

MEMORANDA: MEDICAL, SURGICAL, OBSTETRICAL.

NOTE ON THE ABILITY OF *VIBRIO CHOLERAE ASIATICAE* TO DECOMPOSE STARCH.

(From the Public Health Laboratory, St. Bartholomew's Hospital, London.)

In the course of an examination of the ability of various micro-organisms to decompose starch, a series of bacteria were cultivated in the following medium: Lemco 1 gram, peptone 1 gram, sodium bicarbonate 0.1 gram, starch 0.5 gram, aqua dest. ad 100 c.cm. The medium is tinted with litmus. It has been found that *Vibrio cholerae asiaticae*, when cultivated in this medium at 37°C., decomposes the starch with a strongly acid reaction within twenty-four hours, whereas the vibrio of Finkler and Prior produces no such reaction in this time, and only a feeble acid reaction by the third day. Staphylococci, streptococci, *B. diphtheriae*, *B. coli*, *B. enteritidis* (Gaertner), *B. typhosus*, *B. proteus*, all fail to produce an acid reaction in this medium. The rapid positive reaction of cholera, therefore, in this test has a differential value. It may be added that the acid reaction notifying decomposition of the starch is also produced by the cholera vibrio when cultivated in distilled water tinted with litmus and containing 1 per cent. peptone, 0.5 per cent. salt, and 1 per cent. starch.

M. H. GORDON, M.D.

PNEUMOCOCCAL ARTHRITIS.

I READ with great interest Dr. Raw's account of a case of pneumococcal arthritis in the BRITISH MEDICAL JOURNAL of June 16th, p. 1400, as I have just met with a case of a very similar nature; of this the following is a brief account:

A man, aged 31, whom I first saw on June 8th, complained of what was evidently pleuritic and severe pain in the right side. On the following day definite signs of pneumonia could be detected at the base of the right lung. The disease ran a typical course till the evening of the 14th, when the patient complained of pain in the left knee-joint, and this on examination proved to be somewhat swollen and very tender. His temperature was then 102°. The pneumococcus was found in the sputum. The following morning the temperature had fallen to 100° but the joint swelling was more marked, the temperature rising to 103° that night. Next day (16th), with a view to determining the nature of the fluid present, I aspirated the joint and drew off a quantity of thin greenish pus, in which the pneumococcus was found to be present in great numbers. Unfortunately the patient became delirious that night, and died in the early hours of the following morning.

Blaina, Mon.

B. L. MIDDLETON, M.B.

A SIMPLE METHOD OF ADMINISTERING CHLORIDE OF ETHYL.

IN view of the interest (evident from the BRITISH MEDICAL JOURNAL of late) taken in chloride of ethyl as a general anaesthetic, I should like to draw attention to a simple method of administration which I demonstrated at a meeting of the Glasgow Medico-Chirurgical Society two years ago. The apparatus consists of a facepiece such as that of a Clover's inhaler with an opening of about $\frac{1}{2}$ in. diameter in the upper surface. Inside is placed a wire cage, and on this is spread three or four layers of gauze. The mask is applied, the chloride of ethyl is sprayed into the gauze through the opening, and this is then closed by a pad of gauze. This allows a certain amount of air to be inhaled but prevents evaporation of the anaesthetic outwards.

This simple contrivance has been used by me and for me between three and four hundred times, chiefly for short operations, removal of tonsils and adenoids, intranasal operations, removal of aural polypi, etc., but I have also used it for continuous administration. No doubt rather more ethyl chloride is used by this method, but this is more than compensated for by the continuous admission of air, which, it seems to me, means greater safety in the administration, especially by those who do

not have frequent opportunities of using it. The facepiece may be as simple as possible. On occasion I have used an envelope, a paper poke, etc.

W. S. SYME,

Assistant Surgeon, Glasgow, Ear, Nose, and Throat Hospital.

A COCKROACH IN THE EXTERNAL AUDITORY MEATUS.

A FEW days ago, about 1.30 a.m., I was called up to see a lady who said a fly had got into her ear while she was asleep in bed, that it was making a tremendous buzzing in her head, and she would soon go mad if it were not removed. I examined the ear with a speculum, and could see what appeared to be a dark-looking piece of cerumen; without the speculum this was not visible. I then proceeded to syringe the ear for a considerable time with warm water, but nothing but water returned and the patient stated that the buzzing still continued. I then got her to lie on a sofa and filled the meatus with 1 in 20 carbolic lotion, and in a short time the buzzing ceased. Syringing was then tried again without effect. I then passed a sinus forceps through the speculum and seized the foreign body. On withdrawing it it proved to be an ordinary cockroach such as haunts kitchens. It measured a little over 1 in. in length and a little over $\frac{1}{2}$ in. in width. What I had seen through the speculum was the tail end of the beetle. The creature was quite tightly wedged in the wall of the meatus, and this where its forelegs had been was considerably reddened, apparently owing to its scratching. I have not heard of a similar case occurring in this country before.

ASLETT BALDWIN, F.R.C.S.,

Senior Assistant Surgeon, West London Hospital.

THYROID GLAND IN OBESITY.

THE action of thyroid gland in cases of obesity depends on the age and sex of the patient, and also on the preparation of the gland substance used. Young persons of both sexes, as a rule, show no falling off in weight even when the gland substance is taken for some months. On the other hand, females between the ages of 25 and 45 years come under its influence speedily, and weight decreases rapidly, whilst in males of a corresponding age the results are uncertain, the fat in only a certain proportion being permanently reduced. The best results are obtained in females between the ages of 35 and 45 years. These conclusions have been arrived at after careful consideration of the records of over one hundred cases. The young healthy growing tissues seem able to resist the action of thyroid gland, and to have the power of storing up quantities of fat in spite of it, and it is only when careful dieting has been practised that any reduction has been effected, and even then it is very doubtful if the thyroid substance had anything to do with the loss in weight that resulted. In adults the loss of weight begins at the end of the third or fourth day, and this loss gradually increases so that, as a rule, from 2½ lb. to 4 lb. are recorded at the end of the seventh day. This reduction goes on as long as the thyroid is taken. When the superfluous fat is removed and a healthy condition of body weight regained the thyroid gland should be gradually left off. In some cases the weight increases rapidly when the thyroid is given up, but in all cases a temporary return to it has had the desired result. The loss of fat has been found to follow a very similar course in almost all instances. First, the chest measurement over the breast diminishes owing mainly to loss of fat substances in the breasts themselves, the chest walls being affected later. The upper and lower extremities follow next, and lastly, the buttocks and abdominal walls. In many cases the fat in the abdominal walls persists for some time after the fat in other parts of the body has markedly decreased, but this always diminishes under prolonged use of the thyroid. No untoward symptoms have been noticed in any of the cases; malaise, headache, palpitation, and nervous derangement have been entirely absent. Examination of the blood has been carried out wherever practicable, and has shown no increase or diminution of the red corpuscles or leucocytes during any part of the treatment. Albuminuria has not been seen at any time. The thyroid gland used in all instances has

been B. W. and Co. tablets. The initial dose is 2½ gr. with each meal, either mixed with the food or taken with a little water. After seven days the dose is increased to 5 gr. with each meal, and this dose has not been increased in any case. The tablets are crushed before being taken. In the successful cases summarized below no alteration in diet has been ordered, the patient eating and drinking anything he or she may have desired. Alcohol has, however, been strictly prohibited in any form.

Of 78 females treated 69 were between 25 and 45, their average weekly loss was 2½ to 4 lb., and the result was permanent cure; 9 were between 15 and 19, and there was no permanent result in any of them. Of 25 men 9 were between 30 and 47; they lost on an average 2 to 3½ lb., and the cure was permanent; 11 men between 30 and 47 lost 1 to 1½ lb. on an average, but the result was not permanent; on 5, between 14 and 17, there was no effect at all.

Manchester. W. J. HOYTEN, M.R.C.S., L.R.C.P.Lond.

REPORTS

ON

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

HARROGATE INFIRMARY.

CASE OF RUPTURE OF THE LIVER, AND RECOVERY.*

(Reported by E. SOLLY, M.B.Lond., F.R.C.S., Hon. Surgeon.)

THE following case is in my opinion worthy of record, partly from the rarity of recovery after such a severe injury, and partly as affording an illustration, if any were needed, of the advantages of early operation in abdominal injuries, where symptoms are increasing in severity, although not giving definite information as to the exact nature of the injury.

H. B., aged 14, a telegraph messenger, was on July 31st, 1905, riding on a bicycle down a rather steep hill, when he ran into a tradesman's cart; he was picked up unconscious, and carried home (a distance of about a quarter of a mile) on the cart; on the way he became partially conscious, but talked incoherently, and was very restless, and when brought to his home complained of severe pain, chiefly in the neck, but also in the abdomen. He vomited once only, and the vomit, so far as it was observed, consisted only of food and secretion, with no trace of blood; he had passed urine without difficulty, apparently normal.

State on Admission.—He was sent to the Infirmary and admitted about an hour after the accident, suffering from shock, pain in the abdomen and in the left side of the neck; the pulse was soft, but easily felt and counted, 90 per minute; respiration was irregular and shallow, rate about 25 to 30. There was no abdominal distension, no abnormal dullness, and the hepatic dullness was present. The only external sign of injury was a slight abrasion of skin just above and a little to the left of the umbilicus. The general condition, though severe, was by no means one of collapse; and partly owing to absence of definite symptoms, and partly in deference to the opinion of one of my colleagues, I decided to keep the patient under observation for a while, making ready for operation in case it should become advisable.

Progress.—No marked change in symptoms being noted, and being myself detained by another urgent case, I did not see the boy again for about four hours, when I found the general condition to be distinctly worse—pulse, 100 to 110, and certainly weaker; breathing, 35 to 40, and more irregular. The mental condition was certainly clearer, and the pain, although mainly located in the neck as before, was more marked in the abdomen, chiefly about the umbilicus; there had been no more vomiting. On examination there was some evidence of abdominal distension and some dullness in the hypogastric region. The indications pointed to intra-abdominal hæmorrhage, probably from one of the solid viscera, and operation was decided upon.

Operation.—Upon opening the abdomen the peritoneal cavity was found to contain a large quantity of fluid blood, and upon examining the viscera two large rents were found in the left lobe of the liver, in the form of a letter V, each about 4 in. long, one having a secondary fissure of an inch in length leading from its middle. The blood was removed and the cavity washed out with sterilized saline solution, and the liver rents closed by sutures of catgut (sterilized by boiling in xylol), four sutures to each rent, two above and two below.

These were very carefully tied, and I have no doubt that the least excess of force used in drawing the edges of the wound together would have caused the sutures to cut through; but as it was they held well, and the hæmorrhage ceased. The area above and below the site of the rupture was carefully packed with cyanide gauze in two separate strips, and a large drainage tube passed down to the pelvis; the wound was then closed with interrupted sutures of silkworm gut, during the tying of which the peritoneal cavity was irrigated with a stream of saline solution. The boy was very restless, and with difficulty kept in bed during the night after the operation, and was very irritable for the first three days; but the temperature having fallen to 96° after the operation, became normal within twenty-four hours, and continued so throughout. Rectal injections of 4 oz. of normal saline solution were given four hours and eight hours after the operation; next day a few sips of weak tea and occasional teaspoonfuls of milk and water were given at intervals, and at 6 p.m. a dose of aspirin (15 gr.) was administered on account of the patient's excitable condition with marked benefit; this was repeated at midnight. Next day a dose of castor oil, followed by a simple enema, caused a slight but satisfactory action of the bowels, and feeding with custard pudding was commenced, and the quantity and range of the diet was cautiously increased daily without any complication arising, with one exception, to be noted below. The pelvic drain tube was removed twenty-three hours after operation, and the gauze packing slowly withdrawn piece by piece during the first week. There were no complications of any kind.

Result.—The patient got up on August 26th (twenty-seventh day), and went out into the Infirmary garden next day. Six days later, he came in from the garden suffering from severe abdominal pains and vomiting, and looking alarmingly ill. He was put to bed, and when upon inquiry it was found that he had plucked and eaten three sticks of raw rhubarb, the usual stomachic sedatives were promptly resorted to, and a repetition of castor oil and an enema completed the cure. The boy left the Infirmary on September 15th (forty-seven days after the accident). He has been at work ever since, and is apparently in perfect health.

REPORTS OF SOCIETIES.

DERMATOLOGICAL SOCIETY OF LONDON.—At a meeting on July 11th, Dr. H. RADCLIFFE CROCKER in the chair, Dr. JAMES GALLOWAY showed a case for diagnosis of a *Seasonal eruption* on the face of a middle-aged woman. He had thought that the condition was possibly a form of lupus erythematosus, but there had been vesication, and he was inclined to consider it as allied to hydroa aestivale. This opinion was supported by the majority of those present.—Dr. RADCLIFFE CROCKER showed a case of *Mycosis fungoides* of very typical character in an old gentleman who, before coming to Dr. Crocker, had been treated with x rays with considerable benefit. The disease was now present on the legs, forehead, and face, the skin in these parts being much infiltrated, and the patient suffering from great irritation. The treatment with x rays was being continued.—Dr. T. COLCOTT FOX showed a case for diagnosis: a very extensive pink and scaly eruption occupying the greater part of the trunk, the arms, forearms, and hands; there had also been vesicles on the fingers and toes. He suggested the diagnosis of *Pityriasis rosea*, which found many supporters. Dr. CROCKER and Sir COOPER PERRY thought it was more probably a case of seborrhoeic eczema.—Mr. MALCOLM MORRIS showed a father and daughter, the subjects of *Congenital tylosis*. In both patients the skin of the palms and soles had been immensely thickened and hardened from birth, the keratodermic areas being bounded by an erythematous border. There were two other children in the family who remained wholly free from the disease.—Mr. GEORGE PERNET showed a young man whom he had treated for *Linear naevus* of the hand and forearm with scraping and the application of carbolic acid. Many members disputed the diagnosis, considering the case as more typical of tuberculosis verrucosa cutis.—Dr. J. M. H. MACLEOD showed a case of multiple *Idiopathic keloid* in a man aged 55. He had a large patch of keloid on the chest and several smaller patches of similar character upon the shoulders and back. All the patches were violently itchy. No history of any previous injury to account for the development of the keloids could be

* Notes read at the annual meeting of the Yorkshire Branch, British Medical Association, at Bradford, June 13th, 1906.

PROPOSED UNION OF MEDICAL SOCIETIES IN LONDON.

A MEETING of the General Committee of Representatives of Medical Societies in London was held on July 17th to consider the report of the Organizing Committee.

Sir WILLIAM CHURCH, who was in the chair, pointed out that at the first meeting of the members of societies, which was held at the Royal College of Physicians in 1905, the feasibility of union was considered, and that as the outcome of the opinions expressed at that meeting a Committee of Representatives of the various societies was appointed. The Committee of Representatives appointed an Executive Committee to go more thoroughly into the feasibility of union and to outline some scheme of union if such were thought possible. This Executive Committee reported that a union was feasible on certain lines, and its report was confirmed by the Committee of Representatives on July 19th, 1905. With that report the Executive Committee's work came to an end, and an Organizing Committee was appointed to draw up a definite and, as far as possible, a detailed scheme of union. This scheme was before the meeting, and if approved would be sent to the societies to act upon or not as they thought fit. Those societies which approved of the report and decided to join the proposed union would be asked to appoint a representative before December 7th next to sit upon a committee which would act as the first Council of the new Society and deal with the necessary details of amalgamation.

The report recommended that all male members of those societies which took part in the amalgamation should be permitted to join the new society on its formation as members or Fellows without election, and that all women members of a society taking part in the amalgamation should become members of the corresponding section or sections of the new society. It was further recommended that the society should consist of the following sections which represented existing societies, but that the new society should have power to add new sections:

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| 1. Anaesthetic. | 10. Medical. |
| 2. Balneological and Climatological. | 11. Neurological. |
| 3. Clinical. | 12. Obstetrical and Gynaecological. |
| 4. Dermatological. | 13. Odontological. |
| 5. Diseases of Children. | 14. Ophthalmological. |
| 6. Electro-Therapeutical. | 15. Otological. |
| 7. Epidemiological. | 16. Pathological. |
| 8. Laryngological. | 17. Surgical. |
| 9. Life Insurance. | 18. Therapeutical. |

It was hoped that in the early future an anatomical and physiological Section and a Section of preventive medicine might be formed. The Medico-Psychological Association and the Medico-Legal Society hoped to join the new Society at some future date. It was recommended that each Section should be self-governing as far as possible, and should have direct Representatives on the council of the society and on the editorial committee, but that its expenditure should be subject to the control of the finance committee of the general council. The general management of the society would be under the control of a general council consisting of the president, the presidents of the various sections, two treasurers, two librarians, two secretaries, and eight other Fellows.

HOSPITAL AND DISPENSARY MANAGEMENT.

KESTEVEN (LINCOLNSHIRE) COUNTY ASYLUM.

FROM the annual report of the Medical Superintendent, Dr. J. A. Ewan, for the year 1905 we see that there were 367 patients in residence on January 1st, 1905, and that at the end of the year there remained 358. During the year 50 cases in all were admitted, of whom 5 were private patients. This is a very considerable fall from the numbers admitted during the previous year (102) or those of 1903 (158), and in only 37 cases were the patients chargeable to the county unions. Dr. Ewan was able for the first time to report amongst the total asylum population a decrease in the numbers chargeable to the unions of Kesteven. Of the total admissions, 47 were first admissions, 15 were the subjects of first attacks within three, and 6 more within twelve, months of admission; in 10 the attack was a "not first" attack within twelve months of admission, and the remainder were either more than twelve months' duration or congenital cases. They were classified as to the forms of mental disorder into: Mania of all kinds, 15; melancholia of all kinds, 8; dementia, 14; general paralysis, 3; acquired epilepsy, 3; and congenital or infantile defect, 7.

In only 4 of the admissions was alcoholic intemperance ascribed as the cause of the mental disorder, and this notwithstanding that the Commissioners in their last Blue Book placed Lincolnshire among those counties where intemperance in drink was the assigned cause in 10 to 15 per cent. Venereal disease was assigned in 2, hereditary influences were ascertained in 18, or 36.0 per cent., congenital defect in 9, previous attacks in 5, old age in 2, and "moral causes" in 15. During the year 14 were discharged as recovered, giving a recovery-rate on the admissions of 28.00 per cent., or, exclusive of transfers, of, 37.84 per cent., 5 as relieved, 13 as not improved, and there were 27 deaths. These deaths, giving a percentage death-rate on the average numbers resident of 7.33, were due in 9 cases to cerebro-spinal diseases, in 14 to chest diseases with only 2 deaths from phthisis, and in 4 cases to abdominal diseases, including one case of colitis. No serious casualty had to be reported during the year, and the asylum was free from zymotic disease.

MEDICAL NEWS.

DR. MUIR SMITH has been appointed a Justice of the Peace for Eastbourne.

A 10 to 12-h.p. Argyll, made by the Argyll Motors, Limited, of Alexandria, Glasgow, has for the third year in succession gained first prize and gold medal at Wirral Show for the best car under £500.

THE name of Provost Dr. James MacLachlan, Dornoch, has, on the recommendation of the Lord Lieutenant, been added to the new list of Justices of the Peace for Sutherlandshire.

THE Fifth International Congress of Obstetrics and Gynaecology, which was to have been held in St. Petersburg last year but was postponed until this year, has now been again postponed for another year. It will be held in St. Petersburg from September 11th to 18th, 1907.

THE fund for the establishment of the Institute of Medical Sciences as a part of the University of London will, it is stated, benefit to the extent of £25,000 under the will of the late Mr. Alfred Beit. Sums of £20,000 are also bequeathed to Guy's Hospital, the King Edward's Hospital Fund for London, and to the trustees of the will to distribute among charitable institutions in London.

GIVING evidence on July 23rd before the Select Committee of the House of Commons on the Housing of the Working Classes Amendment Bill, Miss Constance Cochrane, one of the Executive Committee of the Rural Housing and Sanitation Society, recommended that medical officers of health should be members of a branch of the ordinary Civil Service.

AT a general court of governors of the East London Hospital for Children on July 23rd, it was reported that the new isolation block had been completed and taken into use. The lower floors were devoted to cases of diphtheria and the upper wards to patients under observation only. Continued evidence was being received of the value of the whooping-cough block. Although the finances of the hospital were in a better state than last year, there was still a heavy deficit on the half-year's working.

THE Earl of Kilmorey, as Chairman of Charing Cross Hospital, made an application at Bow Street Police Court on July 23rd in respect of the nuisance caused by motor omnibuses, and asked for advice. He said that the Commissioner of Police had issued an order prohibiting motor omnibuses stopping in King William Street to put down and take up passengers, but that the drivers persisted in doing so unless the police were looking. The patients in hospital, therefore, were disturbed by undue noise and prevented from getting a proper amount of sleep. After asking some questions the magistrate said the best course would be to get shopkeepers and others in the neighbourhood to act with the hospital. If they came together and said there was a nuisance he would grant a summons against the companies concerned.

THE Board of Agriculture has issued the annual report of its chief veterinary medical officer for the year 1905, together with an account of the proceedings taken under the various statutes and the usual statistical tables. Of the diseases mentioned, the most interesting to the medical profession are anthrax and glanders, both of which we regret to see are largely on the increase. The causation of anthrax on farms on which no previous infection has been reported forms a very difficult problem, and has in some instances been solved by tracing the use of shoddy from wool-combing as bedding. The fight to stamp out swine fever goes on without apparently much change, and those who are interested in the work of county and district councils will find much to interest them in the report.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF LONDON.

THE following candidates have been approved at the examinations indicated:

- M.D., BRANCH I (Medicine).**—J. H. Clatworthy, Guy's Hospital; F. C. B. Gittings, Middlesex Hospital; Louisa Hamilton, B.S., London (R.F.H.) School of Medicine for Women; C. V. Knight, St. Bartholomew's Hospital; H. C. C. Mann, B.S., Guy's Hospital; E. H. B. Milsom, Guy's Hospital; E. C. Myott, B.S., Guy's Hospital and Victoria University; T. Perrin, B.S., St. Thomas's Hospital; H. Pritchard, B.S., St. Bartholomew's Hospital; W. A. Rees, Middlesex Hospital; G. H. Sowry, B.S., St. Bartholomew's Hospital; H. F. B. Walker, Guy's Hospital; H. E. Wise, Middlesex Hospital.
- M.D., BRANCH III (Mental Diseases and Psychology).**—G. W. Smith, Guy's Hospital.
- M.D., BRANCH IV (Midwifery and Diseases of Women).**—G. E. Aubrey, B.S., St. Bartholomew's Hospital; Lucian A. E. De Zilwa, B.Sc., University College; L. S. H. Glanville, B.S., Guy's Hospital; W. P. Gowland, B.S., Victoria University; E. C. Mackay, B.S., St. Bartholomew's Hospital; H. F. Seymour, London Hospital; F. E. Taylor, B.S., University of Leeds and King's College; E. F. Travers, St. Bartholomew's Hospital; V. G. Ward, St. Bartholomew's Hospital; Florence E. Willey, M.S., B.Sc., London (R.F.H.) School of Medicine for Women.
- M.D., BRANCH V (State Medicine).**—M. J. Rees, Guy's Hospital.
- M.D., BRANCH VI (Tropical Medicine).**—F. N. White, St. Bartholomew's Hospital and London School of Tropical Medicine.
- M.S.**—T. P. Legg, King's College and St. Bartholomew's Hospital; W. P. Noall, Royal Infirmary Manchester and London Hospital; W. G. Taylor, B.Sc., Middlesex Hospital.

UNIVERSITY OF EDINBURGH.

University Court.

At a meeting of the University Court on July 16th, an application by the Scottish Association for the Medical Education of Women, for continuance of recognition, for next academical year, of the Edinburgh Medical College for Women, Minto House, and for permission to hold certain mixed classes in connexion with the College, was granted.

The Court granted recognition as follows: (1) Dr. F. D. Boyd, Edinburgh (materia medica); (2) Dr. J. Taylor Grant, Edinburgh (practical bacteriology—qualifying for the diploma in Tropical Medicine and Hygiene). It was agreed to recognize the course in Chemistry and Practical Chemistry in the Madras College of Agriculture as qualifying for the First Science Examination.

UNIVERSITY OF ABERDEEN.

DR. CARSTAIRS C. DOUGLAS has been appointed Examiner in Medical Jurisprudence and Public Health for a period of four years.

ROYAL UNIVERSITY OF IRELAND.

Regulations for the Award of Honours.

On Friday, July 20th, Sir Andrew Porter, Master of the Rolls, and Sir Wm. Anson, Bart., M.P., Visitors appointed by the King, sat in the Senate Room of the Royal University to determine certain questions which had arisen regarding honours awarded in that institution. The Act of 1879 says:

Provision shall be made that no student holding any exhibition, scholarship, fellowship, or other similar prize in any other university or in any college attached to a university, or in any college endowed with public money, shall hold any of the said exhibitions, scholarships, fellowships, or other prizes in the University without taking the value of such previous exhibition, scholarship, fellowship, or other similar prize into account.

And the University accordingly made the following regulation: No student holding any exhibition, scholarship, fellowship, or other similar prize in any other university, or in any college attached to a university, or in any college endowed with public money, can hold any of the exhibitions, scholarships, fellowships, or other prizes in the Royal University without taking into account the value of such other exhibition, scholarship, fellowship, or other similar prize.

Doubts had arisen as to the meaning of "holding" and "hold." In the regulation the word "other" was used instead of "previous" in the Act, and one of the questions was whether that was the correct word. The enactment, which was intended to prevent the enjoyment of concurrent emoluments, had led to considerable difficulty—so much so that no less than ten cases had been submitted to the law officers on questions arising on the construction of the subsection; but, so far as the present visitation was concerned, the specific instances might be grouped as follows: There were candidates who, after having submitted themselves for examination in the Royal University, went to Trinity College and obtained sizarships there. Their examination in the Royal University taking place in June, after it had concluded, but before the result was published they obtained the Trinity Sizarship, the result of which was declared on July 3rd. The result of the examination in the Royal University was published later in July. On the receipt of queries as to whether they held emoluments in other universities than the Royal, their reply was that they were not the holders of the sizarships in a sense that deprived them of the emoluments in the Royal University, their contention being that at the time when their examination in the Royal concluded they were not the holders of other university emoluments. They went farther, and contended that inasmuch as the enjoyment of the sizarship emolument did not commence until the following

October, when they entered into residence as sizar, they held no emolument at the date when the Royal University prize was awarded. There were two students who obtained in the year 1904 scholarships in the College of Science, but these were not awarded by the College, but by the Department of Agriculture, and were to be competed for and enjoyed in the College of Science. On January 27th, 1905, the Standing Committee recommended:

That if any student to whom a prize had been awarded should within a calendar year preceding the date thereof have been in receipt of emoluments from any other university or college, he should not hold the prize without taking into account the value of the other emolument.

They reported against the use of the word "holding." The Senate passed a resolution accordingly. With regard to the Queen's College Scholarships, these were awarded in November in each year, and were tenable for one year. The contention with regard to them was that "year" meant "session," which ended in June; and that as the student had then got all the money that he was entitled to, he ceased to be the holder of an emolument, and could get one from the Royal University in the following October. The opposite view was that "year" meant twelve months, which would exclude the holding of the second emolument.

Counsel having been heard at great length, Sir William Anson said the Visitors had come to the conclusion that the resolution of the Senate proceeded on the assumption that it was possible to construe the word "holding" as "having held." The Visitors did not consider that that was a possible construction, that the student who was disqualified from holding a prize of any sort at the Royal University must be actually holding some prize of the sort included under Subsection 4. It would follow, therefore, that the resolution of the Senate was *ultra vires*. They (the Visitors) considered that the word "previous" could not be construed, as suggested, as equivalent to "aforesaid." Therefore, it was possible for a student to hold two of these prizes at the same time, so long as at the moment he was awarded a prize at the Royal University he was not holding a similar prize previously obtained. As regarded the point raised under Section 13, they had come to the conclusion that that reference to students at the moment of the dissolution of the Queen's University could not be construed to exempt students for all time from the operation of the Act of 1879; but, on the other hand, although they did not consider that the Queen's Colleges were exempt under that clause, that as the matter of the tenure of their scholarship was one of College regulation, and as the Colleges had always construed the scholarship to be awarded for the academical year, the Visitors were entitled to construe the year of tenure as the academical year, and not a calendar year. As a consequence of that, they held that a scholarship which had run out in June at the end of the academical year would not affect an exhibition or other prize obtained at the Royal University and awarded in July. As to an appeal in regard to a sizarship in Trinity College, they were of opinion that although the examination at which the Royal University Exhibition was awarded concluded in June, yet inasmuch as the announcement of the award, which was in substance the award, did not take place till the end of July, whereas the sizarship was awarded at the beginning of July, the sizarship must be regarded as a "previous exhibition, scholarship, fellowship, or other similar prize," and, therefore, as not tenable by the students of the Royal University. As regarded the appeals from students who held allowances from the Department of Agriculture, the views of the Visitors were that these are not held from colleges endowed by public money, but from a public department, and that therefore they are not affected by the words of the subsection.

ROYAL COLLEGE OF PHYSICIANS OF EDINBURGH.

A QUARTERLY meeting of the Royal College of Physicians of Edinburgh was held on Tuesday, July 17th, Dr. Playfair (President) in the chair.

Fellowship.

Andrew Balfour, M.D., B.Sc., D.P.H. (Camb.), was introduced and took his seat as a Fellow of the College; Sydney Wilson Thompson, M.R.C.P.E., Zungeru, Northern Nigeria, West Africa, was admitted by ballot to the Fellowship of the College.

Admission to the Membership.

On a ballot the following candidates were admitted to the Membership of the College after examination: James Mair Rutherford, M.B., C.M., Edinburgh, and John McGibbon, M.B., Ch.B., L.R.C.P. and S.E., Edinburgh.

Admission to the Licence.

The Registrar reported that since the last quarterly meeting of the College twenty-five persons had obtained the licence of the College by examination.

Recognition of Lecturer.

Dr. Francis Darby Boyd, C.M.G., was recognized as a Lecturer on Materia Medica.

Curriculum and Examinations.

The regulations regarding the Membership and Fellowship of the College for the ensuing year, and the regulations for the Triple Qualification were approved.

ROYAL COLLEGE OF SURGEONS OF EDINBURGH.

THE following gentlemen have been admitted ordinary Fellows: C. H. Allen, J. R. Atkinson, K. Dadabhoy, J. M. Darling, W. H. Duncan, S. L. Heald, T. W. Irvine, I.M.S., J. A. Longley, J. C. Muir, J. K. Osborne, G. Potts, A. T. Ross, D. H. Wessels, A. L. White.

CONJOINT BOARD IN SCOTLAND.

THE following candidates have been approved at the examinations indicated:

FIRST EXAMINATION (Five Years' Course).—G. F. Hegarty, J. W. Robertson, S. C. Pal, T. N. Usher, G. F. Neill, Amabile Caruana, H. H. Field-Martell, R. G. Walker (with distinction), R. A. Mirzan, W. T. Torrance, A. E. Tughan, S. E. A. Acheson, C. B. Robinson, and T. Crawford.

SECOND EXAMINATION (Four Years' Course).—J. J. O'Sullivan, G. Harrison.

SECOND EXAMINATION (Five Years' Course).—R. H. La B. Cummins, W. F. Mitchell, B. Singh, T. G. Shand, J. du T. Malan, J. L. Pinto, C. J. Evans, Lily Holt, W. Henderson, A. Davidson, J. Grosert, E. Lewis, and J. Aiken.

THIRD EXAMINATION (Five Years' Course).—H. G. Ramsbottom, G. W. Rundle, G. E. W. Henderson, N. G. Walshe-Davidson, T. Mohan, Mary Rathbone, C. C. Campbell, R. M. Riggall, W. H. Bennett, S. M. Ware, H. H. Jackson, J. B. Kelso, R. G. Sherlock, B. S. Tarapurwalla, P. M. Tolmie, C. A. Paterson, W. R. Waddell, E. J. Lumsden, Lizzie L. de la Harpe, and R. H. la B. Cummins.

FINAL EXAMINATION.—Mary D. Hancock, K. S. Kanja, J. A. Kane, T. McL. Galloway, M. Gavin, E. Martin, L. C. Webster, W. W. Dunlop, D. J. M. Legge, H. A. Pascoe, E. A. Williams (with honours), W. Scott, J. A. S. Phillips, G. H. Powell, L. H. Gill, P. R. Eskill, J. O. Shircore, T. A. Gregg, C. F. Fiaschi, W. J. Geale, Constance H. Colley, W. D. Dickson, and F. H. Everill.

SOCIETY OF APOTHECARIES OF LONDON.

THE following candidates have been approved at the examinations indicated:

SURGERY.—J. L. Meynell, †E. Sutcliffe, *E. J. F. Thomas, †*G. L. Walker.

MEDICINE.—†*A. C. J. Elwin, *E. Gay, †*J. H. May, *J. L. Meynell, †*E. Moir, †L. Nicholls, †A. F. Reardon, †*A. Shepperd, †*E. W. Squire, *E. J. F. Thomas, †W. H. Williams.

FORENSIC MEDICINE.—E. V. Connellan, A. C. J. Elwin, W. H. Lister, E. Morris, L. Nicholls, A. Shepperd, E. W. Squire, F. A. K. Stuart, W. H. Williams.

MIDWIFERY.—E. R. Bastard, E. S. Cooke, G. B. Messenger, L. Nicholls, P. D. Pickles.

* Section II. † Section I.

The diploma of the Society has been granted to Messrs. H. J. May, J. L. Meynell, E. Morris, and E. J. F. Thomas.

PUBLIC HEALTH

AND

POOR-LAW MEDICAL SERVICES.**PRESERVATIVES IN FOOD.****MILK.**

THE Local Government Board in England has issued a circular to local authorities on the subject of the detection of preservatives in milk. The report of the Departmental Committee on this subject is quoted, and its opinion that there is absolutely no need for the use of preservatives in milk is stated. The two substances to which attention has been especially directed were formalin (that is, a 40 per cent. solution of formic aldehyde) and boron preservatives.

After detailing the action which has already been taken in some parts of the kingdom, the circular goes on to recommend united action on the part of all authorities who have the control of the sale of food and drugs. It is therefore desired that public analysts should include in their quarterly reports the particulars of any samples that have been examined for preservatives; and whether any other preservatives than formalin and boron have been employed; also any further facts as to samples of milk which have been so treated.

It is suggested that a circular should be issued to milk-sellers pointing out that such action will be taken, and subject to such notice, the Board considers that proceedings might be taken under the Sale of Food and Drugs Acts. Attention is further called to the possibility that the vendor may seek to protect himself by a declaration under Section 6 of the Act of 1875 by declaring the presence of a preservative, in which case samples should be taken more frequently.

As to the amount added, the Board considers that any excess over 1 part in 40,000 of formalin or 40 grains of boric acid per gallon is calculated to be to the prejudice of the purchaser.

The action of the Local Government Board is decidedly encouraging in the interests of the consumer. The purity of our milk supply is of the utmost importance to those whose food mainly consists of it, and whose physical state is most in need of being safeguarded from the poisons which are calculated to produce chronic indigestion and consequent malnutrition. Hitherto no standard for the guidance of public analysts has been laid down, and although it is unfortunate that after a Departmental Committee has reported that preservatives are wholly unnecessary, it should be found advisable to admit the presence of any, we welcome a rule which will at any rate do much to abolish the recurrence of such cases as that quoted in Dr. Thresh's book from Leeds.

The section of the Act of 1875 to which reference is made has always kept a door open for the use of adulterants which has been a source of trouble to the courts, and it would appear wise that at any rate milk and butter should either be sold under their proper names and guaranteed free from any adulteration, or that a distinctive name should be given to any substitute or doctored form which may be put upon the market.

It has been clearly demonstrated that if milk is properly cooled there is no need for the use of preservatives; it is therefore to be hoped that the action taken by local authorities under this circular will produce good and increasingly satisfactory results.

CANNED MEAT.

Apart from the scare originated by the revelations of the American methods of cleanliness, etc., the question remains as to the freedom of home products from suspicion, not merely as regards hygienic methods but also with respect to the undue use of preservatives and the abuse of the employment of colouring matters.

The circular recently issued by the Local Government Board and accompanied by a further letter from Dr. George Buchanan has stimulated local authorities in the discharge of their duties in inspecting food and drugs, but in view of the multiplicity of canning firms the task is difficult and there is a liability to overlapping.

The difficulties of the procedure have been well exemplified by the report of the action taken by the Middlesex County Council in the matter of some tinned goods supplied to the canteen at Hounslow Barracks, and largely loaded with a form of preservative. The Bench was of opinion that 52 gr. per pound of boracic acid in potted ham was injurious to health and that a conviction must follow. The evidence of the public analyst and of Dr. Sykes, M.O.H. St. Pancras, was clear and decisive, and the Bench had no difficulty in accepting it.

It is sincerely to be hoped that, assisted by the success achieved by the Middlesex County Council, other authorities will take action to stamp out this particular menace to the health of the consumer.

The Metropolitan Branch of the Incorporated Society of Medical Officers of Health has sent a circular letter to the London local governing bodies requesting them, in order to secure better protection for the public in regard to tinned and preserved foods, to make representations to the Local Government Board and the Board of Agriculture that legislation should be passed embodying the following reforms:—(a) The name and address of the manufacturer and the date of canning shall be impressed on the cans. (b) It shall be unlawful to sell for any purpose canned foods that are unfit for human consumption, and it shall be the duty of any person in possession of unsound canned foods to notify and surrender same to the local authority, who shall destroy such unsound food free of charge. (c) A certain number of tins—say 1 per cent.—from each consignment shall be opened on importation, and the contents examined under the supervision or instructions of the sanitary authority concerned prior to such canned foods being placed on the market. (d) Tins which are known in the trade as "doubtfuls" shall be deemed to be unfit for human consumption. (e) Food intended for canning shall be inspected by independent officials prior to being canned, and all foods shall be canned under strictly hygienic conditions. (f) The use of preservatives in canned foods should under no circumstances be permitted.

SUMMER DIARRHOEA IN INFANTS.

THE prevalence of summer diarrhoea in infants and its high mortality are alike deplorable, and this the more so as it is in a large measure a preventable disease. Any measures, then, which can be devised for its prevention are deserving of commendation, and the step taken by the authorities of the Paddington Green Children's Hospital in issuing the following card of instructions to mothers is one that might be followed with advantage by other bodies:

SUMMER DIARRHOEA IN INFANTS.

Hundreds of infants die in London during the summer from diarrhoea and sickness, which may, with proper care, be prevented, but cannot always be cured. If mothers will read carefully and carry out the following instructions, they may hope to save their infants from dying of these complaints.

I. BREAST-FED BABIES.

Diarrhoea and sickness are much more common in bottle-fed than in breast-fed babies, therefore mothers should always suckle their infants when possible for eight or nine months.

But infants should *not* be weaned during the hot weather.

To Prevent Diarrhoea in Breast-fed Babies.

Suckle the baby regularly, *not* every time it cries.
Give the baby *nothing* but the breast milk and water to drink.
Wash the mother's breasts and nipples before and after suckling.
Wash the inside of the baby's mouth with a clean wet rag after nursing.

On no Account Give Babies Fruit, Ice-cream, Fried Fish, or Bits from their Mother's Plate.

To strengthen herself, the mother should take milk and plain food, *not* beer or stout or spirits.
Nursing mothers should avoid over-work and fatigue, and should remember that worrying or quarrelling may spoil their milk, and give the baby diarrhoea.