

In the second successful case I found at the operation that the peritoneal contents showed no organisms by film, and only two colonies of a large sarcina. The following organisms have been found in the 6 cases which gave a growth from the peritoneal contents:

	Times.
Large cocci	3
Micrococci	2
Torula	1
Bacillus coli	1
Sarcina	1
Other bacilli	2

I have not as yet been able to test the pathogenicity of the various organisms found in the peritoneal cavity in cases of perforated gastric ulcer. It seems to me that the initial pain and collapse of perforation of the stomach is, in all probability, due to the outpouring of a quantity of highly-irritating gastric juice, which has a chemical action on the sensitive peritoneal surface. Subsequently, as organisms are swallowed from the mouth, either in sputum or in food, these pass through the stomach wall at once before they can be acted upon by the gastric juice. It is more than likely that directly after perforation of a gastric ulcer occurs the stomach ceases to secrete gastric juice, as was seen in one of my cases in which, forty-eight hours after perforation, the stomach still contained undigested pork and potatoes that had been swallowed before perforation. The question of cure after operation depends largely upon the extent to which the peritoneal cavity has been invaded by organisms, rather than upon the length of time that has elapsed since perforation. Of course this question of time is important, in that it corresponds roughly to the extent of peritoneal infection. It will be seen, however, that in one of the cases which gave sterile growths from the peritoneal contents, the stomach had been perforated twenty-eight hours. Such a length of time might be considered to indicate almost certain death, yet the case recovered and the absence of organisms serves to explain the result.

As a matter of experience, we know that if a meal has just been taken prior to perforation, the prognosis is less favourable, owing, as we suppose, to the fact that peritoneal infection is more likely to follow. The comparative degree of sterility of the human stomach, and the non-pathogenicity of organisms found in that viscus serve to convince me that a general infection of the peritoneal cavity does not take place for some time after perforation occurs, unless a meal has just been taken. If the patient could be prevented from swallowing sputum or food, whenever the symptoms of perforated gastric ulcer occur, the risk of peritoneal infection would be delayed and perhaps obviated. This question of bacterial invasion of the peritoneum will receive more careful investigation on my part, especially in respect to the pathogenicity of the organisms found. The four cases of perigastric and periduodenal suppuration reveal the following organisms:

	Occasions.
Bacillus coli	2
Micrococci	2
Streptococcus pyogenes	1
A large coccus	1
Bacillus subtilis	1
Actinomyces	1

In conclusion, I wish to thank Professor Leith for placing his laboratory so willingly at my disposal, Professor Barling for the large quantity of clinical material from his private and hospital practice, and all my senior colleagues at the General Hospital for their courtesy in furthering my research.

## REFERENCE.

<sup>1</sup> BRITISH MEDICAL JOURNAL, December, 1902.

**BEQUESTS TO HOSPITALS.**—Under the will of the late Mrs. Esther Sarah Burnes, of Ladbroke Square, Notting Hill, £5,000 is bequeathed to the Samaritan Hospital for Women, £3,000 to the British Home and Hospital for Incurables, Streatham, and £2,000 to the Hospital for Incurables, Putney. The late Miss Mary Ann Young, of South Shields, left £11,000 to the Ingham Infirmary, a part for the endowment of a ward and the remainder for general purposes. The late Mrs. Elizabeth Peacock, of Pendleton, Salford, bequeathed £1,000 each to the Hospital for Sick Children, Pendlebury, to endow a cot in memory of her daughter, and to the Cancer Pavilion and Home, Manchester; £500 each to St. Mary's Hospital, Manchester, and the Northern Counties Hospital, and, subject to a life interest, £1,000 to the Salford and Pendleton Hospital.

## MEMORANDA:

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

#### A CASE OF TETANUS TREATED BY CHLORAL HYDRATE: RECOVERY.

On July 9th a man, aged 52, was admitted to the Union Infirmary suffering from inability to open his mouth. He was in a filthy state, and after being sponged was examined for bruises or wounds, tetanus having been suspected. Several old bruises were found on the legs, and were dressed with a lotion of biniodide of mercury (1 in 1,000), although none showed any signs of active inflammatory mischief. The next morning, however, he was groaning with pain, and had well-marked symptoms of tetanus. His jaws were tightly closed and he had great difficulty in swallowing fluids, which were given through a space left by a decayed tooth. His head could not be moved on his body, there was marked arching of the back, the legs were rigid and widely separated, and he was seized with painful spasms every two or three minutes, affecting chiefly the lower part of the trunk and legs. His heart was normal and his pulse full and regular. I ordered him chloral hydrate 3j in water as a draught. This lessened the number and severity of the spasms and made little change in the pulse. The drug was then given in gr. xx doses every four hours, with an occasional dose at the end of two hours when the spasms were severe (he had four such extra doses in all). This treatment reduced the number of spasms to about eighteen in the day, and by the fifth night the patient slept for several hours, while by the ninth day the spasms had ceased. Up to this time distinct relief from pain followed every dose of the drug, the patient often appealing for an extra dose. At the end of ten days the lower limbs were relaxed, but the abdominal wall was still rigid and the back arched, although not nearly so painful. About this time a scarlatiniform rash appeared on the back and front of the trunk, due to the administration of the chloral, and as the symptoms were much relieved the chloral was ordered to be given every six hours, but when this was done several spasms took place, and the drug was again given every four hours until the twelfth day. On that day the abdominal rigidity and arching of the back having disappeared, the drug was stopped; but a dose had to be administered every morning for the next five days, as without it the patient was unable to open his mouth for food. He had no such trouble in the latter part of the day. The treatment with chloral caused no bad symptoms, except the rash, which disappeared in four days. All through the illness the patient took nourishment well, although he was not able to get out of bed before the end of a month. His convalescence was aided by massage of all the muscles.

Hatfield.

ALEXANDER BINNING, M.B.

#### THE PROTECTIVE POWER OF VACCINATION.

RECORDS of single cases are not worth much, and fortunately the value of vaccination is based on very extensive evidence, but to instance how effectual efficient vaccination is in protecting from small-pox I cite the following. A patient admitted to hospital under my care in 1902 was a visitor, a young woman who had come to Southend with the incipient symptoms of small-pox. She had a baby aged 6 months with her. As no proper provision could be made for the baby outside, and an examination of its arm revealed three typical full-sized vaccination scars of a satisfactory nature, I took the baby into hospital with its mother. In spite of its tender age, and the concentrated poison of small-pox in which it lived at the hospital, it remained perfectly well—a striking testimony to the efficacy of vaccination in affording protection against small-pox during a most susceptible time of life.

J. T. C. NASH, M.D.,  
Medical Officer of Health, Southend-on-Sea.

#### COLCHICUM CORM IN ACUTE GOUT.

SHOULD any one be dissatisfied with the action of colchicum wine or tincture, let him try the corm itself powdered, and far better results will be obtained. Larger equivalent doses can be given without the undesirable effects, whilst with an equal amount the improvement in the condition will be much accelerated.

London, S.W.

D. DUNCAN.

## MEDICAL NEWS.

**MEDICAL MAGISTRATE.**—Dr. E. Boys Russell, of Lismore, has been appointed to the Commission of the Peace for the county of Waterford.

**THE Royal Hospital for Diseases of the Chest, City Road,** has been promised a donation of £2,000 towards the fund for a nurse's home and sanitary tower, provided that the balance required of £3,000 is subscribed by the end of next June.

**THE first annual dinner of the United Hospitals Clinical School, University of Liverpool,** will take place at the Adelphi Hotel, Liverpool, on Saturday, December 3rd, at 7.15 p.m.

**THE sixth annual dinner of the Medical Graduates' College and Polyclinic** will be held at the Trocadero Restaurant, London, W., on Wednesday, December 7th, when the chair will be taken by Dr. C. Theodore Williams, at 7 p.m. Ladies are admissible as guests. Further particulars can be obtained from Mr. Hayward Pinch, F.R.C.S., at the College, 22, Chenies Street, W.C.

**A MONUMENT OF HUMAN FOLLY.**—It is proposed to erect a monument to Father Kneipp in Vienna, and a site in the City Park has been selected for the purpose. It is said that the Municipality has promised a grant in furtherance of the scheme. It only remains for the enlightened administrators of the Imperial-Royal City to vote funds for statues to Hahnemann, Mesmer, Mother Eddy, and "Profit" Dowie.

**THE first scientific meeting of the Zoological Society of London** for the present session was held on November 15th, when a number of specimens were shown and described. The next meeting will be held on Tuesday next, at 8.30 p.m., at 3, Hanover Square, when, among other papers, a note will be read by Captain Richard Crawshay on the Field Natural History of the Lion.

**A ROVING MEDICAL COMMISSION.**—A Japanese imperial commission which has been studying the Health Departments of the principal cities of Europe is now in the United States. The members of the Commission are Professors Tanba, of the Department of Pharmacy; Takamine, of the Department of Chemistry; and Mortora, of the Department of Psychology, of the Imperial University of Tokio; and Dr. Sato, Chief Surgeon of the Hospital.

**DEFECTIVE AND EPILEPTIC CHILDREN.**—The Board of Education has issued a circular directing the attention of the local education authorities for Part III (Elementary Education) of the Education Act, 1902, to their powers as school authorities and to the provisions of the revised regulations dated July 11th, 1904. The powers of such authorities to provide for defective and epileptic children are set out, and particulars are given as to the arrangements which may be made between school authorities, and as to the charges to parents.

**At a meeting of the Council of the Metropolitan Hospital Sunday Fund** on November 22nd, a report was put in showing that the total collection for the year amounted to £63,064 19s. 10d., this sum including Mr. Herring's percentage contribution of nearly £12,000. Regret was expressed that the appeal made to the clergy in the home counties to support the fund more energetically had not been met, although these areas furnish about one-quarter of all the patients treated by the metropolitan hospitals.

**On November 19th Major Hautdeville Richardson** gave a demonstration of the working of his ambulance dogs on Wimbledon Common. The dogs are intended to accompany the stretcher-bearer parties, and work at a distance of about forty yards. They carry triangular bandages, four in each side of a waterproof canvas saddle bag; as could be seen on Saturday, they are trained to seek out the wounded and to attract the attention of the stretcher bearers. The system has proved so successful in many Continental armies that we propose to publish a fuller account in an early issue.

**On November 15th a meeting organized by the Infants' Health Association** was held at the Midland Hotel to promote the establishment of an infant milk dépôt in St. Pancras. The Earl of Mansfield was in the chair, and among those who addressed the meeting were Mr. E. R. P. Moon, M.P. for St. Pancras (North), Mrs. Garrett Anderson, Mr. W. H. Dickinson, Sir Lauder Brunton, and Dr. Sandwith. A resolution recommending the establishment of an infants' milk

dépôt was adopted, and Dr. Vincent, who spoke subsequently, indicated that the milk used would probably be modified on the plan recommended by Dr. Rotch, of Harvard University (BRITISH MEDICAL JOURNAL in 1902, vol. ii, p. 653).

**THE new specimens** which have been added to the museum of University College, London, during the past year, upwards of 120 in number, are now on view. They comprise a considerable number of preparations illustrating diseases of the kidney and of the breast. The series includes also the following specimens of interest:—Hypertrophic stenosis of the pylorus in an infant, primary sarcoma of the liver of a child, haemorrhagic pancreatitis, intestinal obstruction caused by an adherent appendix epiploica, fibroma of the round ligament of the uterus, deciduoma malignum, unruptured early tubal gestation removed by operation, and a specimen showing the left superior pulmonary vein terminating in the left innominate vein.

**THE KING'S HOSPITAL FUND.**—The Council of King Edward's Hospital Fund is anxious to raise the permanent income of the fund to £50,000 a year, of which sum it at present falls short by some £14,000. Last spring His Royal Highness the Prince of Wales announced that an anonymous donor had offered to place at the disposal of the fund an amount which would produce £4,600 per annum, on condition that by December 31st this year a further amount, which would produce the balance of £9,400, were collected. The Chairman of the Executive Committee has written to draw attention to this offer, in hope that the public will come forward and meet its terms, so that this great opportunity of placing the fund in a favourable position may not be lost. The hospitals, it is estimated, require an aggregate subvention from the fund of £150,000 annually. Last year £100,000 were distributed, but only by drawing nearly £19,000 from capital. This year, however, only £80,000 can be distributed, and, according to a statement last week by Sir Trevor Lawrence, one of the Committee of Distribution, at the Tallow Chandlers' dinner, 108 hospitals, large and small, have applied for assistance.

**NATIONAL DENTAL HOSPITAL.**—The Students' Annual Dinner of the National Dental Hospital was held at the Trocadero Restaurant, London, on November 19th. The chair was taken by Mr. Andrew Clark who, in proposing the loyal toasts, remarked that the President of the hospital was the Prince of Wales. In proposing the toast of "The National Dental Hospital and College," the Chairman explained how the hospital could lay claim to the title of "National," and proceeded to show that the dentist of the present time cannot be a mere mechanic, but must receive instruction in general medicine and surgery before receiving a necessary qualification to practise. He pointed out how the Government had at last realized the importance of good teeth, and referred to the recent order of the Army Council in regard to the supply of artificial teeth to recruits and soldiers. The army authorities were about to appoint dentists for the soldiers, and the Chairman concluded by referring to that part of the report of the Physical Deterioration Committee concerning the connexion the teeth had with general physical deterioration. The toast was replied to by Mr. Spokes, the Dean, who stated that there were so many students at the hospital from all parts of the world that it would claim to be the National Dental Hospital in fact as well as name. The principal prize-winner, as they would hear later, was a New Zealander. After the speech delivered by Mr. Spokes the prizes were distributed, Mr. G. H. Parkinson of New Zealand receiving the medals for dental anatomy, for theoretical and practical dental mechanics, for operative dental surgery, and for dental histology, and the Rymer medal. Professor A. S. Underwood, of King's College, proposed the toast of "The Past and Present Students," which was responded to by Mr. Rose and Mr. Cooke. Mr. Harry Rose submitted the toast of "The Visitors," which was acknowledged by Professor Spencer, who commented with indignation on the report he had read in the daily press of a judge who was credited with having declared that "it was not unknown by many people that they came away from a dentist's rooms with a great number of unnecessary holes made in their teeth and gums." He considered that such a charge against an honourable profession was a calumny. Mr. Goadby proposed "The Health of the Chairman," and thanked him for the assistance he had given in establishing the dental section at the last meeting of the British Medical Association at Oxford. After the Chairman had suitably replied the proceedings terminated.

**KING'S COLLEGE CHAPEL, ABERDEEN.**

The ancient chapel of King's College has once more been enriched by a stained glass window, a gift of the Baroness de Garbs in memory of her husband, who, as Stephen Garbs, graduated at King's College in 1824. The window is in the north wall of the chapel, and is one of those which retain the original mullions and tracery. The presentation of the window took place at the close of the ordinary Sunday service on November 20th, the Baroness de Garbs in person handing it over, and Principal Lang accepting it on behalf of the University.

**THE POPULATION OF ABERDEEN.**

The returns of the Registrar General for Scotland for the quarter ending September 30th again demonstrate that Aberdeen is creeping slowly ahead of Dundee in the matter of population, and that now it takes place as third city in Scotland. For the above quarter there were 411 marriages in Aberdeen as compared with Dundee's 356; the number of births in Aberdeen was 1,190, in Dundee 1,163; the number of deaths in Aberdeen was 595, in Dundee 695. The death-rate in Aberdeen was, with the exception of Leith, the lowest among the eight principal towns in Scotland, being 14.4, while that of Dundee was 16.9, Glasgow 16.6, Edinburgh 14.6. The population of Aberdeen at the middle of 1904 was estimated at 164,124, and that of Dundee at 163,535, but it is evident from the figures above quoted that the last quarter has still further sent Aberdeen ahead.

**THE PARLIAMENTARY REPRESENTATION OF THE UNIVERSITIES OF GLASGOW AND ABERDEEN.**

We are requested to state that Professor Sir William J. Sinclair, M.A., M.D. Aberd., of Manchester, has been elected Chairman of the Universities of Glasgow and Aberdeen Conservative and Liberal Unionist Association, and of the Committee of Graduates for promoting the candidature of Professor William R. Smith, M.D.

**UNIVERSITY OF GLASGOW.**

Mr. Wyndham, Secretary for Ireland, was installed as Lord Rector of Glasgow University on November 22nd, and delivered an address on the development of the State, in which he inveighed against the cosmopolitan ideal, and after investigating the teachings of history came to the conclusion that pride of race, provided the facts of race were studied and understood, was a better and sounder incentive than pride of nationality.

Lord Kelvin will be installed as Chancellor of the University on Tuesday next in the Bute Hall.

**SMALL-POX IN SCOTLAND.**

The outbreak of small pox in Scotland, which has lasted so long and which has been so widespread, shows a still further decline. In the period from 1st to 15th November inclusive the number of cases intimated to the Local Government Board was 8, distributed over the four counties of Forfar, Lanark, Renfrew, and Stirling, and occurring in the six different towns or burghs in these counties. There were two cases in Coatbridge, two in Stirling, and one in each of the following: Dundee, Airdrie, Govan, and Barrhead. For the first time for long no new locality was infected with the disease.

**ASSOCIATION NOTICES.****NOTICE OF QUARTERLY MEETINGS OF COUNCIL FOR 1905.**

MEETINGS of the Council will be held on Wednesdays, January 18th, April 19th, July 5th and October 18th.

**ELECTION OF MEMBERS.**

ANY candidate for election should forward his application upon a form, which will be furnished by the General Secretary of the Association, 429, Strand. Applications for membership should be sent to the General Secretary not less than thirty-five days prior to the date of a meeting of the Council.

GUY ELLISTON, *General Secretary*.

**LIBRARY OF THE BRITISH MEDICAL ASSOCIATION.**

MEMBERS are reminded that the Library and Writing Rooms of the Association are fitted up for the accommodation of the members in commodious apartments, at the office of the Association, 429, Strand. The rooms are open from 10 a.m. to 5 p.m. Members can have their letters addressed to them at the office.

**BRANCH MEETINGS TO BE HELD.**

**BATH AND BRISTOL BRANCH.**—The second ordinary meeting of the session will be held at the Museum, Bath (North Parade entrance), on Wednesday evening, November 30th, at 8 p.m., Mr. R. J. H. Scott, President, in the chair. The following communications are expected:—Newman Nield, M.D.: Anaemic infarct of the liver. C. J. Whitby, M.D.: Notes on the sanatorium treatment of phthisis and its present limitations. C. R. Wood, M.D.: Automobiles in medical practice. W. McD. Ellis, M.D.: A case of bilharzia. J. B. Dunlop, M.B., and W. M. Beaumont: Specimen of cerebellar tumour.—W. M. BEAUMONT, NEWMAN NIELD, Honorary Secretaries.

**BATH AND BRISTOL BRANCH: TROWBRIDGE DIVISION.**—A meeting of this Division will be held at the George Hotel, Frome, on Friday, December 2nd, at 3.30 p.m., when the ordinary business of such meeting will be transacted, and at 3.30 p.m. an address will be delivered by A. W. Sikes, M.D., B.Sc., M.R.C.P., F.R.C.S., etc., Pathologist, Queen Charlotte's Hospital, London, entitled, *Electricity in the Treatment of Disease*—(1) white, red, and blue electric light; (2) ultra violet light; (3) constant currents, sinusoidal currents; (4) induced currents, high tension, and high-frequency currents; (5) x rays. There will be an exhibition of apparatus by Mr. Dean, illustrating the chief ways of applying high frequency, x rays, ultra violet and sinusoidal currents. The Division will be pleased to welcome any practitioner from the counties of Wilts or Som. rset, whether members of the Association or not.—JOHN TUBB THOMAS, Secretary, Trowbridge.

**METROPOLITAN COUNTIES BRANCH: WANDSWORTH DIVISION.**—An ordinary meeting of this Division will be held at Crichton's (opposite Clapham Junction Station) on Thursday, December 8th, at 9 p.m. Agenda: (1) Minutes; (2) correspondence; (3) questions; (4) consideration of various matters referred from Medico-Political Committee; (5) adoption of model Ethical Rule Z; (6) paper by A. P. Beddard, M.R.C.P.: Remarks on some methods of treatment by drugs; (7) other business. Members are invited to bring their medical friends.—E. ROWLAND FOTHERGILL, Honorary Secretary, Torquay House, Southfields, S.W.

**MIDLAND BRANCH: LINCOLN DIVISION.**—A meeting will be held on Thursday, December 1st, in the Guildhall, Lincoln, at 3.30 p.m.—J. S. CHATER, Honorary Secretary.

**SOUTH-EASTERN BRANCH: CANTERBURY AND FAVERSHAM DIVISIONS.**—A combined meeting of the above Divisions will be held, by kind permission of Dr. G. C. Fitzgerald, President of the Canterbury Division, at the Chartham Asylum, on Thursday, December 1st. Agenda:—2.0 p.m. Each Division will meet separately to confirm the minutes of last meeting. 3.10 p.m. Combined meeting, Dr. Fitzgerald presiding. (1) Time and place of next meeting. (2) The Chairman, Borderland Cases. (3) Other business. Light refreshments will be kindly provided by the Chairman. A billiard match between the two Divisions—or as may be arranged. Dr. Fitzgerald will be pleased to show members and their friends round the wards, etc., between 2 p.m. and 3 p.m. If a sufficient number of members send their names to the Honorary Secretary, Canterbury Division, by November 28th, arrangements will be made for a brake to leave Canterbury East Station for Chartham Asylum at 2.30 p.m. Fare, 2s. return. Trains leave Sittingbourne, 1.55; Faversham, 2.6. Returning from Canterbury East, 6.35—for Faversham and Sittingbourne.—WM. GOSSE, A. R. HENCHLEY, Honorary Divisional Secretaries.

**SOUTH-EASTERN BRANCH: ISLE OF THANET DIVISION.**—The next meeting of this Division will be held at the Granville Hotel, Ramsgate, on Thursday, December 1st, at 4.15 p.m., Mr. C. H. Tamplin in the chair. Agenda:—Dr. Wm. Ewart, M.D., F.R.C.P. (Senior Physician to St. George's Hospital and to Belgrave Hospital for Children): The Principles of Treatment of Pneumonia. Mr. A. M. Watts will move a resolution with regard to the payment of medical men for school certificates. Tea will be served at 4 p.m. Dinner will be served at 7 p.m. in a private room of the hotel; 5s. each, exclusive of wine. Members wishing to dine are requested to inform the secretary at the commencement of the meeting. All members of the South-Eastern Branch are invited to attend these meetings and to introduce professional friends, but will not be entitled to vote on Divisional questions.—HUGH M. RAVEN, Honorary Divisional Secretary, Barfield House, Broadstairs.

**SOUTH MIDLAND BRANCH: BEDFORD AND HERTFORDSHIRE DIVISION.**—A meeting of this Division will be held at the Bedford County Hospital on Tuesday, December 6th, at 3 p.m. Agenda: The minutes of the last meeting. Letters and communications. Dr. Lovell Drage (Hatfield) will read a paper on the treatment of tuberculosis by subcutaneous injections of 10 per cent. solution of cinchamate of soda in glycerine. Dr. R. H. Coombs, Bedford (Representative of this Division at the Annual Representative Meeting), will give notes on the recent Representative Meeting at Oxford. Mr. R. H. Kinsey, Bedford (member of the Council of the British Medical Association), will read a paper on some medico-political points recently brought before the Association. Dr. Conning Hartley (Bedford) will read notes on an unusual form of appendicitis. Mr. Gifford Nash (Bedford) will read notes on a case of ruptured interstitial pregnancy. Dr. H. Skelding (Bedford) will make a few remarks on the milk supply in villages, with a view to a further communication. Dr. H. Savory (Bedford) will relate an episode in drug taking. Any other business.—H. SAVORY, Honorary Secretary, 2, Harpur Place, Bedford.

**SOUTHERN BRANCH.**—A general meeting is appointed to be held at the South-Western Hotel, Southampton, on Friday, December 2nd, at 3 p.m. Agenda:—Mr. MacKeith will move: That this meeting of the Southern Branch considers that the British Medical Association should afford all possible facilities to towns and districts for starting and carrying on local provident medical services embracing all forms of club practice; that an official from the head office should be sent, whenever desired, to co-operate with local medical men in the inauguration of such services, and that model rules and regulations for their working should be drafted by the Medical secretary, and supplied from the head office on request. Papers will be read as follows:—Mr. Briscoe: That fractures in the insane are not common and do well. Dr. Kempe: A series of cases of thyroidectomy. Dr. Childs: A case of excision of the spleen. Other

communications (titles not yet received) are expected. Any member who may wish to introduce a matter of professional interest, or to read a paper, or to submit cases or specimens, is requested to furnish the undersigned with the nature and title of the communication as soon as possible. Dinner will be provided at the Hotel at 6 o'clock, the charge for which, not including wine, will be 7s. 6d. a head.—H. J. MANNING, Honorary Secretary, Laverstock House, Salisbury.

**SOUTHERN BRANCH: PORTSMOUTH DIVISION.**—The next meeting of this Division will be held at 130, Commercial Road, Portsmouth, on Tuesday, December 6th, at 3.45 p.m.—J. G. BLACKMAN, Honorary Secretary, Poplar House, Kingston Crescent, Portsmouth.

## SPECIAL CORRESPONDENCE.

### BERLIN.

*Statistics of Berlin Medical Institutes.—A Floating Sanatorium.—The Finsen Light Treatment.—Enteric Fever and its Prevention.*

SOME interesting statistics, bearing on the wide field of action covered by the medical institutes of the Berlin University, have lately been published. During the year 1903-4 Von Bergmann's surgical clinic admitted 1,858 new patients, 166 patients having been taken over from the previous year. The total number of nursing days was 56,490. During the year 179 patients died, and 1,693 were dismissed, so that on April 1st, 1904, the remaining number of in-patients was 152. In the surgical policlinic 21,320 cases (12,455 male and 8,865 female) were treated. Von Michels's clinical eye hospital received 1,041 in-patients (449 male and 592 women and children); 15,405 cases (7,273 of them male) were treated in his policlinic. Lucae's clinic for diseases of the ear had 227 in-patients and 9,469 out-patients. In Olshausen's lying-in hospital 1,065 births were registered, and in his obstetrical policlinic help was given in 3,288 cases; 913 gynaecological cases were treated as in-patients, the number of operations performed being 533; 7,329 new out-patients and more than 6,000 old cases received gynaecological treatment; 96 necropsies were performed. In Senator's medical policlinic 8,120 new cases were treated; of these, 3,593 were men, 3,203 women, and 1,324 children. C. Fraenkel's policlinic for throat and nose diseases treated 5,861 new patients (3,075 male and 2,786 female); Hoffa's policlinic of orthopaedic surgery 2,956; M. Wolff's policlinic for consumptives 9,432, 4,768 of whom were men, 4,664 women and children. Brieger's hydropathic policlinic treated 2,552 new out-patients and 318 in-patients (229 men and 89 women). In G. Schütz's institute, 2,755 persons were treated by mechano-therapeutic appliances (Swedish gymnastics); and in Zabłudowski's massage policlinic, 1,466 new cases (857 male and 609 female) were treated, as well as 120 cases taken over from the previous year. The dental policlinic was visited by 7,667 patients.

For the use of convalescents and debilitated persons not rich enough to afford a private yacht, but willing to pay a good price for comfortable accommodation and special attendance at sea, the Hamburg-American Steamship Company is at present fitting up one of its large Atlantic liners—the *Fürst Bismarck*, as a floating sanatorium. Professor Schwaimger is to be medical director, and will "personally conduct" the first cruise in Mediterranean waters next May. All infectious diseases are to be rigidly excluded. There seems no reason to doubt that this new departure in convalescent hospitals, financed and managed by one of the greatest maritime companies, with all modern hygienic appliances at its disposal, will prove a success.

A lady, who wishes to remain anonymous, has presented to the University of Berlin a complete set of Finsen apparatus, and funds for the gratuitous treatment of a certain number of needy lupus patients. This makes the second apparatus in the university's possession, but more are urgently needed, and it is to be hoped that the generous donor may find imitators before long.

A high Government official, Geheimrath Schneider, has been appointed "Imperial Commissioner for the combat with enteric fever" in the south-west district of the German Empire, and has entered on residence in Saarbrücken. His first work will be to enter into communication with the provincial and local authorities with a view to concerted action. Germany has been visited by severe epidemic outbreaks of typhoid and enteric this year, and in the face of the scandalous state of things disclosed by the lawsuit against the Gelsenkirchen Waterworks, it is high time that power should be given to the Imperial Board of Health (the "Reichsgesundheitamt") to examine and if necessary to order alterations where such are found necessary.

### MANCHESTER.

*Opening of a Jewish Hospital.—Mr. Whitehead on Teeth.—Medical School Dinner.*

THE Manchester Victoria Memorial Jewish Hospital in Cheetham was formally opened on November 17th. It is the first of its kind in the city, and has been established to meet the difficulty caused by the isolation of Jews when in an ordinary hospital.

Mr. Walter Whitehead distributed the prizes to the successful students of the Victoria Dental Hospital on November 21st. In his address Mr. Whitehead had something to say about the degeneracy of the Anglo-Saxon race in respect to the teeth. The teeth of the present generation in this country are not, he said, as perfect as those of previous generations. The teeth of natives of this country, especially of the county of Lancashire, are not as sound as those of aliens domiciled, or even the children of aliens born in this land. Defective teeth, Mr. Whitehead stated, must be an important factor in producing a deterioration in physique. Caries of the teeth meant that the individual carried about everywhere an incubator for bacteria. To drain, trap, and ventilate a house for such a man was waste of money. He polluted the air, contaminated the food he ate, and was in fact living in a sewer, and his mouth was "like unto a cage of unclean birds." Mr. Whitehead was not sure that the increase in the number of cases of cancer of the stomach might not in a measure be due to irritation of that organ as a consequence of imperfectly-masticated food.

To mark an important epoch in the history of the Medical School of Manchester it has been decided to hold a dinner in the Whitworth Hall of the University on Thursday, December 8th, when the Earl of Derby will preside. The year 1904 marks the evolution of the University of Manchester as a separate and independent University, the adoption of the great scheme for rebuilding the Royal Infirmary, the amalgamation of St. Mary's Hospital and the Southern Hospital for Diseases of Women and Children, and the opening of the new public health laboratories in connexion with the University. The Committee, therefore, hopes that many old students and graduates will be able to attend.

## CORRESPONDENCE.

### THE CENTRAL BRITISH RED CROSS COUNCIL.

SIR,—The Central British Red Cross Council desires to bring the very important question of the organization of the voluntary aid resources of this country prominently before the public, and to make an appeal for funds with the object of extending and developing Red Cross organization on a scale commensurate with the requirements of the country. Her Majesty Queen Alexandra is President, and the Council is constituted as follows:—

Representatives of the National Society for Aid to the Sick and Wounded in War.	
" "	of the St. John Ambulance Association.
" "	of the St. Andrew's Ambulance Association.
" "	of the Army Nursing Service Reserve.
" "	of the Admiralty, and
" "	of the War Office.
Chairman ...	Viscount Knutsford, G.C.M.G.
Hon. Treasurer ...	Sir John Furley, C.B.
Hon. Secretary ...	Major T. McCulloch, M.B., Deputy Assistant Director-General, A.M.S.

The Central British Red Cross Council was started in January 1899, with the full approval of the War Office, and is now officially recognized by all Foreign Chancelleries as the central body authorized to deal with Red Cross matters throughout the Empire. The functions of the Council may be stated shortly as follows:—

1. To act as the recognized medium of communication with the Red Cross organizations of other countries.
2. To be the medium of official communication between the Naval and Military authorities and voluntary aid societies and their branches.
3. To promote the extension and organization of voluntary aid resources throughout the Empire.

The lessons of the past have shown that arrangements not preconcerted or systematized beforehand in time of peace must necessarily be imperfect under the sudden emergencies of war. We have learned from previous experience not only that, in presence of a state of war, money subscriptions, donations in kind, and offers of personal services have always been freely given, and that an appeal to the public has invariably

## CHARITY THAT BEGINS AT HOME.

SIR,—In the BRITISH MEDICAL JOURNAL of November 5th you published a letter from an ingenious correspondent, "Vindex," on medical charities, in which he called attention to the fact that of 240 London practitioners who subscribed for the entertainment of our French *confrères* only 68 are subscribers to the British Medical Benevolent Fund and 98 subscribers to Epsom College. Being the President of the Society for Relief of Widows and Orphans of Medical Men, I also have been induced to compare the French subscribers with our list of members, and find that 25 only have joined the society.

The Society for the Relief of Widows and Orphans of Medical Men was founded in 1788, and has £100,000 invested. Members must, at the date of their election, live within twenty miles of Charing Cross, and they pay an annual subscription of two guineas for twenty-five years only.

The widow or orphan of any person who was at his decease a member of the society, and had been so for three years immediately preceding his decease, is eligible to receive relief from the funds.

The widow of a member who has no certain income or provision, exceeding altogether the yearly value of eighty pounds, is eligible to receive, half-yearly in advance, such relief from the society as the Court of Directors shall determine.

The widow of a member who is left with a child or children under 16 years of age entirely or in part dependent on her, and whose certain income and provision does not exceed altogether the yearly value of fifteen pounds for each child, in addition to the eighty pounds, is eligible to receive such additional assistance, half-yearly, in respect of each child under 16 years of age as the Court of Directors shall determine.

From November, 1793, to December 31st, 1903, the sum of £175,443 19s. 6d. had been distributed in ordinary relief amongst 270 widows and 347 children, comprised in 284 families relieved, besides other kinds of relief.

The Court of Directors meets for the election of new members on the second Wednesday in the months of January, April, July, and October.

The Secretary attends at the office of the society, 11, Chandos Street, Cavendish Square, W., every Wednesday and Friday afternoon, from four to five o'clock.

May I venture to call the attention of London and suburban practitioners, and especially the younger members, to the advantages offered them by this society, and thank you by anticipation for inserting this letter?—I am, etc.,

London, W., Nov. 23rd.

CHRISTOPHER HEATH.

## THE INSURANCE OF MOTOR CARS.

SIR,—In the issue of the BRITISH MEDICAL JOURNAL of October 22nd, you have an annotation on the Insurance of Motor Cars, and you therein very wisely warn your readers to have a care in their dealings with fire insurance companies. From a recent attempt on my part to insure my car against fire with a well-known company, I think your warning is justified. It seemed to me that the bargain which the company were willing to complete, would be largely a one-sided affair.

There is another way out of the difficulty, of which perhaps some of your readers may not be aware. That is to insure in Lloyds a sufficient sum of money to cover the value of the car against its destruction by fire. I have just done that with my car, and the policy is so worded that if my car is burnt completely up during the next twelve months, the cause of fire being either intrinsic or extrinsic, that is, on the car or from without, in any place in England, I shall receive a certain sum of money: that sum of money will be sufficient to buy me a new car like my present one, with all its accessories. In the case of partial damage, the underwriters will make good the loss. The depreciation of the car during the twelve months, does not enter into the bargain at all. I shall be pleased to put any of your readers into communication with my insurance broker, who put the business through for me, if they care to write me privately.—I am, etc.,

27, Belsize Park, Hampstead, N.W.

LEWIS G. GLOVER.

## THE ALLEGED INCREASE OF SYPHILIS.

SIR,—In an article on syphilis at the Cape, which appears in the BRITISH MEDICAL JOURNAL of November 19th, it is stated that "a correspondent—Mr. Pernet—has pointed out that since the South African war syphilis is on the increase in London." It would probably interest many of your readers to hear something about the evidence on which your correspondent's statement is based.—I am, etc.,

London, W., Nov. 21st.

ARTHUR COOPER.

## OBITUARY.

ACHILLE VINTRAS, M.D. (ST. AND.) M.R.C.S.,

Senior Physician to the French Hospital, London.

THE funeral of Dr. Vintras, Médecin-en-Chef de l'Hôpital Français London, took place on November 15th at the Brompton Cemetery, being preceded by a service at Notre Dame de France, Leicester Square. There was a very large attendance, and Monsieur Paul Cambon, the French Ambassador, came over from Paris expressly to be present. At the cemetery he spoke some words of touching affection and remembrance. There were also present the only son of the deceased, Dr. Louis Vintras, the medical and surgical staff of the hospital, the General Committee, and many others.

Dr. Vintras was the founder of the French Hospital, and its welfare was his one thought. He died at Brighton on November 9th at the Convalescent Home connected with the hospital, which his energies and influence also founded. His health failed perceptibly after a bad attack of influenza last year, and he did not feel himself equal to taking part last month in entertaining the French doctors and surgeons on their visit to London, although he managed to receive them on their visit to the French Hospital. His last wish was to be taken to the French Hospital after his death, and this wish was carried out, his body lying in state during November 14th, surrounded by the numerous wreaths and crosses sent by friends and colleagues.

Dr. Vintras was born in 1830, near Caen, in Normandy. He studied in Paris and afterwards in London—at St. Mary's Hospital—and on obtaining the diploma of M.R.C.S. in 1858 became one of its first house-surgeons. He had a large practice amongst his own countrymen, and only retired a few years ago. He held many honours, being Officier de la Légion d'Honneur, and Commander of the Lion and Sun of Persia.

Dr. Vintras contributed to the medical journals both at home and abroad, and was an authority on the mineral waters and watering stations of France. He was greatly beloved by all those connected with him, both in his work and in his private life, and his decease leaves a blank which will not be easily filled.

WE have to announce the death of Dr. WILLIAM COX NEVILLE of Dublin, who died at his residence there on November 18th of pneumonia. He graduated at the University of Dublin in 1878, and soon after devoted himself to the study and practice of gynaecology. His work in this department was of a very high order, and twenty years ago he was looked upon as the most promising man of his time. The hope of his friends was not fulfilled. He early fell into ill-health, and soon disappeared from the practical work of the profession. A few years ago he felt sufficiently recovered to make a fresh start, this time taking up pathology. His mental qualities seemed to be as bright as ever, but he had lost touch with his old associations, and never recovered the position which he had been obliged to abandon. His death is very sincerely mourned both by those who knew him in earlier days and admired his many unusual gifts, and by those who, in his later effort, were able to value those qualities which would have received a great success had the fates been kinder.

## UNIVERSITIES AND COLLEGES.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

ANNUAL MEETING OF FELLOWS AND MEMBERS.

THE Annual Meeting of Fellows and Members of the Royal College of Surgeons of England was held at the College in Lincoln's Inn Fields on November 17th, with the President of the College, Mr. J. Tweedy, in the chair.

## Report of Council.

Some difficulty was experienced in commencing the business of the meeting in consequence of there not being a quorum present, but eventually a quorum was declared to be present, and the meeting was commenced by Mr. Tweedy making a short statement in regard to the report of the Council for the period from August 4th, 1903, to August 1st, 1904. An abstract of this report was published in the BRITISH MEDICAL JOURNAL on October 29th (p. 1197.)

Mr. Tweedy explained that the report of the Council was merely placed before the meeting, and that he would be glad to make any explanation in regard to the meaning of the report if any one wished, but that he could not discuss the



policy of the Council of the College in connexion with the report before them.

Dr. G. Danford Thomas asked in regard to the report to the Council on the relations of the medical profession to the coroner's court under what circumstances the matter had come before the Council.

Mr. Tweedy explained that the Council had received a letter from the London County Council asking the College to nominate certain pathologists to conduct *post-mortem* examinations in certain cases at a coroner's court. The Council did not feel themselves at liberty to send the list of names as suggested and nominated a Committee to consider the relations of the medical profession to the coroner's court.

In reply to Mr. D. Vinrace, Mr. Tweedy stated that the annual meetings were held on the initiative of the Council and could, he believed, be at any time intermitted. The Members of the College, whatever might be their aspirations, were not the governing body. The Council was the properly constituted governing body, and no one outside the Council could have a voice in any legal sense in determining the policy of the College. The Council were extremely pleased to see the Members and Fellows, and to have their advice and recommendations, which were carefully considered by the Committee of the Council and then considered again by the Council as a whole. The Fellows had no more voice in the affairs of the College than the Members in such a meeting as the present, but the Fellows could influence the policy of the College by electing those whom they desired to be on the Council.

Mr. George Brown then made some remarks on the registration of medical and dental students and commented on the possibility of the provincial examining bodies refusing to register their students, but Mr. Tweedy reminded him that the Council of the College had not yet come to any decision on the point.

#### *The Title of "Doctor."*

Mr. T. G. Horder then moved the following resolution:—That the Council be asked to take the necessary steps in conjunction with the Royal College of Physicians to ensure that all persons who pass the conjoint examination shall be legally entitled to call themselves "Doctors."

He observed that Members of the College laboured under a disability in not being able to call themselves "Doctors." He suggested that the Council should remedy this grievance by making a change in their charter, or by helping the British Medical Association in their laborious efforts to pass the Medical Acts Amendment Bill.

This was seconded by Mr. F. W. Collingwood, who asked why the holder of the degree of M.B. should have the courtesy title of "Doctor" whilst it was denied to the Members of the College.

Mr. Tweedy explained how the Council had taken many steps and had endeavoured for a long time to bring about some change in the matter. He detailed what had been done by the Council since 1857, and doubted whether the Council would be any more successful now than it was then.

Mr. Brown stated that no legal powers existed to prevent any registered medical practitioner from calling himself "Doctor." He suggested that the College of Physicians should withdraw their by-law forbidding their Licentiates to call themselves "Doctors."

The resolution was then put and carried unanimously.

#### *The Council and Members.*

The following resolution was carried with one dissentient. It was proposed by Mr. Joseph Smith, seconded by Mr. Brown, and supported by Mr. Laurence (Northampton):—

That this meeting considers the reply of the Council to the resolutions passed at the last annual meeting of Fellows and Members to be most unsatisfactory. In view of the repeated refusal of the Council to accede to wishes of the Members, expressed in meetings to which they have been annually summoned for twenty years, this Meeting emphatically repudiates the claim of the Council to represent the Members, and regards its attitude in this question as not convincing to the great majority of the Body Corporate.

#### *Coroners and the Medical Profession.*

Dr. G. Danford Thomas then moved the following:—That the report of the Committee of the Council on "The Relations of the Medical Profession to the Coroners' Courts" is unsatisfactory, and that this meeting regrets that the Council did not see their way to make an independent enquiry into the matter, with the assistance of some Fellows and Members having intimate knowledge of the subject.

The report did not show that any inquiry had been made in regard to the relations of the medical profession and the

coroners' court. The London County Council had endeavoured to enforce the alterations it desired in the law on candidates for the office of coroner by making them sign a paper agreeing to these suggestions; many of those were contrary to law, and some were so ridiculous that the London County Council had found it necessary to modify them. Dr. Danford Thomas said that the suggestion of the London County Council "that every case of death, after surgical operation, should be reported to the coroner, with the view to preliminary enquiry, and, if necessary, the holding of an inquest," was due to the influence of the notorious Society that so greatly objected to operations on animals, and held such strong ideas that hospitals were used for experimental purposes on human beings. The inspiration for that clause came from that well-known Society, and it was a monstrous suggestion from the London County Council that the best and ablest of our surgeons should be haled before a coroner and cross-questioned for using skill and experience in trying to save some poor patient's life. Dr. Danford Thomas concluded by stating that the Council of the College had not really touched on the question, and said that much could be done if the matter was properly inquired into and a clear opinion expressed on the subject.

After Mr. Cornish had seconded the motion and Mr. Haslip had given a clear statement of the unsatisfactory way in which the London County Council had attempted to deal with the matter, Mr. Tweedy explained that the report in question had only been received by the Council and stood merely as a record.

Mr. Tweedy then submitted the resolution of Dr. Danford Thomas, which was carried, and the proceedings terminated with a vote of thanks to Mr. Tweedy for presiding.

#### UNIVERSITY OF OXFORD.

##### *Professor Osler.*

WILLIAM OSLER, M.D., F.R.S., Regius Professor of Medicine, has been elected to a Studentship at Christ Church.

##### *Exemption from Greek.*

The statute whereby it is proposed to release candidates who offer themselves for the Final Honour School of Mathematics, or of Natural Science, from examination in the Greek language in Responsions, and to substitute an examination in either the French or the German language, and in a subject in mathematics or in natural science, will be promulgated in a congregation of the University on Tuesday, November 29th.

##### *College Grants to University.*

The President and Fellows of Magdalen College have offered the following grants to the University:

1. A grant of £250 per annum for each of the years 1904 and 1905 for the purpose of payment of scientific assistants at the University Museum.
2. A similar grant of £250 per annum for each of the years 1904 and 1905 to the Bodleian Library for the purpose of increase of staff. And the College proposes, if possible, to make provision for the continuance of these grants in the future.

##### *Chair of Colonial History.*

One of the Rhodes trustees (Mr. Alfred Beit) has announced his intention of endowing a professorship, lectureship, and an annual prize essay to encourage and provide for the study and teaching of British Colonial History in the University.

#### UNIVERSITY OF LONDON.

##### *FACULTY OF MEDICINE.*

At the meeting of the Faculty of Medicine to be held at the University at 5 p.m. on Tuesday, December 6th, Mr. H. W. Page has given notice that he will move the following resolution:

That a Committee be appointed to consider and report to the Faculty as to the best means by which teaching and research in the advanced subjects of the medical curriculum can be promoted in the schools of the University by the action of the University.

#### UNIVERSITY COLLEGE, LONDON.

Notice has been given of an application to Parliament in the ensuing session for an Act to transfer University College, exclusive of University College Hospital, the medical school, and the boys' school to the University of London, and to dissolve or provide for the dissolution of the College. The Bill provides that the Senate of the University shall make statutes and regulations for the management of the College and for carrying on the work of the hospital, the medical school, and the boys' school.

##### *CHARING CROSS HOSPITAL MEDICAL SCHOOL.*

*Distribution of Prizes.*—Sir Squire Bancroft on November 23rd presented the prizes, medals, scholarships and certificates to the successful students of the Charing Cross Hospital Medical School. Mr. H. F. Waterhouse, the Dean of the School, read his annual report, which stated that the new biological laboratory, the Curator's room and the physical laboratory, had proved of great benefit to the school. The new surgical block or hospital would, it was hoped, be opened next year, but the operating theatres awaited furnishings and fittings. Dr. Mitchell Bruce has been elected consulting physician to the hospital, and Dr. F. W. Mott has taken his place at physician. The number of new students who had joined was 75, and Mr. Waterhouse said he believed he was correct in stating that only one other medical school in London could this year congratulate itself upon any material increase in the number of new medical students, whilst in some there had been a marked diminution. The distribution of the prizes then followed, the Epsom Scholarship being awarded to Mr. N. G. Salmon, the

Livingstone Scholarship to Mr. R. H. H. Jolly, and the University Scholarship to Mr. W. D. Keyworth. The Governor's Clinical Gold Medal was awarded to Mr. J. W. Evans, and Mr. W. S. Fenwick took the Huxley Medal.

Sir Squire Bancroft then gave an address to the students in which he offered them a few words of sympathy and encouragement. Whenever he was asked the smallest favour by a member of the great profession of medicine he considered it a privilege to be allowed, by granting the request, to repay in some slight degree a fragment of the debt which those who belonged to the precarious calling which he himself had followed, owed to the physicians and surgeons throughout the land. All actors were grateful to the Prince of Wales for the generous words he had uttered at the meeting of the King Edward Hospital Fund in acknowledging what he termed the frequent substantial and unassuming help derived by the London hospitals from the generous efforts of the theatrical profession. One of the compensations of the flight of time was the privilege enjoyed by those who were in advancing years of giving advice and warning to young people, so that they should avoid the dangers in the path they had to tread. They started with the priceless gift of youth, and they were also endowed with hope that sprang eternal in the human breast. There was the further advantage of "opportunity," which he believed knocked at every one's door, and he hoped when it reached them that they would be ready to utilize their chance. Sir Squire Bancroft concluded his witty and eloquent address by narrating a story adorned with the moral that if a medical man did not take care to be cheerful his patients might mistake him for an undertaker.

#### UNIVERSITY OF ABERDEEN.

The closing of the Register and the publication of the *Students' Handbook* permit of the compilation of an interesting table showing the number of male and female students attending the University during 1904-5, as compared with Session 1903-4:

Faculties.	Years.	Male.	Female.	Total.
Arts	1903-4	245	129	374
"	1904-5	237	137	374
Medicine	1903-4	305	17	322
"	1904-5	324	10	334
Science	1903-4	62	3	65
"	1904-5	60	3	63
Law	1903-4	36	—	36
"	1904-5	30	—	30
Divinity	1903-4	14	—	14
"	1904-5	14	—	14
Total	1903-4	662	140	811
"	1904-5	665	150	815

From these figures it appears that there is an increase of 4 made up of 3 men and 1 woman. In Arts the totals are the same, but the number of men has decreased by 8, while the number of women has increased by the same number. In Medicine there are 19 more men this year, but 7 fewer women—a total increase, therefore, of 12. The most interesting facts brought out by these statistics have regard to the number of women students. In Medicine we have seen that the numbers have dropped considerably.

In Arts the figures are even more interesting and instructive. At one time it appeared that in a few years the women students would predominate at King's, but with the class now entering the relative proportions have been considerably altered:

	1903-4.			1904-5.		
	Men.	Women.	Total.	Men.	Women.	Total.
First Year ...	59	56	115	80	50	130
Second Year ...	71	30	101	52	41	93
Third Year ...	72	26	98	59	26	85
Fourth Year ...	34	13	47	36	18	54
Fifth Year ...	9	4	13	10	2	12

From this table it will be seen that in this year's Bajan class the men predominate by 30, while last year they were only 3 ahead. Of 56 women who entered last year 15 have not returned, and of 59 men 7 are wanting this year. This would tend to show that women more than men are in the habit of coming to college for one year only. Another point of interest, especially in regard to the combination of the Arts and Medical curricula, is that of 93 third-year men (Tertians) of last year only 54 came up this year as Magistards, demonstrating the large proportion that now finish the Arts curriculum and graduate M.A. in three years.

#### CONJOINT BOARD IN IRELAND.

The examinations indicated below have resulted in the success of the following candidates:

*Third Professional: Passed in All Subjects*—A. P. Barrett, M. D. Healy, C. W. O'Keefe, J. Prendiville, C. H. Waddell, and R. Welpy.  
*Completed Examination*—L. A. Andrews, C. J. Bergin, T. S. Blackwell, J. Brooke, W. J. Connolly, R. F. O'T. Dickenson, T. A. Fisher, C. Gordon, J. J. Hogan, J. McQuillan, W. Roche, W. Sheahan, E. Smith, J. R. Talbot, N. R. Usher, J. J. Vasquez, and G. F. Wright.  
*Final Examination: Passed in All Subjects*—J. R. P. Allin.  
*Completed Examination*—M. Ambrose, E. C. Byrne, H. A. Cecil, S. Clare, F. X. Costello, H. B. Evans, P. E. Harrison, M. C. O. Hurly, E. C. Jennings, R. W. D. Leslie, M. J. Lochrin, V. H. MacSwiney, E. C. Mulligan, J. C. Murphy, T. J. O'Donnell, B. H. Peters, J. Pratt, S. H. Robinson, A. J. Swanton, and E. Walsh.  
*D.P.H.*—J. A. Jones (with honours), S. A. Kirby, F. Willmot, J. Wood, T. J. Wright.

#### TRINITY COLLEGE, DUBLIN.

MICHAELMAS TERM, 1904.

The Michaelmas examinations have resulted in the success of the following:

*Anatomy and Institutes of Medicine*.—H. J. Keane, H. D. Woodroffe, A. J. T. M'Creery, J. C. Baker, F. O'B. Kennedy, L. V. Hunt, J. G. G. Moloney, H. P. Hart, H. Allport.  
*Physics and Chemistry*.—A. H. Laird, J. Gray, J. B. Jones, W. E. A. Moore, W. R. Allen, R. D. FitzGerald, J. H. Morton, C. J. Grene, H. R. Kenney, J. D. K. Roche.  
*Botany and Zoology*.—H. de C. Dillon, H. S. Sugars.

#### Final Examination in Medicine—Section A.

The following candidates have satisfied the Examiners:

R. S. Oldham, J. du P. Langrishe, J. C. P. Beatty, F. R. Coppinger, J. W. Tomb, R. B. Jackson, T. O. Graham, T. H. Peyton, F. O'B. Ellison, T. J. Cobbe, H. D. Drennan, E. Gibbon, M. P. Leahy, T. L. de Courcy, J. H. Elliott, D. F. Torrens, B. G. Brooke, D. M. Corbett, R. Holmes, J. Murdoch, J. E. M'Farlane, E. D. Caddell, F. Casement, J. P. R. Poch, G. E. G. Vickery, J. C. A. Ridgway.

#### SOCIETY OF APOTHECARIES OF LONDON.

The following is a list of the successful candidates at the November examinations:

*Surgery*.—H. Archer (Sections I and II), H. H. R. Bayley (Section I), H. R. Grellet (Section I), E. R. Neukirch, E. H. Price (Sections I and II), J. H. Wolfe (Sections I and II).  
*Medicine*.—H. Archer (Sections I and II), H. H. R. Bayley (Sections I and II), E. F. Hoare (Sections I and II), H. M. Jones (Section I), A. R. Paterson, H. M. Waller, J. H. Wolfe (Sections I and II).  
*Forensic Medicine*.—A. Archer, H. H. R. Bayley, A. Bernfeld, A. R. Paterson, T. R. Roberts, C. A. Sampson, J. H. Wolfe.  
*Midwifery*.—J. A. Davies, G. P. K. Grey, E. F. Hoare, M. C. Vivian, J. J. Winn.

The diploma of the Society was granted to Messrs. H. Archer, E. F. Hoare, E. R. Neukirch, and E. H. Price.

## MEDICO-LEGAL AND MEDICO-ETHICAL.

#### POLICIES OF LIFE ASSURANCE.

In two cases of recent date certain questions have arisen in connexion with the interpretation of policies of life assurance which are of interest to the medical profession. As a general rule, insurance companies are slow to avail themselves of a technical defence in order to avoid payment on a policy. They, however, insert clauses to prevent imposition; and the following cases serve to show that such clauses will be strictly enforced by the courts.

In a case which was heard by the Lord Chief Justice, an action had been brought to recover a sum of money alleged to be due on a policy. The policy contained the usual clause to the effect that the statements made to the company in the usual form and in the declarations to the medical officer formed part of the contract. The answers given by the deceased were as follows: (a) Have you ever met with an accident? No. (b) Have you consulted or been attended by any physician or medical practitioner regarding your health in the past five years? No. (c) Have you ever had any local or other disease, personal injury, illness, or infirmity? No. The declaration was: "I hereby declare that the above answers and each of them are and is true, and also that these answers and each of them, together with the statements and answers in the accompanying application for assurance, shall be the basis of the contract between me and the defendants." The policy was taken out on September 30th, 1903, and the assured died on November 21st, 1903. The claim was disputed at the Birmingham Assizes (July, 1904) before a special jury, and the defendant company called evidence to show that in 1901 the deceased had sustained a severe injury to his thumb, for which he was medically attended for five or six weeks. Again, in July, 1903, the deceased was attended for "water on the knee," caused by an injury sustained owing to a fall on the pavement. Dr. Reynolds, the medical officer of the defendants, stated, according to the report of the case which appeared in the *Times*, that "the class of injury described would be regarded by medical men for insurance purposes as resulting from accident, as they indicated a serious condition of the brain." We confess we do not quite understand this evidence ourselves. Whatever its meaning, the special jury who tried the case found that the questions had been answered correctly. In giving his considered judgement, however, the Chief Justice ignored the jury's finding, and gave judgement for the defendant. He said: "Looking at the authorities cited, I think it is established that the question of materiality is not to be considered in connexion with the issue whether the questions have been correctly answered. I have been pressed with the consideration that these contracts of life insurance are, like other insurance contracts, *uterrime fidei*, and people who answer the questions are not to be judged as to what is of importance." His Lordship also referred to the following passage in a judgement pronounced some years ago in a similar case: "I mean, however, to express my opinion distinctly to this effect, that an insurance office challenging the policy after the death of the assured on the ground of untrue answers to queries and untrue declaration made by him regarding his health and habits of life, undertakes a heavy onus, to the discharge of which it must be strictly held. I do not go the length of saying that gross and wilful falsehood must be proved. But, first, the falsehood must be clear, and on a subject which is, or reasonably may be, material to the risk; and, secondly, if not wilful, it must be inexcusable in this sense, that it consists in a blameably reckless or careless assertion or omission of which an honest man, giving ordinary attention to the matter in hand, would not have been guilty, and which, in fairness to the office which was deceived, cannot be treated or passed over as immaterial or trifling."

Having regard to the decision under notice, it is clear that a person who desires to take out a policy, should make a clean breast of everything. The maxim: "When in doubt, tell the truth," is one which it is the height of policy to act upon. It is quite possible that if the assured in this case had made mention of both the accidents which he had sustained his life would have been accepted at the same premium.

In another recent case (*Ellinger v. Mutual Life Insurance Company*), which came before the Court of Appeal, a claim was made by creditors of

## MEDICAL VACANCIES AND APPOINTMENTS.

## VACANCIES.

*This list of vacancies is compiled from our advertisement columns, where full particulars will be found. To ensure notice in this column advertisements must be received not later than the first post on Wednesday morning.*

- BIRMINGHAM AND MIDLAND EYE HOSPITAL.**—Senior House-Surgeon. Salary, £85 per annum.
- BRIGHTON: SUSSEX COUNTY HOSPITAL.**—(1) House-Physician; (2) Second House-Surgeon. Salary, £70 per annum. (3) £80 per annum.
- CARDIFF INFIRMARY.**—1. Resident Medical Officer. Salary, £130 per annum. (2) Two Assistant House-Surgeons. Salary at the rate of £80 per annum.
- CHORLEY: RAWCLIFFS HOSPITAL.**—House-Surgeon, resident. Salary, £100 per annum.
- GUILDFORD: ROYAL SURREY COUNTY HOSPITAL.**—Resident House-Surgeon. Salary, £100 per annum.
- DUBLIN: DR. STEVENS'S HOSPITAL.**—(1) House Surgeon; resident. Salary, £100 per annum. (2) Pathologist, £35 per annum.
- DUBLIN: ROYAL HOSPITAL FOR INCURABLES, Donnybrook.**—Resident Medical Officer. Salary, £120 per annum.
- HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.**—Resident Medical Superintendent. Salary, 100 guineas per annum.
- JERSEY GENERAL DISPENSARY AND INFIRMARY.**—Resident Medical Officer. Salary, £120 per annum.
- LIVERPOOL DISPENSARIES.**—Assistant Surgeon; resident. Salary, £10 per annum.
- LONDON HOSPITAL, Whitechapel, E.**—Medical Registrar. Salary, £10 per annum.
- METROPOLITAN HOSPITAL, Kingsland Road, N.E.**—Assistant Surgeon.
- PLYMOUTH: SOUTH DEVON AND EAST CORNWALL HOSPITAL.**—Assistant House-Surgeon. Salary at the rate of £50 per annum.
- READING: ROYAL BERKSHIRE HOSPITAL.**—Ophthalmic Surgeon.
- ST. PETER'S HOSPITAL FOR STONE, Henrietta Street, W.C.**—Six Out-patient Clinical Assistants.
- STIRLING DISTRICT ASYLUM, Larbert, N.B.**—Assistant Medical Officer; resident. Salary, £150 per annum.
- VICTORIA HOSPITAL FOR CHILDREN, Chelsea.**—House-Physician. Appointment for six months. Honorary £100 per annum.
- VIRGINIA WATER, HOLLOWAY SANATORIUM.**—Junior Assistant Medical Officer (Lady); resident. Salary, £150, rising to £200 per annum.

## APPOINTMENTS.

- BOYCOTT, Arthur Edwin, M.B., B.Ch.Oxon.** Assistant Bacteriologist at the Lister Institute of Preventive Medicine.
- BROWN, R. G., M.B., B.S.Aberd.** Resident Assistant Medical Officer, Lambeth Parish Infirmary.
- MUIR, J. C., M.D.Cantab. B.C.,** Medical Superintendent of the St. George's Infirmary, Fulham Road.
- REY, Jules F., M.B.C.S., L.R.C.P.Lond., L.D.S.Eng.,** House-Surgeon to the Royal Brompton and West Hants Hospital.
- SUGDEN, F. W. B.,** District Medical Officer of the Hemsforth Union.
- SYMES-THOMPSON, H. B., M.A., M.D.Cantab., M.R.C.P.Lond.,** Assistant Physician of the Royal Hospital for Diseases of the Chest, City Road, E.C.
- TYSON, Wilson, M.B., B.C.Camb.,** Surgeon to the Lowestoft Hospital.

## DIARY FOR NEXT WEEK.

## MONDAY.

- Medical Society of London, 11, Chandos Street, Cavendish Square, W., 8.30 p.m.**—Papers:—Mr. D. J. Key: Pyrexia, Duodenal Ulcer and its Treatment. Dr. Charles Bolton: Primary Heart Failure as the immediate Cause of Death in Acute Diphtheritic Toxaemia.
- Odontological Society of Great Britain, 20, Hanover Square, W., 5 p.m.**—Mr. T. H. Kellock: Denervation on Actinomycosis. Mr. R. Denison Pedley: Paper on the Relationship between Dental and other Diseases.—Papers and Specimens.

## TUESDAY.

- Royal College of Surgeons of England, Lincoln's Inn Fields, 5 p.m.**—The Bradshaw Lecture:—Mr. Mayo Robson: Cancer and its Treatment.

## FRIDAY.

- Laryngological Society of London, 20, Hanover Square, W., 5 p.m.**—Cases and Specimens.
- Society of Anaesthetists, 20, Hanover Square, W., 8.30 p.m.**—Resumed discussion on the Vernon-Harcourt Inhaler. Dr. Dudley Buxton, Sir Victor Horsley, and Messrs. Silk, Low, MacCardie, Harvey Hillard, Bakewell, and Crouch will take part.
- West London Medical-Chirurgical Society, West London Hospital, Hammersmith, W., 8.30 p.m.**—Papers:—Dr. A. E. Russell: The Diagnosis of Acute Abdominal Disease.—Dr. C. H. Fennell: Juvenile General Paralysis.

## POST-GRADUATE COURSES AND LECTURES.

- Brompton Hospital for Consumption and Diseases of the Chest.**—Wednesday at 4 p.m., The Treatment of Pneumothorax and Pyopneumothorax.
- Central London Throat and Ear Hospital.**—Wednesday, 5 p.m., Practical Demonstration on the Larynx.
- Hospital for Sick Children, Great Ormond Street, 4 p.m.**—Thursday, Infantile Scoury.
- Medical Graduates' College and Polytechnic, 22, Omeles Street, W.O.**—The following clinical demonstrations have been arranged for next week at 4 p.m. each day: Monday, Skin; Tuesday, Medical; Wednesday, Surgical; Thursday, Surgical; Friday, Eye. Lectures at 5.15 p.m. each day will be given as follows: Monday, Injuries to the Spine and Spinal Cord; Tuesday, Emergencies in Nose, Throat and Ear Practice; Wednesday, Whitlow and Suppurations in the Hand; Thursday, Earache, its Causes, Diagnosis and Treatment.
- Mount Vernon Hospital for Consumption, Central Out-patient Department, 7, Fitzroy Square, W.**—Thursday, 5 p.m., Congestion of the Lungs.
- National Hospital for the Paralysed and Epileptic, Queen Square, W.C.**—Tuesday, 3.30 p.m., Myasthenia Gravis; Friday, 3.30 p.m., Optic Neuritis.
- North-East London Post-Graduate College, Tottenham Hospital, N.**—Tuesday, 4.30 p.m., Mania and Melancholia.
- Post-Graduate College, West London Hospital, Hammersmith Road, W.** The following demonstration have been arranged for next week at 5 p.m. each day: Monday, Practical Surgery; Tuesday, Injuries to Spine and Spinal Cord; Wednesday, Practical Medicine; Thursday, Intestinal Ulceration; Friday, Skin Cases.
- Samaritan Free Hospital for Women, Marylebone Road, N.W.**—Thursday, 3 p.m., The Treatment of Dysmenorrhoea.

## 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.

- ALLFREY.**—On November 16th, at 11, The Green, Marlborough, the wife of Frederick Henry Allfrey, M.A., M.B., B.C.Cantab., M.R.C.S., L.R.C.P., of a daughter.
- MCGINN.**—On November 17th, at 27, Chesepot Road, Newport, the wife of Patrick J. McGinn, L.R.C.P., and S.I., L.M., of a son.
- WATSON.**—On November 14th, at 47, Mount Pleasant, Tunbridge Wells, the wife of G. Trustram Watson, M.A., M.B., B.C., F.R.C.S., of a daughter.
- WOOLLEY.**—On November 17th, at Ansty, near Leicester, the wife of Thomas F. Woolley, M.R.C.S., L.R.C.P., of a daughter.

## LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

COMMUNICATIONS respecting Editorial matters should be addressed to the Editor, 2, 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, 421, 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, 421, Strand, W.C., on receipt of proof.

CORRESPONDENTS who wish notice to be taken of their communications should authenticate them with their names—of course not necessarily for publication.

CORRESPONDENTS not answered are requested to look at the Notices to Correspondents of the following week.

MANUSCRIPTS FORWARDED TO THE OFFICE OF THIS JOURNAL CANNOT UNDER ANY CIRCUMSTANCES BE RETURNED.

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

TELEGRAPHIC ADDRESS.—The telegraphic address of the EDITOR of the BRITISH MEDICAL JOURNAL is *Atiology, London*. The telegraphic address of the MANAGER of the BRITISH MEDICAL JOURNAL is *Articulate, London*.

TELEPHONE (National).—GENERAL SECRETARY AND MANAGER, 2630, Gerrard. EDITOR, 2631, Gerrard.

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.

M. would be glad to know where a medical man can learn massage.

G. A. P. wishes to hear of a good school for a boy, aged 15, who has emphysema following asthma.

J. B. would like to know where vibrating chairs (useful in cases of paralysis agitans) can be procured, and in what medical papers they have been referred to.

ABER. (who writes from Lancashire) asks where a girl (four years) suffering from extroversion of the bladder could be sent to be looked after. She has been operated on several times, but the constant dribbling produces sores. Only a small sum could be paid.

LANCS. asks for advice as to treatment for a "chap" in the centre of the lower lip of a young lady. It is painful, but she is more worried by the disfigurement. All sorts of applications have been tried, but it will not permanently heal.

## TREATMENT OF ACUTE ANTERIOR POLIOMYELITIS.

M.B. writes: An adult had an attack of acute anterior poliomyelitis six weeks ago. Some improvement has taken place but there is still a good deal of muscular pain. Does this contraindicate the use of massage and electricity?

## ETHYL CHLORIDE AND ETHYLFORM.

C. asks as to the safety of the pure "ethyl chloride" as compared with the combination "ethylform" (ethyl chloride and bromide with methyl chloride).

\*.\* There are no reliable statistics upon this point. The degree of safety of ethyl chloride probably lies between nitrous oxide gas and ether. The other body, according to physiological research, is distinctly less safe.

## HIGH-FREQUENCY CURRENTS.

W. H. would like information on the following points: (1) The approximate cost of installing the above where a continuous current from the main exists; (2) what is the best and most recent work on the subject; (3) is there any periodical dealing with medical electricity? (4) what may be considered a fair average fee to charge for the application of the above currents by a medical man in his rooms?

\*.\* (1) About £70, the major part being the cost of the large induction coil and its accessories. If "W. H." has an x-ray outfit the additional cost should come to about £25. (2) Freund's *Elements of General Radiotherapy* (London: Rebman, Limited, 1904. 21s.); Denoyé's *Les Courants de Haute Fréquence*; (3) *Archives of the Roentgen Ray* (Monthly. London: Rebman, Limited. 16s. per annum); *Medical Electricity and Radiology* (Monthly. London: A. Siegle. 12s. per annum); *Archives d'Electricité Médicale* (Fortnightly. Paris: Octave Doin. Fr. 22 per annum); (4) Same fees as for ordinary advice and treatment.

## CONCURRENT DIPHTHERIA AND SCARLET FEVER.

G. writes that on November 4th he saw a boy, aged 11, with inflamed tonsils, whose sister was suffering in the same house from diphtheria. On November 6th patches appeared in the boy on both tonsils, and his temperature was 102°; an injection of antidiphtherial serum (1,000 units) was given; on November 8th a typical scarlet fever rash appeared, and was attributed to the serum; on November 12th the boy's hands showed commencing desquamation, and since then the hands and feet have peeled rapidly in thick flakes. Our correspondent asks whether it is possible to have scarlet fever and diphtheria at one and the same time, and whether having already notified the case as one of diphtheria, it ought again to be notified as one of scarlet fever.

\*.\* From the account given of the boy's case, it seems probable that it was one of co-existing scarlet fever and diphtheria, the signs of diphtheria being the first to show themselves. Cases such as this are not at all uncommonly met with in London, and might be expected in any large city where both scarlet fever and diphtheria were prevalent at the same time. The typical scarlet fever rash which came out on November 8th should not be attributed to the antitoxin given on November 6th, for the following reasons: (1) A typical scarlet fever rash is very rarely produced by antitoxin. (2) The rash came out much too soon (only two days) after the injection of antitoxin. The antitoxin rashes seldom appear before a week has elapsed. (3) The