgson, St. Bartholomew's Hospital; W. J. Hogg, L.S.A.Lond., Queen's College, Belfast, and Middlesex Hospital; G. S. Hughes, Middlesex Hospital; R. H. St. B. E. Hughes, St. Mary's Hospital; F. D. S. Jackson, Guy's Hospital; W. W. James, L.D.S.Eng., Middlesex Hospital; G. J. Jenkins, M.B., C.M. Edin., Edinburgh University and King's College Hospital; B. W. Jones, Queen's and General Hospitals and Birmingham University; R. P. Kennedy, Glasgow University; P. Kitchen, L.S.A.Lond., Yorkshire College, Leeds, and St. Mary's Hospital; F. C. Lambert, St. Mary's Hospital; R. C. Lawry, Guy's Hospital; H. D. Ledward, B.A.Camb., Cambridge University and St. Bartholomew's Hospital; A. J. A. Lennane, L.S.A.Lond., University College Hospital; G. M. Levick, St. Bartholomew's Hospital; A. Lewthwaite, University College Hospital; C. E. W. Lyth, University College Hospital; J. F. McKee, M.B. Toronto, Trinity College, Toronto; A. T. Marshall, King's College Hospital; L. H. Moiser, Yorkshire College, Leeds, and Guy's Hospital; G. S. Moore, L.S.A.Lond., London and Middlesex Hospital; G. P. Mossop, London Hospital; A. A. Myers, King's College Hospital; A. C. W. Newport, Charing Cross Hospital; T. H. Ollerhead, St. Mary's Hospital; S. L. Pallant, L.D.S. Lond., Guy's Hospital; H. W. Pank and F. D. Parbury, St. Bartholomew's Hospital; W. Parsons, University College Hospital; W. F. Paterson, Otago University, New Zealand, and Middlesex Hospital; P. G. Pavitt, L.D.S.Eng., Middlesex Hospital; R. A. G. Penny, St. George's Hospital; A. S. Petrie, St. Bartholomew's Hospital; F. B. Pinniger, Charing Cross Hospital; R. C. Pitt, London Hospital; A. H. S. Richardson, Westminster Hospital; A. Richmond, M.B., Ch.B. Vict., Owens College, Manchester, and St. Bartholomew's Hospital; G. S. Robertson, Guy's Hospital; D. P. Rockwood, University College Hospital; W. B. Rodrigo, D.P.H. Lond., L.M.S. Ceylon, Ceylon Medical College and King's College Hospital; J. Schumer, M.D. Vienna, Vienna and Cracow Universities and Charing Cross Hospital; W. A. Scott, M.B. Toronto, Trinity College, Toronto, and University College Hospital; C. G. Seymour, St. Thomas's Hospital; H. B. Simpson, University College Hospital; D. Smith, Middlesex Hospital; E. B. Smith, St. Bartholomew's Hospital; J. E. S. Smith, Owens College, and Royal Infirmary, Manchester; T. M. Smith, Guy's Hospital; H. Statham, B.A.Camb., Cambridge University and St. Bartholomew's Hospital; C. Stiebel, Cambridge University and St. Thomas's Hospital; W. E. Struthers, M.B. Toronto, Trinity College, Toronto, and Middlesex Hospital; R. Thompson, St. Bartholomew's Hospital; P. F. Tinne, B.A.Oxon., Oxford University and St. George's Hospital; H. Tipping, Guy's Hospital; J. Tritsch, Vienna University and University College Hospital; H. M. Turnbull, B.A.Oxon., Oxford University and London Hospital; V. F. Wall, L.S.A.Lond., St. Mary's Hospital; H. V. Wenham, St. Bartholomew's Hospital; C. H. Wood, University College Hospital; J. R. L. Woods, Cambridge University and St. Thomas's Hospital; G. Young, M.D. Zurich, Jefferson Medical College, Zurich, Durham University, and London Hospital.

TRINITY COLLEGE, DUBLIN.

The following candidates have passed examinations as under:

Final Medical Examination—Section B.—W. G. Harvey, J. M. Holmes, H. Stokes, W. Boxwell, W. Wiley, C. E. Moore, D. B. Thomson, J. T. M'Entire, P. S. Stewart, J. F. Nicholson, T. J. P. Crean, D. Gray, W. P. Tate.

Final Examination in Medicine.—A. H. Corley, D. Jacovides, H. T. Brady, T. W. Crowley, W. I. de C. Wheeler, A. A. Burrell, B. L. Middleton, J. H. Torney, C. A. Stone, W. Leggett, J. H. Askins, E. V. Collen, N. M. Cummins, J. Wallace.

M.B. Degree.—H. A. Hanan.

Final Examination in Midwifery.—S. S. Pringle, A. A. Burrell, A. H. Corley, T. W. Crowley, A. H. Marks, H. T. Brady, W. G. M. Anderson, J. E. Johnston, W. Leggett, W. P. Ringland, W. R. H. Smith, H. Townsend, M.D., C. F. Rolleston, T. E. F. Manning, W. I. de C. Wheeler, C. A. Stone.

CONJOINT BOARD IN IRELAND.

The undermentioned candidates have passed the examination for the Diploma in Public Health:

Miss Eleanor Rosina Sproull, M.B., B.Ch. Edin., C. L. Birmingham, M.D., R.U.I., D. S. Browne, L.R.C.P. and S. Edin., E. A. Husein, L.M. and S. Bombay, T. C. Lauder, L.R.C.P. and S.I., Miss Elizabeth Macrory, M.B., B.Ch. Edin., E. F. Stephenson, L.R.C.P. and S.I., J. G. Willis, L.R.C.P. and S. Edin.

* Honours.

PUBLIC HEALTH

AND

POOR-LAW MEDICAL SERVICES.

HEALTH OF ENGLISH TOWNS.

IN seventy-six of the largest English towns, including London, 7,812 births and 5,433 deaths were registered during the week ending Saturday last, November 29th. The annual rate of mortality in these towns, which had been 17.4 and 16.9 per 1,000 in the two preceding weeks, rose again last week to 19.1 per 1,000. The rates in the several towns ranged from 7.7 in Ipswich, 8.5 in Bournemouth, 9.2 in Reading and in York, 9.5 in Croydon, 10.2 in Coventry, and 11.1 in Leyton, to 23.4 in Wolverhampton, 23.6 in Rhondda, 24.2 in Oldham, 25.5 in Liverpool, 27.2 in Newport (Mon.), 29.1 in Tynemouth, and 29.2 in Hanley. In London the rate of mortality was 19.4 per 1,000, while it averaged 18.9 in the seventy-five other large towns. The mean death-rate from the principal infectious diseases was 1.9 per 1,000 in the seventy-six large towns; in London this death-rate was equal to 1.4 per 1,000, while it averaged 2.1 in the seventy-five other large towns, among which the highest rates were 4.0 in Hastings, in West Bromwich, and in Tynemouth, 4.1 in Walsall, 4.2 in Wigan and in Salford, 4.3 in Liverpool, 5.6 in Cardiff, and 9.2 in Hanley. Measles caused a death-rate of 1.9 in Wallasey and in Liverpool, 2.1 in Walthamstow, 2.3 in Hull, 2.4 in Hastings and in West Bromwich, 2.5 in Hanley, 3.0 in Salford, 3.5 in Cardiff, and 3.8 in Newport (Mon.); scarlet fever of 1.1 in Liverpool and in Oldham, 1.2 in St. Helens, 1.6 in West Bromwich, and 2.0 in Burton-on-Trent; diphtheria of 2.5 in Hanley; whooping cough of 1.2 in Walsall and in Cardiff, and 3.0 in Tynemouth; "fever" of 1.3 in Nottingham; and diarrhoea of 1.5 in Merthyr Tydfil, 1.6 in Wolverhampton, and 4.2 in Hanley. One fatal case of small-pox was registered in Liverpool, but not one in any other of the seventy-six large towns. There were 17 cases of small-pox under treatment in the Metropolitan Asylums Hospitals on Saturday last, November 29th, against 14, 11, and 14 on the three preceding Saturdays; 4 new cases were admitted during last week, against 2 and 6 in the two preceding weeks. The number of scarlet fever patients in these hospitals and in the London Fever Hospital, which had been 2,000, 2,830, and 2,768 at the end of the three preceding weeks, had further declined to 2,761 at the end of last week; 362 new cases were admitted during the week, against 346, 285, and 249 in the three preceding weeks.

HEALTH OF SCOTCH TOWNS.

DURING the week ending Saturday last, November 29th, 897 births and 646 deaths were registered in eight of the principal Scotch towns. The annual rate of mortality in these towns, which had been 17.1, 16.4, and 15.7 per 1,000 in the three preceding weeks, rose again last week to 20.0 per 1,000, and exceeded by 0.9 per 1,000 the mean rate during the same period in the seventy-six large English towns. Among these Scotch towns the death-rates ranged from 12.5 in Perth and 13.9 in Leith to 21.9 in Edinburgh and 23.1 in Paisley. The mean death-rate in these towns from the principal infectious diseases was 1.8 per 1,000, the highest rates being recorded in Aberdeen and Greenock. The 293 deaths registered in Glasgow included 10 from whooping-cough, 2 from "fever," and 11 from diarrhoea. Two fatal cases of measles, 2 of whooping-cough, and 3 of diarrhoea were recorded in Edinburgh. Two deaths from measles, 2 from diphtheria, 2 from whooping-cough, and 2 from diarrhoea occurred in Aberdeen; 2 from diarrhoea in Paisley; and 2 from scarlet fever and 2 from whooping-cough in Greenock.

VACCINATION FEES.

WE referred in the BRITISH MEDICAL JOURNAL of October 18th, page 1289, to a proposition before the Lewisham Guardians to reduce the present scale of fees paid under contract to the public vaccinators of the union. The following letter upon the subject, signed by the six public vaccinators of the union, has, we are informed, been addressed to the Clerk to the Board:

"Dear Sir,—In reply to yours of the 27th ult., we beg to state that we are not prepared to accept any reduction of vaccination fees below those stated in our contracts with the guardians, of which 'a' and 'b' are the minimum allowed by the Act of Parliament. In respect of the so-called 'registration fee,' the guardians are probably unaware of the work and responsibility entailed for this fee of 1s. 8d., which includes the issuing and postage of a notice to visit, a visit at the house of the child by appointment, an examination of the child and postponement in case of unfitness, inquiry into the sanitary conditions and surroundings, and contact of child with any infectious disease, all of which are frequently repeated again and again for the single fee, separate certificates being required in each case to the various authorities interested.

"With the medical profession generally, we are desirous of seeing the clause in the Act providing for the visit to offer vaccination expunged, as being inconsistent with the dignity of our profession and tending as it does to lead to considerable friction in the working. We would like to point out that the present Act of Parliament is nearing its end, when further discussion will come with the new Act next year, and also that vaccination has now returned to its normal average."

The consideration of the letter by the Board of Guardians has, we are informed, been postponed.

PUBLIC VACCINATORS AND THEIR FEES.

E. A. A. writes: As public vaccinator in a country district the recent auditing of the guardians' accounts has brought to my notice in a practical manner the fact that for the primary vaccination of a child under 14 years of age at one's surgery no fee will be paid by the guardians, whereas for the revaccination of a child of the same age, namely, from 10 to 14 years, and under the same circumstances the full surgery vaccination fee is payable. Now, surely this is not reasonable, as the work entailed is precisely the same in both cases. Hence it comes to this that a child, say aged 13 years, coming to the surgery for primary

vaccination must, in order that the doctor may obtain a fee, be made to return to its own home to be there vaccinated, as should the doctor vaccinate the child at his surgery no fee will be paid by the guardians. This may be satisfactory to the ratepayers, but to say the least of it is unremunerative to the doctor.

INDIA AND THE COLONIES.

INDIA.

Report of the Imperial Bacteriologist, India, for the Year 1901-2.—The operations of the Imperial Bacteriologist, Dr. Lingard, are restricted to the diseases of animals, especially horses and cattle, and are carried on at Muktesar, in the Himalayas at an altitude of 7,500 ft. A branch laboratory is being built at Bareilly on the plains. Dr. Lingard's report indicates that important researches are being carried out regarding the preparation and use of protective serums against rinderpest, anthrax, surra, and other epizootics, while observations and experiments of a most interesting character are being carried out with reference to lymphangitis, epizootica, strangles, paralysis, influenza, and other diseases to which attention is drawn. Rinderpest protective serum has been found to lose power at high temperatures, and different breeds of cattle exhibit different degrees of immunity. Hill cattle are most susceptible both to rinderpest and anthrax infection, and require higher doses of protective serum. The laboratory works in connection with remount agencies, cattle farms, and provincial veterinary departments and schools. The output of serums issued for experiment and use in large and increasing, and the results are stated to be satisfactory. Veterinary assistants are received from the provinces, and trained in the methods of inoculation. The Government of India is entitled to high praise on account of these proceedings, which give such good promise of success, scientific and economic.

NEW SOUTH WALES.

Report of the Medical Officer of Health of Sydney for 1901.—The increase in the population was considerably greater than had been calculated in the estimates of the years immediately preceding, and therefore the birth and death-rates for those years appeared greater than they actually were. As an indirect result of the visitation of plague in 1900 a change for the better had been effected in the methods of sanitary administration, and a great deal of good work had been accomplished in the city, but the want of funds greatly hampered the local authorities in the full execution of the Public Health Act. This state of things it is hoped will be improved upon if the State Parliament pass the Public Health Amending Bill, which gives the Department of Public Health important powers in the direction of controlling dangerous epizootics and will also improve the position of the local sanitary authorities financially. Among other suggestions are more efficient house-to-house sanitary inspection, a better system of collection of house garbage, and a more thorough supervision of food supplies. The birth-rate for the metropolitan districts was 25.65, which was considerably less than the mean birth-rate for the preceding ten years, and for the city of Sydney only 20.50. The death-rate was 12.39 per 1,000; one of the smallest death-rates of any city containing over a quarter of a million of inhabitants. The rate is exactly the same as those for the years 1900 and 1899. There were 884 cases of scarlet fever notified during the year with a case fatality per cent. of 1.41. There were 439 cases of diphtheria notified, with a case fatality of 14.82 per cent. The number of cases of typhoid fever notified was 829, with a case fatality per cent. of 9.77. This was 154 cases fewer than in 1900, and 35 fewer than the average annual number for the three years preceding 1901. Of 627 deaths from tuberculous diseases which occurred during the year 516 were attributed to phthisis, 46 to tuberculous meningitis, and 65 to other tuberculous diseases. These figures are slightly higher than those of the previous year, and indicate a death-rate of 1.06 per 1,000. During the year the local authority of the City of Sydney has made the disinfection of dwellings in which deaths from phthisis have occurred a matter of routine. A by-law passed by the same authority prohibiting expectoration on the footways, and firmly enforced, has been another step in the right direction. Diarrhoeal disease caused 63 deaths, of which 61 occurred in children under 5 years of age, and 15 in infants under 12 months. Only two cases of bubonic plague occurred during the year. On three occasions small-pox has reached Sydney, coming from abroad by sea, but on each occasion the energetic action of the Department of Public Health has succeeded in checking the spread of the disease on shore. Cerebro-spinal meningitis caused 38 deaths; in the year 1900 there were 17 deaths from this disease.

Dairy Inspection: The condition of the dairies of the metropolis was unsatisfactory. Out of 537 dairies more than 12 per cent. had to be classified as "bad." The structural conditions were fairly satisfactory, but in the maintenance of cleanliness there was much fault to be found. Twenty-four cattle were condemned for tuberculosis, three for actinomycosis, and two for cancer. There appears to be an immense amount of adulteration practised on the milk supplies of Sydney. Not only are the consumers cheated by the addition of large quantities of water, but the use of chemical preservatives is very general among milk purveyors both in summer and winter.

Disinfection of Dwellings: During the year the local authority of the city of Sydney instituted the routine disinfection of dwellings from which cases of infectious disease had been notified. The agent employed was a 1 per cent. solution of formaldehyde. The disinfection was not confined to those dwellings only in which notifiable infectious disease occurred. The total number of dwellings disinfected during the year was 207; 87 after scarlet fever, 28 after diphtheria, 41 after typhoid fever, and 51 after deaths from phthisis.

A DISCUSSION ON medico-legal necropsies, to be held at the meeting of the Medico-Legal Society at 20, Hanover Square, W., on Tuesday, December 9th, at 8.30 p.m., will be opened by Dr. Harvey Littlejohn.

MEDICAL NEWS.

THE King, who is Patron of the Middlesex Hospital, has sent £100 as a first annual subscription to that hospital.

It is stated in the *New York Medical Journal* that Dr. Frederick G. Novy, of the Medical Department of the University of Michigan, has been invited by the British Government to proceed to India for the purpose of experimenting with the new intestinal antiseptic discovered by him, benzoyl-acetylperoxide, in the treatment of cholera and plague.

At a recent meeting of the Governors of the Cumberland Infirmary at Carlisle, with Sir Wilfrid Lawson in the chair, Dr. H. A. Lediard, on behalf of a number of subscribers, offered to the institution a Roentgen-ray apparatus, which was gratefully accepted.

ASSOCIATION OF MIDLAND RAILWAY SURGEONS.—At a meeting of Midland Railway surgeons held in Birmingham on November 27th it was decided to form an association on lines similar to those of the long-established Great Western Railway Provident Society Medical Staff. Midland Railway surgeons who wish to join are requested to communicate with Dr. Ffennell MacCarthy, 58, The Tything, Worcester.

On the evening of December 9th, in aid of the Cancer Charity of the Middlesex Hospital, a smoking concert, to which ladies will be admitted, arranged by the students of the hospital, will be held in the Queen's Hall. Over sixty well-known artistes have consented to appear. The chair will be taken by Mr. Henry Morris. Tickets—price 5s. each—may be obtained at the Queen's Hall Box-office, or from the Honorary Secretaries at the hospital.

COMMISSION ON ARSENICAL POISONING.—The Royal Commission on Arsenical Poisoning at several recent meetings have had under consideration a report furnished by the Assistant Commissioner, Mr. H. Hammond Smith, on the possible contamination with arsenic of articles of diet other than beer. Evidence from several manufacturers has been taken bearing on this subject. It is expected that the Commission will conclude taking evidence early in the ensuing parliamentary session, when their final report will be prepared.

BIRMINGHAM MEDICAL STUDENTS' ANNUAL DINNER.—The annual dinner of the Past and Present Students of the Queen's Faculty of Medicine in the University of Birmingham was held on November 28th, under the presidency of Mr. Priestley Smith. Over one hundred sat down to dinner, among those present being Sir James Sawyer, Dr. Foxwell, Mr. Bennett May, Mr. Jordan Lloyd, Mr. Haslam, Mr. Heaton, and Dr. Taylor. The chief guest of the evening was Mr. Isaac Bradley, H.M. Coroner for Birmingham. After the toast of "The King" had been duly honoured, the toast of "The Medical School" was then proposed by Mr. Bradley in a very able speech, which was responded to by the President. Mr. W. F. Haslam proposed the toast of "The Students, Past and Present," which was responded to by Dr. Sidney Barwise and Mr. F. T. H. Davies. A song—"The Faculty of Medicine"—which was composed by the President, and sung by him at the close of the evening, was greatly appreciated. In the intervals between the toasts other songs were given by Mr. F. W. Bywater, Mr. A. H. Wilson, and Mr. E. H. Price.

THE GARDEN CITY SCHEME.—The Garden City Association held a reception on November 28th in the Grafton Galleries, London. The membership of the Association, it is stated, has now increased to 1,700; lectures are being held in various parts of the kingdom; a similar association has appeared in Berlin, and the movement is spreading to other countries. The Pioneer Company, with a capital of £20,000, has been started, and we are informed that over £17,000 has been subscribed. Preliminary inquiries will then be made regarding sites. On this point no difficulty is anticipated, and it is thought that there will be no difficulty in finding manufacturers willing to migrate to Garden City. The necessary preliminaries being arranged, a larger company will be floated in order to purchase the site and inaugurate the city. For this the present estimate is £240,000. The subscribers will necessarily only be found among those who are willing to accept a

limited rate of interest, and who are interested in the social experiment. Mr. Ebenezer Howard and the other promoters of the scheme do not, of course, pretend that the erection of a garden city can solve the housing question; but maintain that it will be an endeavour to show that the development of industry is not necessarily associated with the present terrible condition of our town populations, and the presence of a single such city will be an object lesson provoking imitation.

THE INTERNATIONAL CONGRESS OF MEDICINE AT MADRID.—Mr. D'Arcy Power and Dr. Horton-Smith, the Honorary Secretaries of the British Committee of the Fourteenth International Congress of Medicine to be held next April at Madrid, inform us that the South-Eastern and Chatham Railway have made the following arrangements for the issue of reduced-fare tickets to members attending the Congress at Madrid next year: Members may apply (sending their card of membership) to Messrs. Cook and Son, Ludgate Circus, E.C., who will make all the necessary arrangements through to Madrid, or may act independently, in which case they must in the first place send their card of membership to Mr. Sartiaux, Ingénieur en Chef de l'Exploitation, Chemins de Fer du Nord, Paris, for endorsement. On the return of the card they can obtain at Victoria or Charing Cross Station, on presentation of the card of membership, a ticket to Paris at a reduced fare. Members who obtain tickets in this way must then rebook in Paris at the Orleans Station, and again present the card of membership, so as to obtain the reduction of 50s. These arrangements will come into force on April 1st, and the tickets will be available until May 15th.

NOTTINGHAM MEDICO-CHIRURGICAL SOCIETY.—At a meeting held on November 5th, Mr. J. Mackie, the President, who was in the chair, delivered an address entitled *Modern Science and Medical Practice*. He began by referring to the revolution in medical and surgical work and methods which followed Koch's discovery of the tubercle bacillus and the introduction of Listerian antiseptics. He alluded to the growing tendency which existed in many to be intemperately enthusiastic in modern and comparatively untried methods of treatment, and the facility with which dogmatic statements were made on inadequate observations. The speaker deprecated the frequency with which at the present time much of the material published in current literature was the record of immature observation, and not written primarily with the object of scientific advancement, but from motives of self-advertisement.

MANCHESTER CLINICAL SOCIETY.—At a meeting held on November 18th, Dr. T. A. Helme, the new President, in the chair, Dr. G. H. Lancashire read a paper on the *x-ray* treatment of skin diseases. After dealing with the history of the method and giving a brief account of its technique, the paper described more in detail its use for the cure of some varieties of lupus vulgaris and rodent ulcer. Some statistics were read relating to the treatment of the latter affection at the Manchester and Salford Hospital for Skin Diseases. Out of 25 cases of rodent ulcer treated during the last twelve months 8 had been discharged apparently cured, 13 were still progressing favourably under treatment, while 2 had been unsuccessful.—The discussion was afterwards carried on by Drs. Heywood, Taylor, D. Owen, and Rust, and Mr. E. T. Milner.—Dr. J. Price Williams reported a case of puerperal eclampsia in the seventh month of pregnancy treated by hypodermic injection of morphine without induction of labour; labour occurring naturally six days after the cessation of the eclampsia. Commenting on the differences of opinion as to the best method of controlling the convulsions, he suggested that the Society might undertake a systematic inquiry as to the utility of morphine for that purpose.

PATHOLOGICAL SOCIETY OF MANCHESTER.—At a meeting held on November 12th, Dr. H. A. G. Brooke, President, in the chair, Dr. Orr gave a lantern demonstration of the changes in the central nervous system in 6 cases of acute insanity. He described the different stages of the degenerative process found in the nerve cells of the cortex, spinal cord, and posterior root ganglia. Special attention was drawn to the fact that the majority of the cells affected showed a central chromatolysis, and the frequency with which the nucleus showed grave degenerative changes was also demonstrated.

Slices showing the atrophic process affecting the myelin sheaths in the lateral and posterior columns were also exhibited.—Dr. Ashby showed a lardaceous liver with syphilitic gummata from a girl aged 8 years.—Dr. F. C. Moore described the hepatic lesions met with in cases of arsenical beer poisoning.—Mr. Collier and Mr. Burgess showed a specimen of intestinal infarction resulting from embolism of an intestinal branch of the superior mesenteric artery. The symptoms observed during life were those of intestinal obstruction of a very acute character.—Mr. Burgess showed as card specimens (1) a recurrent malignant growth of the bladder; (2) large fibromyoma of the cervix uteri expanding the cervical canal, and removed by panhysterectomy.

SUBSIDENCE OF CHOLERA IN EGYPT.—During the weeks ending November 3rd, 10th, and 17th the cases of cholera in Egypt numbered 190, 144, and 54 respectively. The deaths from cholera during the same periods amounted to 179, 125, and 55. The Director-General of the Sanitary Department states that cholera as an epidemic may now be said to have ceased. Sporadic cases are no doubt to be expected, but a recrudescence is not anticipated. In Alexandria 18 cases of cholera were reported for the week ending November 17th, against 37 in the previous week, so that it is to be hoped that Alexandria in the course of a week or so will be free of the disease.

DEARTH OF ARMY SURGEONS IN AMERICA.—The Board in session at Washington has examined a large number of applicants for the forty vacancies that exist in the grade of assistant surgeon, but only five had been selected. The examinations are said by *American Medicine* to be so severe that only young practitioners far above the general average can pass, and unfortunately there are few inducements for men of this class to apply for the positions. The pay of the newly-appointed assistant surgeon, which is only about £320 a year, and the slowness of promotion, are given as reasons why many prefer the quiet routine of general practice to the strenuous work of the army surgeon.

MEDICAL VACANCIES.

The following vacancies are announced:

- BIRMINGHAM CITY ASYLUM.**—Assistant Medical Officer, unmarried, and not over 30 years of age. Salary commencing at £150 per annum, with board, apartments, and washing. Applications to the Medical Superintendent.
- BIRMINGHAM GENERAL HOSPITAL.**—Resident Surgical Officer. Salary, £100 per annum, with residence, board, and washing. Applications to the House Governor by December 27th.
- BIRMINGHAM QUEEN'S HOSPITAL.**—House-Surgeon from January 1st to November 30th, 1903. Salary at the rate of £50 per annum, with board, lodging, and washing. Applications to the Secretary by December 24th.
- BRIDGWATER INFIRMARY.**—House-Surgeon. Salary, £80 per annum, with board and residence. Applications to the Honorary Secretary, Mr. Edward Trevor, Bank Chambers, Bridgwater.
- BRIGHTON, HOVE, AND SUSSEX THROAT AND EAR HOSPITAL, Church Street, Brighton.**—Non-Resident House-Surgeon. Appointment for six months, but renewable. Salary at the rate of £75 per annum. Applications to the Secretary.
- CAMBRIDGE ADDENBROOKE'S HOSPITAL.**—House-Physician. Salary £20 per annum, with board, lodging, and washing. Applications to the Secretary, 23, St. Andrew's Street, Cambridge, by December 30th.
- CANTERBURY BOROUGH ASYLUM.**—Assistant Medical Officer, unmarried, and not over 30 years of age. Salary to commence £120 per annum, with furnished apartments, board, and laundry. Applications to the Medical Superintendent by December 11th.
- CARDIFF: UNIVERSITY COLLEGE OF SOUTH WALES AND MONMOUTHSHIRE.**—Demonstrator and Assistant Lecturer in Physiology. Salary, £120 per annum. Applications to the Secretary by December 8th.
- CENTRAL LONDON OPHTHALMIC HOSPITAL, Gray's Inn Road, W.C.**—House-Surgeon. Appointment for six months. Salary at the rate of £50 per annum, with board, residence, and laundry allowance. Applications to the Secretary by December 21st.
- CITY OF LONDON LYING-IN HOSPITAL, City Road, E.C.**—District Surgeon for South Tottenham. Applications to the Secretary by December 10th.
- COLCHESTER, ESSEX AND COLCHESTER HOSPITAL.**—House-Surgeon. Salary, £100 per annum with board, washing, and residence. Applications to the Secretary by December 20th.
- DERBYSHIRE ROYAL INFIRMARY.**—Honorary Surgeon. Applications to the Secretary, Royal Infirmary, Derby, by December 18th.
- DERBYSHIRE ROYAL INFIRMARY.**—Two Honorary Dental Surgeons. Applications to the Secretary by December 12th.
- DUDLEY GUEST HOSPITAL.**—Assistant House-Surgeon. Appointment for six months. Salary at the rate of £40 per annum, with residence, board, and washing. Applications to the Secretary by December 15th.
- EDINBURGH: ROYAL COLLEGE OF SURGEONS.**—Conservator of the Museum. Salary, £105. Applications to Mr. James Robertson, Clerk to the College, 54, George Square, Edinburgh by December 8th.
- EDINBURGH UNIVERSITY.**—Additional Examiner in Zoology. Applications to Secretary, University Court, by January 1, 1903.
- GRIMSBY AND DISTRICT HOSPITAL.**—Resident House Surgeon. Salary, £100 per annum, with board, lodging, and washing. Applications to the Honorary Secretary, St. Mary's Chambers, Great Grimsby, by December 9th.
- HERTFORDSHIRE COUNTY ASYLUM, Hill End, St. Albans.**—Junior Assistant Medical Officer, unmarried, and not over 30 years of age. Salary, £150 per annum, with board, furnished apartments, and washing. Applications to the Medical Superintendent by December 8th.
- HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.**—Resident Medical Superintendent. Salary, 100 guineas per annum, with board, residence, and £5 washing allowance. Applications to the Secretary by December 10th.

HOSPITAL FOR DISEASES OF THE HEART, 32, Soho Square.—Assistant Physician. Applications to the Secretary before December 15th.

HOSPITAL FOR WOMEN, Soho Square, W.—House Physician. Appointment for six months. Salary, £30. Applications to the Secretary by December 17th.

INFIRMARY FOR CONSUMPTION AND DISEASES OF THE CHEST—Two Physicians to Out-patients. Applications to the Secretary, 26, Margaret Street, Cavendish Square, W., by December 15th.

LINCOLN COUNTY HOSPITAL—Senior Male House Surgeon, unmarried and under 30 years of age. Salary, £100 per annum, with board, lodging, and washing. Applications to the Secretary by December 12th.

LIVERPOOL HOSPITAL FOR CANCER AND SKIN DISEASES—Anaesthetist. Ap- to the Secretary.

LIVERPOOL INFECTIOUS DISEASES HOSPITAL—Assistant Resident Medical Officer, unmarried, and not exceeding 30 years of age. Salary, £120 per annum, with board, washing, and lodging. Applications endorsed "Assistant Resident Medical Officer," to be addressed to the Chairman of the Port Sanitary and Hospital Committee, under cover to the Town Clerk, Municipal Offices, Liverpool, by December 15th.

MANCHESTER CORPORATION—Third Medical Assistant at the Moseley Fever Hospital. Salary, £120 per annum, with board and lodging. Applications endorsed "Appointment of Third Medical Assistant" to be sent to the Chairman of the Hospitals Subcommittee, Public Health Office, Town Hall, Manchester, by December 8th.

MANCHESTER ROYAL INFIRMARY—Resident Medical Officer at the Convalescent Hospital, Cheadle; unmarried, and not less than 25 years of age. Remuneration, £150 per annum, with board and residence. Applications to the General Superintendent by December 17th.

MIDDLESEX HOSPITAL CANCER RESEARCH LABORATORIES—Junior Pathological Assistant. Salary, £100 per annum. Applications to the Secretary-Superintendent by December 15th.

MONKWEARMOUTH AND SOUTHWICK HOSPITAL—House-Surgeon. Salary, £30 per annum, with board, residence, and laundry. Applications to the Secretary.

NORTHAMPTON GENERAL INFIRMARY—Assistant House-Surgeon, unmarried, and not under 25 years of age. Salary, £75 per annum, with furnished apartments, board, attendance, and washing. Applications to the Secretary by December 10th.

NORTH-EASTERN HOSPITAL FOR CHILDREN, Hackney Road, N.E.—Surgeon, must be F.R.C.S. Eng. Applications to the Secretary at the Office, 27, Clement's Lane, E.C., by December 8th.

NOTTS COUNTY ASYLUM, RADCLIFFE-ON-TRENT—Assistant Medical Officer, unmarried, and not over 31 years of age. Salary, £150 per annum, with furnished apartments, board, and washing. Applications to the Medical Superintendent by December 10th.

OLDHAM INFIRMARY—Junior House-Surgeon. Salary, £75 per annum, with board, residence, and washing. Applications to the Honorary Secretary by December 8th.

PLYMOUTH: SOUTH DEVON AND EAST ORNWALL HOSPITAL—Secretary, between 35 and 50 years of age. Salary, £300 per annum. Applications to be addressed to the Chairman and Committee at the Hospital by December 20th.

QUEEN'S JUBILEE HOSPITAL, Richmond Road, Earl's Court, S.W.—House-Surgeon. Appointment for six months. Board, laundry, and residence provided, and honorarium at the rate of £50 per annum. Applications to the Secretary by December 21st.

ROCHDALE INFIRMARY—Resident Medical Officer, unmarried. Salary, £100 per annum, with board, residence, and washing. Applications to the Honorary Secretary, R. W. Shaw, Esq., Southfield, Rochdale, by December 18th.

ROYAL COLLEGE OF PHYSICIANS OF LONDON—Milroy Lecturer. Applications to the Registrar, Pall Mall East, S.W., by January 8th.

ROYAL EYE HOSPITAL, Southwark, S.E.—Refraction Assistant. Applications to the Secretary by December 15th.

ROYAL FREE HOSPITAL, Gray's Inn Road, W.C.—Assistant Physician, must be for F. or M.R.C.P. Lond. Applications to the Secretary by December 15th.

ST. BARTHOLOMEW'S HOSPITAL, E.C.—Physician, must be F.R.C.P. Lond. (2) Surgeon, must be F.R.C.S. Eng. Applications to the Clerk by December 15th.

SHREWSBURY: SALOP INFIRMARY—House Surgeon. Salary, £100 per annum, with board, washing, and residence. Applications to the Board of Directors by December 10th.

SOUTHAMPTON INCORPORATION—Resident Assistant Medical Officer at the new Workhouse Infirmary, Shirley Warren. Salary, £100 per annum, with apartments, board, washing, and attendance. Applications endorsed "Resident Assistant Medical Officer" to be sent to the Clerk to the Guardians, Workhouse, Southampton, by December 15th.

SOUTHAMPTON: ROYAL SOUTH HANTS AND SOUTHAMPTON HOSPITAL—House-Physician. Salary, £100 per annum with rooms, board, and washing. Applications to the Secretary by December 15th.

STOKE-UPON-TRENT UNION—Resident Medical Officer of the Workhouse. Salary, £150 per annum, rising to £200, with board, washing, and furnished apartments. Applications to the Clerk to the Guardians, Union Offices, Stoke-on-Trent, by December 12th.

WESTERN GENERAL DISPENSARY, Marylebone Road, N.W.—(1) Senior House-Surgeon, unmarried. Salary, £100 per annum, with board, residence, and laundry. (2) Junior House-Surgeon, unmarried. Salary, £80 per annum, with board, residence, and laundry. Applications to the Honorary Secretary.

WHITTINGHAM, PRESTON, COUNTY ASYLUM—Junior Assistant Medical Officer, unmarried, and not over 30 years of age. Initial salary, £150 per annum, with furnished apartments, board, washing, and attendance. Applications to the Medical Superintendent.

WOLVERHAMPTON AND DISTRICT HOSPITAL FOR WOMEN—Surgeon to take Out-patients. Applications to the Chairman, Women's Hospital, Chapel Ash, Wolverhampton, by December 11th.

MEDICAL APPOINTMENTS.

BRYAN, H. J., M.R.C.S., L.R.C.P. Lond., appointed District Medical Officer of the Medway Union.

BRYSON, Miss I. S., M.B. Lond., appointed Assistant Medical Officer to the Camberwell Parish Infirmary.

BURGHARD, F., M.B., F.R.C.S., appointed Teacher of Operative Surgery at King's College, London.

CARLESS, A., M.B., F.R.C.S., appointed Professor of Surgery at King's College, London.

CHRYNE, W. Watson, C.B., F.R.S., F.R.C.S., appointed Professor of Clinical Surgery at King's College, London, vice Wm. Ruse, B.S., F.R.C.S., resigned.

FARRAR, M. Jun., M.R.C.S., L.R.C.P. Lond., appointed District Medical Officer of the St. Thomas Union.

HEGGS, T. Barrett, M.B., Ch.B. Aberd., appointed House-Surgeon at the Sussex County Hospital, Brighton.

JOYNES, Francis J., M.R.C.S. Eng., reappointed Medical Officer of Health to the Dursley Rural District Council.

MACDONALD, J. S., L.R.C.P. & S. Edin., appointed Professor of Physiology at Sheffield University College, vice C. F. Myers Ward, M.R.C.S., L.R.C.P. Lond., resigned.

MCNATEVER, T. G., M.D., C.M., M.R.O.P.E., appointed Pathologist and Assistant Medical Officer to the Hospital for Consumption and Diseases of the Throat and Chest, Manchester.

PETTER, T. M.D. Edin., F.R.C.S. Eng., appointed Medical officer to the First District of the Eastbourne Union.

ROPER, Arthur C., F.R.C.S. Edin., appointed Surgeon to the West of England Eye Infirmary, Exeter.

SHERREW, James, F.R.C. Eng., appointed Assistant Demonstrator of Anatomy at the London Hospital Medical College and Assistant Surgeon to the London Hospital.

SWENDEN, B. W., M.R.C.S., L.R.C.P. Lond., appointed Medical Officer for the West and North-West Districts of the Darlington Union.

TERRY, J., M.R.C.S., L.R.C.P. Lond., appointed District Medical Officer of the Daventry Union.

WOODMAN, W. J., M.R.C.S., L.R.C.P. Lond., appointed District Medical Officer of the Medway Union.

ST. THOMAS'S HOSPITAL—The following gentlemen have been selected as House Officers from Tuesday, December 2nd, 1902:

House-Physicians.—W. H. Harwood Yarred, B.Sc. Lond., L.R.C.P., M.R.C.S.; A. Mavorordato, L.R.C.P., M.R.C.S.

Assistant House-Physicians.—C. N. Sears, L.R.C.P., M.R.C.S.; A. E. Boycott, M.A., M.B., B.Ch. Oxon., B.Sc. Oxon.

Obstetric House-Physicians.—(Senior) F. J. Child, M.A., M.B., B.C. Cantab. L.R.C.P., M.R.C.S.; (Junior) G. A. C. Shipman, M.A., M.B., B.C. Cantab. L.R.C.P., M.R.C.S.

Clinical Assistants in the Special Department for Diseases of the Ear.—B. S. Jones, L.R.C.P., M.R.C.S.; S. G. Scott, M.A., M.B., B.Ch. Oxon.

Several other gentlemen have received extensions of their appointments.

DIARY FOR NEXT WEEK.

MONDAY.

Medical Society of London, 11, Chandos Street, Cavendish Square, W., 8.30 p.m.—Discussion on the Surgical Treatment of Haematemesis to be opened by Mr. Mayo Robson, and taken part in by Mr. H. Allingham, Mr. A. E. Barker, Mr. Mansell Moullin, Mr. A. M. Shield, and Mr. F. C. Wallis.

TUESDAY.

Royal Medical and Chirurgical Society, 20, Hanover Square, W., 8.30 p.m.—Dr. Edmund Cautley and Mr. Clinton T. Dent: Congenital Hypertrophic Stenosis of the Pylorus and its Treatment by Pyloroplasty. The paper will be fully illustrated by means of the epidiascope.

WEDNESDAY.

Dermatological Society of London, 11, Chandos Street, Cavendish Square, W., 5.15 p.m.—Demonstration of cases of interest.

Royal College of Physicians of London, 5 p.m.—Mr. Howard Marsh: The Brades Lecture on Infective Arthritis.

Sanitary Institute, Parkes Museum, Margaret Street, W., 8 p.m.—Discussion on Drain Testing, to be opened by Dr. Louis C. Parkes, followed by Mr. J. Osborne Smith and Mr. W. C. Tyndale.

Pharmaceutical Society of Great Britain, 17, Bloomsbury Square, W.C., 8 p.m.

THURSDAY.

British Gynaecological Society, 20, Hanover Square, W., 8.0 p.m. Mr. Stanmore Bishop: On Procidencia Uteri, with special reference to an Operation upon the Sacro-uterine Ligaments. Specimens will also be shown.

Ophthalmological Society of the United Kingdom, 11, Chandos Street, Cavendish Sq., W., 8.30 p.m.—Cases, etc., by Messrs. Mayou, Edridge-Green, Charles Blair, Bernard Potter, Ernest Maddox, Sydney Stephenson, N. C. Ridley, and E. T. Collins.

FRIDAY.

Society for the Study of Disease in Children, 11, Chandos Street, Cavendish Square, W., 5 p.m.—Discussion on Tuberculous Peritonitis, in which Dr. E. Cautley, Dr. James Barr, Dr. Theodore Fisher, Dr. G. A. Sutherland, Dr. Leonard Guthrie, and Mr. W. Watson Cheyne will take part.

Clinical Society of London, 20, Hanover Square, W., 8.30 p.m.—Mr. Stephen Paget: The Subcutaneous Injection of Paraffin in cases of Nasal Deformity. Dr. Walter Carr and Mr. Edward Loughton: Typhoid Fever; Perforation; Laparotomy; Death. Mr. Anthony A. Bowly, C.M.G.: A second case of Laparotomy for Perforation in Typhoid Fever; Recovery. Mr. H. J. Waring (introduced by Mr. A. A. Bowly): Five cases of Typhoid Perforation treated by Laparotomy.

South-West London Medical Society, Bellingbrooke Hospital, Wandsworth Common, S.W., 8.45 p.m.—Dr. C. O. Hawthorne: On the Diagnostic Value of the Visual Field.

POST-GRADUATE COURSES AND LECTURES.

Charing-cross Hospital, Thursday, 4 p.m.—Demonstration of Surgical Cases.

Hospital for Consumption and Diseases of the Chest, Brompton, S.W., Wednesday, 8 p.m.—Lecture on Excavation of the Lung and its Treatment.

Hospital for Sick Children, Great Ormond Street, W.C., Thursday, 4 p.m.—Lecture on Infantile Scurvy.

Medical Graduates' College and Polytechnic, 22, Chenies Street, W.C. Demonstrations will be given at 4 p.m. as follows:—Monday, skin; Tuesday, medical; Wednesday, surgical; Thursday, surgical; Friday, ear.

National Hospital for the Paralyzed and Epileptic, Queen Square, W.C.—Tuesday, 8.30 p.m.—Lecture.

Post-Graduate College, West London Hospital, Hammersmith Road, W.—Lectures will be delivered at 5 p.m. as follows: Monday, Iritis; Tuesday, Mental Diseases in Middle Life and Old Age; Wednesday, Ether Administration; Thursday, Fractures in and near the Shoulder-joint; Friday, Indigestion.

Westminster Hospital, Broad Sanctuary, S.W., Tuesday, 4.30 p.m.—Demonstration of Surgical 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.

BIRTH.

MARKS.—On November 26th, 1902, at Rose Bank, Mumbles, Glamorganshire, the wife of Leonard Freeman Marks, M.B. Lond., M.R.C.S., of a son.

MARRIAGES.

CANT-PINNEY.—On Wednesday, November 26th, at the Parish Church, Coleshill, Warwickshire, Arthur Cant, M.B., B.Ch., M.R.C.S., L.R.C.P., of Coleshill, to Ann Eliza Mary Dugby Pinney, only daughter of the Rev. J. C. Pinney, M.A., of Coleshill Vicarage. The ceremony was performed by the bride's father, the Rev. J. C. Pinney, M.A., assisted by the Rev. Baldwin Pinney, B.A., brother of the bride. The service was fully choral.

RICHARDS-KNOWLES.—On the 29th of November, at St. Saviour's, Westgate-on-Sea, by the Rev. Townsend Mylne, Vicar, assisted by the Rev. Howard Nixon, M.A., Vicar of St. Barnabas, East Dulwich, Joseph Stewart Richards, M.D., B.S., D.P.H., the Infirmary East Dulwich, to Hilda, third daughter of Walter Thomas Knowles, of Comberton, Westgate on Sea, and Holmleigh, S. Croydon.

DEATHS.

ARMINSON.—On November 27th, at his residence, Clifton Grove, Lytham, William Brown Arminson, M.D., in the 73rd year of his age. The interment took place at St. Cuthbert's, Lytham, on Monday, December 1st.

CALDWELL-STEPHEN.—On November 28th, at 54, Evelyn Gardens, S.W., George Caldwell-Stephen, M.D., L.R.C.P., D.P.H. Camb., in his 43rd year.