24-hours old broth culture, for the purpose of immunization, with the result that the rabbit died on the sixth day, and the organism was recovered from the heart blood, thus proving that this organism is a virulent race of the Aertrycke bacillus.

In order to test the virulence of the various cultures of No. 1 bacillus, each of these was used for feeding experiments on young rats. Half an agar culture of each of the nine different strains of No. 1 was used for feeding nine young rats, one rat being used for each strain, and an equal number of control rats being kept. In the next experiment young rats were fed on the remaining ten strains of No. 1, a whole agar culture in this case being used for each rat, an equal number of control rats being kept. Table IV shows the result of these experiments.

It will be observed that all the rats died with the exception of two, in which case the experiment was repeated three times with fresh rats with the same result, showing that these two strains of No. 1 were of a lower virulence for rats than the rest.

Diarrhoea was observed in 12 out of the 19 rats, but its occurrence in the others might easily have escaped detection. The bacillus was recovered from the rats' spleens after death in 9 cases out of the 19; it was not looked for in any of the other organs.

It was then thought that monkeys, being more closely allied to human beings, might be more suitable than rats as experimental animals. Four small full-grown monkeys were fed on one agar tube of Bacillus No. 1. A different strain was employed for each monkey. The results of these experiments are shown in Table V.

TABLE V.

No. of Case from which Bacillus was Isolated.	Experimental Animal.	Dose.	Diarrhoea No. of Days Before Death.	Died No. of Days After Experiment.	Stools or Organs from which Bacillus was Recovered.
35 R	Monkey	1 agar tube	1 day	3	Bile.
35	,,	,,	2 days	12	Faeces and small intestine.
30	,,	,,	6 days	8	Faeces 3rd and 7th day. large and small intestines.
52	,,	,,	3 days	15	Faeces 13th day.

It will be observed that the onset of the diarrhoea varied from two to twelve days after the feeding. The bacillus was recovered from all four of the animals after the onset of the diarrhoea, from three after death, and from the faeces of three after the onset of the diarrhoea. The bacillus was not found in the spleens of these animals, a condition analogous to that found in infants suffering from summer diarrhoea.

It will be seen that Strain 52, which proved non virulent for rats, produced diarrhoea and death in a monkey, the only difference from the other strains being that the incubation period before the onset of the diarrhoea was longer.

The condition produced in monkeys by these feeding experiments closely resembled infective diarrhoea in infants, the diarrhoea being acute and progressive in severity, accompanied by rapid emaciation followed by death. No vomiting was observed in any of the monkeys. Control monkeys kept under identical conditions remained quite healthy all the time.

The virulence of Bacillus No. 1 was also inadvertently tested on a goat, which for the purpose of immunization had been injected intravenously with an agar culture of a strain of that bacillus, which had been isolated from the mesenteric glands of a child that had died of acute infective diarrhoea. The goat died in about eighteen hours, and the bacillus was recovered from the heart blood, spleen, and liver. Considering that a rabbit not one-twentieth part of the weight of this goat had been successfully immunized with half the dose of the same culture of Bacillus No. 1 intravenously injected, this experiment points to the much greater susceptibility of the goat to this organism.

CONCLUSIONS.

In the course of the present investigation into the bacteriology of summer diarrhoea, there has been isolated a bacillus, designated Bacillus No. 1, which, so far as I have been able to ascertain, has not hitherto been described, and which appears to me to be entitled, in the absence of further knowledge, to be regarded as a factor, perhaps the most important factor in the causation of the disease. The reasons on which this conclusion is based are as follows:

It has never been isolated in any other morbid condition, nor has it been observed in water, milk, sewage, or human faeces.

In all the cases of the disease examined during two consecutive summers, it was found to preponderate in frequency over all other non-lactose fermenting bacilli—for example, out of 58 cases examined during the summer and autumn of 1905 it was isolated from 28, and out of 34 cases in 1906 it was isolated from 15 cases.

It is pathogenic for animals, producing diarrhoea and death in young rabbits, rats, and monkeys, when these animals are experimentally fed on cultures.

It differs from the bacillus of hog cholera of McFadyean, to which it appears to be most closely allied, in its reaction on litmus milk, in the production of a larger amount of indol, and in its failure to produce acid and gas on arabinose, maltose, and dextrin.

It is probable that the difficulties of clinical diagnosis in such a condition lead to the classification under one name of cases due to different micro-organisms. An analogy to this is seen in the case of enteric fever, under which all cases now designated as paratyphoid were till recently included.

It is improbable, from the bacteriological standpoint, that a sharp line of demarcation should be found to exist between acute infective diarrhoea and catarrhal diarrhoea in infants, and this is borne out by the results obtained in the present investigation.

In one case of acute infective diarrhoea the *Bacillus enteritidis* of Gaertner was isolated from the spleen and mesenteric glands, and it seems probable that other allied micro-organisms which produce a condition with even less marked clinical features (than does that organism) may not infrequently be involved in the production of what is designated clinically "infective diarrhoea of infants."

It is remarkable that again this summer no bacilli of the true dysentery Flexner type were found, whilst Duval and numerous workers at the Rockefeller Institute found that organism to be the causal agent of the disease in America.

It is true that bacilli somewhat resembling *Bacillus dysenteriae* (Flexner) were isolated from four cases, but they were not culturally identical with any of the various types of this bacillus, nor were they agglutinated by anti-dysentery (Flexner) serum.

This emphasizes what was said in my last year's communication, that the type of summer diarrhoea of infants in America appears to be clinically and bacteriologically different from that which occurs in this country.

My thanks are due to Dr. Batten, who took the greatest interest in this research, and for the second summer supplied me with the material from the Hospital for Sick Children, Great Ormond Street; also to Dr. Dean and Dr. Boycott, of the Lister Institute, for their most valuable assistance and advice.

MEMORANDA:
MEDICAL, SURGICAL, OBSTETRICAL

AMBIGUOUS REACTIONS IN SUGAR TESTING.

THE article by Dr. Maclean in the BRITISH MEDICAL JOURNAL for June 22nd, On the Causes and Significance of Certain Ambiguous Reactions Obtained in Testing Urine for Sugar, is of great clinical interest, more especially to general practitioners, who have not the time to devote to prolonged urinary tests, and who no doubt are frequently puzzled by these doubtful reactions.

My object in writing this letter is to draw attention to a test described some few years back, which may be performed rapidly and appears to be a reliable confirmatory test after doubtful reactions with Fehling's solution. The test I have used regularly in asylum practice in examining the urines of new acute cases of insanity where sedative

drugs of the chloral order have possibly been administered prior to admission. It is not at all uncommon to obtain a very decided reaction with Fehling's solution which in the ordinary course of events might be taken as an indication of the presence of sugar, but which is evidently due to glycuronic acid. The test is as follows:

Two to three c.cm. of the urine diluted with an equal quantity of water is boiled with phenylhydrazine hydrochloride 0.1 gram, and sodium acetate 0.5 gram. Solution of caustic soda (10 per cent.), 10 c.cm., is then added, the test-tube inverted a few times, and then allowed to stand. A pink to red coloration of the whole liquid occurring within five minutes is to be regarded as an indication of sugar present in proportions of clinical significance.

It would be interesting to hear of any possible fallacies with this test, as it is such a readily performed one.

Melton, Suffolk. STEPHEN G. LONGWORTH.

POST-SCARLATINAL DESQUAMATION.

IN November, 1903, I was asked to see a little girl, daughter of a brother practitioner, who had developed scarlet fever. She had, apart from scarlatina maligna, the most copious rash I have ever seen. She was isolated in another house and nursed by her mother. Although closely looked for, desquamation of even the most floury nature was never observed. At the end of about five weeks she returned home for Christmas. She appeared perfectly well, except for a very slight aural moisture. Two or three weeks afterwards her father developed scarlatina with every other symptom of the disease, *except a rash*. This no one ever could detect. At the end of six weeks, no desquamation having taken place, and feeling perfectly well, he suggested to me that he should take a fortnight's holiday, at the expiration of which he considered he might safely resume his practice. I assented to this, and he departed. A few days later I received a letter from him informing me that he was peeling profusely, and he returned home. It was nearly two months before all the desquamation ceased.

Three months after her attack was apparently cured, the little girl was sent to her grandmother's in the country. While out for a walk, a nursemaid, accompanied by the child and a small boy cousin, used her own pocket-handkerchief to both the boy and the girl. Both the boy and the nursemaid developed scarlatina in a few days, and had it severely. There was at that time no other case in the district. I have long come to the conclusion that the desquamation stage of scarlet fever is not infectious, provided the throat is well and there is no nasal nor aural discharge.

F. J. VINCENT HALL, M.B., Ch.B., etc.

Redhill, South Yardley, Birmingham.

A CASE OF SPLENOMEGALIC POLYCYTHAEMIA.

THE following case is of interest in connexion with Dr. Saundby's paper published in the BRITISH MEDICAL JOURNAL of May 18th. The patient, a labourer, aged 67, was recently admitted to the South Devon Hospital, under the care of Dr. Fox. His history was that for seven months he had had pain in his left side, followed by the appearance of a swelling. He had lost flesh and complained of weakness.

State on Examination.—He is of a very florid appearance, but is not cyanosed and does not complain of shortness of breath. His body is covered with psoriasis, but there is no oedema anywhere. There is no enlargement of the heart. The sounds are clear. The pulse is regular, 78, and the blood pressure 140. The spleen is much enlarged, reaching to the umbilicus and to the middle line. It is not tender. The liver can be felt three fingerbreadths below the costal margin. The urine is normal. With the ophthalmoscope the retinal veins are seen to be large and full but not tortuous. The optic disc is normal. There are some opacities in the lens. The knee-jerks are normal. Examination of the blood shows:

Red corpuscles	...	... 8,320,000.
Haemoglobin	...	... 140 per cent.
Leucocytes	...	... 12,000.

The differential count of the leucocytes shows nothing abnormal. The red cells are large, and evidently contain plenty of haemoglobin.

On puncturing the lobe of the ear the blood does not run readily, and it has the appearance of very dark venous blood. In making films, on account of the increased viscosity, the blood does not flow out easily between the two cover-slips. Coagulation takes place slowly.

REMARKS.—This case is evidently one of splenomegalic polycythaemia. The man is older than any previously recorded case of the disease, which is at present only in its early stage, for the patient is able to be up and about, and has no urgent symptoms. I regret that lack of time has prevented me from making more than the ordinary clinical examination of the blood, but I hope to be able to make some further observations later. I am indebted to Dr. Fox for permission to publish the case, and to Mr. R. A. Bowling, House-Physician, for some of the notes.

W. L. PETHYBRIDGE, M.D., B.Sc.,

Plymouth. Honorary Pathologist, South Devon Hospital.

A CASE OF SIMULTANEOUS DISLOCATION OF BOTH SHOULDERS.

T. M., aged 26, a powerfully-built labourer, was recently admitted to the Durham County Hospital suffering from a subglenoid dislocation of the left shoulder and a subcoracoid of the right, produced simultaneously.

He was controlling, by means of a hand crane, the descent down an incline of a wagon loaded with a heavy boiler. The rope became temporarily slackened by an obstacle, the removal of which caused the crane handle to fly rapidly round, dragging the man with it. It is remarkable that there were no other injuries.

Durham. D. G. HUNTER, M.B.

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

SUNDERLAND INFIRMARY.

A CASE OF COMPLETE VOLVULUS OF THE SMALL INTESTINE.

(Reported by WILLIAM ROBINSON, M.S.Durh., F.R.C.S.Eng., Honorary Surgeon.)

THE patient in the following case—a cartman, aged 49—was seen by me, in consultation with Dr. Morton, on March 19th, 1907, suffering from complete constipation and vomiting for three days, unrelieved by medicines and enemata.

State on Examination.—There was a big and old-standing left inguinal hernia, which was tense and without impulse, and a truss had been worn for years. Strangulation of the bowel was diagnosed, and he was removed at once to the infirmary.

First Operation.—An hour later I cut down on the sac, which was overlaid by a thick pad of indurated fat. The sac contained a mass of livid, lustreless, and lobulated omentum, twisted on itself four times from left to right, but not adherent. A loop of purple and much distended small intestine was found constricted at the internal ring, and the bowel above much congested. Serous fluid escaped from within the abdomen, and on enlarging the opening several other coils of small intestine within the abdomen were seen to be in the same state. A radical cure by Bassini's method was performed.

Result.—The obstruction was relieved, and diarrhoea set in, which continued more or less up to April 23rd; his temperature remained normal, or almost so, but his pulse was always somewhat thready and very frequent (100 to 120), and he was not quite comfortable in his abdomen. On April 25th he went home, and immediately began to vomit, and his bowels refused to act. On the 28th I saw him again, with Mr. Morton, and found his abdomen much distended, with big, visible coils of intestine, frequently in a state of peristalsis.

Readmission.—I recommended his immediate return to the infirmary, but he did not consent to this until April 30th, when he was readmitted with five days' complete obstruction; pulse 120, temperature subnormal, a pinched face, and frequent pumping up of green bilious vomit.

Second Operation.—Under ether, an incision was made along the left semilunar line, and after a difficult search among the enormously-distended and congested gut, it was found that the mesentery of the lower four-fifths of the small intestine had become twisted on itself through a complete circle from left to right (clockwise), that there were two strong bands of adhesions compressing loops of the bowel under the liver, and the coils of the implicated small gut were matted together by innumerable slight fibrous adhesions, which could be broken down with the finger. After dividing the two strong bands it was found impossible to unfold the volvulus, and as it was of no use performing an enterostomy just below the duodenum, especially as the patient was in a hopeless and

EPSOM COLLEGE.

ANNUAL GENERAL MEETING.

THE annual general meeting of the Governors of Epsom College was held on June 28th, under the presidency of Mr. HENRY MORRIS, Treasurer. Among those present were: Sir R. Douglas Powell, Bart.; Sir William Church, Bart.; Sir Constantine Holman, Mr. J. Paul Bush, C.M.G.; Mr. C. L Smiles, Dr. Godson, Mr. Croft, Dr. Charles Caldecott, Dr. Needham, Dr. Collier, Dr. St. Clair Shadwell, Dr. F. Taylor, Mr. George Eastes, and Dr. Tirard.

The report presented by the Council for the year 1906 showed that there had been an improvement in subscriptions, donations, and bequests, with the result that the account showed a surplus of £836, after a further sum of £771 in connexion with the drainage and sanitary operations had been deducted. The amount expended on these extensive but necessary works had reached the large total of £8,000, and to provide this all the stocks belonging to the general purposes fund had been sold, the only remaining asset being sundry mortgages amounting to £2,550. The Council pointed out that there were so many deserving candidates for pensionerships and foundation scholarships that great distress would be caused if the numbers at present assisted were to be reduced; yet the Council could not possibly continue to fill all vacancies as hitherto unless the income of the foundation be maintained. Each year many supporters were lost through death, so that it was essential that fresh annual subscribers should be secured to take their places if the beneficent work of the foundation was to be continued uninterruptedly. The Council proposed, owing to the rapid increase in the number of applicants, to amend the rules for Morgan annuities so as to raise the limit of age for candidates from 60 to 65 years. Under the will of the late Miss Mary Grace Cheyne, who left a sum of £1,000, duty free, the Council has been able to found an annuity of the annual value of £30 "for the daughters of medical men, they being Protestants." The three Morgan annuities and the new annuity are the only pensions available for the daughters of medical men. Under the will of the late Miss M. N. H. Armstrong an Armstrong scholarship of £60 a year has been founded, to be tenable for three years at the University of Oxford or Cambridge, and will be awarded to a boy who on leaving Epsom College passes a creditable examination in classics at the summer examination of the school. The report on the discipline, work, and health of the school was very satisfactory. A number of open scholarships and exhibitions had been won at the universities, and fourteen boys had passed the whole or part of the preliminary scientific examination at the University of London.

The CHAIRMAN, in moving the adoption of the report, referred to the deaths of Sir Joseph Fayrer, Bart., who had generously supported the College since 1858, and had been for fourteen years chairman of the council; Sir Arthur T. Watson, Bart., K.C., who had been a member of the council for twenty years, and had during that period given professional advice unreservedly for the benefit of the College; and Mr. Thomas H. Wakley, a Vice-President, who had been greatly interested in the College since its foundation, and had generously aided the scheme by which annuitants received an increased pension in lieu of residence at the College. The number of boys at present in the College—263—was the highest on record, and the greater facilities provided by the Council last year for the admission of day boys had resulted in an increase in their number.

The result of the election for pensioners and foundation scholars was declared as follows:

PENSIONERS.

	Votes.
France, Mary	6118
Phillips, Thomas G.	5243
Hemingway, Louise	3994

FOUNDATION SCHOLARS.

	Votes.
Harlock, Eric D.	13212
French, Dasmond A.	6223
Beasley, Henry E.	6219
Barr, John W.	5342
Ewbank, Charles H. P.	5112
Wood, Arthur R.	4857
Bland, L. Harry F.	4731

MEDICAL NEWS.

BY command of the King the Anthropological Institute will henceforth be known as the Royal Anthropological Institute of Great Britain and Ireland.

AT a meeting of the British Balneological and Climatological Society on May 30th, Dr. W. J. Tyson, of Folkestone, was appointed President for the year commencing October 1st, 1907. Dr. Fortescue Fox was elected to succeed Dr. Morgan Dockrell as librarian.

LAST week the Earl of Rosebery opened at Cheddington, Bucks, a complete water system, constructed at an approximate cost of £2,000, as a memorial to the late Lady Rosebery. This is, we believe, the first occasion —at any rate, in recent times—when a memorial has taken this highly practical and commendable form. Lord Rosebery said that whatever were the causes which induced people to leave the country for the towns, one clear duty was to make the country worth living in; Cheddington now had an abundant supply of pure water, which perhaps had more to do with health than anything else, with the exception of air.

THE annual general meeting of the Poor-law Medical Officers' Association of England and Wales was held at the Trocadero, Piccadilly Circus, W., on June 27th. Surgeon-General Evatt, C.B., President of the Association, was in the chair. The report of the Council and balance sheet were duly presented and unanimously adopted. The financial condition was considered very satisfactory, and it was decided to invest another £100 in Consols. The officers and Council for last year were re-elected, with the exception of the Treasurer, Dr. Gayton, who desired to retire from that office. Dr. Napper was unanimously elected Treasurer in his place, and the thanks of the Association were given to Dr. Gayton for his long and able services in the past. The members and their friends afterwards dined together. A musical entertainment was given by Mr. T. F. Noakes, and a very pleasant evening was passed.

THE third annual general meeting of the Association of Scottish Medical Diplomates was held on June 19th at 11, Chandos Street, London, W. The report of the council and the treasurer's balance sheet were presented and adopted by the meeting. The rules of the Association, as finally drafted by the Council, were unanimously approved after full discussion. The retiring president, Dr. A. Farrer, was appointed Honorary Vice-President; Dr. David Walsh was unanimously elected to the office of President for the ensuing year, 1907-8, while Mr. Sydney Stephenson, F.R.C.S.Ed., was re-elected Treasurer; and Dr. Arthur Harries, Honorary Secretary for the same period. Some appointments to vacancies existing on the executive council were likewise filled. The new president congratulated the Association on the energy that it had hitherto displayed, and anticipated a career of prosperity with the hearty co-operation of London and provincial diplomates. Scottish diplomates can obtain further information from the Honorary Secretary, 11, Chandos Street, London, W.

A CONVERSAZIONE was given at the Cancer Hospital, London, on July 2nd, the guests being received by Lord Ludlow, the President of the institution, and Lady Ludlow. The wards and grounds were decorated for the occasion, and in the course of the evening opportunity was afforded to all present of making a thorough examination of the hospital and of its departments and annexes, including the nursing home and the unusually pretty chapel. The latter is supplied with an electrophonic arrangement which enables patients not allowed up to follow the services. Care was taken to bring home to the visitors the meaning and practical value of all they were shown, especially of the new pathological department and the museum. Attention was also directed to the active part the hospital is now playing in research work, a matter in which the lay authorities of the hospital show much interest; special beds are set aside for the trial of the different remedies which from time to time are thrust upon the notice of the public. In the same connexion delegates were sent some time ago to investigate the cancer serum introduced by Dr. Doyen of Paris, and also to attend the Congress on Cancer at Heidelberg. The hospital last year received 817 in-patients, and afforded relief in one form or another to over 17,000 persons attending the out-patient department. The finances of the institution are in a very unsatisfactory condition. Of late years it has been necessary to draw heavily upon the capital fund to meet annual maintenance expenses.

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF LONDON.

PROPOSED INSTITUTE OF MEDICAL SCIENCES AT SOUTH KENSINGTON.

The Committee of the Senate.

AT a meeting of the Institute of Medical Sciences Committee of the Senate on June 11th, the general question of the scheme for the Institute of Medical Sciences was considered in view of the fact that the Commissioners of the 1851 Exhibition have agreed to reserve a site for the proposed institute until December 31st, 1907. The Committee also had before it the following communication from the Board of Governors of St. George's Hospital:

St. George's Hospital, S.W.
April 22nd, 1907.

To the Vice-Chancellor of
The University of London.

Sir,—The Board of Governors of St. George's Hospital have had it brought to their knowledge that some change of policy is likely to be urged upon the Senate of the University of London, with regard to the concentration of the courses of instruction in the preliminary and intermediate subjects of the medical curriculum. The Board respectfully beg you to remind the Senate of the University of the following facts: In July, 1905, an arrangement was concluded between the University authorities and the Board of this hospital, which provided for—(1) the cessation of any course of instruction in the preliminary and intermediate subjects of the medical curriculum at St. George's Hospital Medical School; (2) the transference of students and of certain teachers in these subjects from the medical school to other centres of the university—namely, University College and King's College; and (3) the guarantee on the part of this Board of the payment of £500 per annum for three years to the University chest. The Board were given to understand that the University had decided definitely to adopt the policy of the concentration of the preliminary and intermediate studies, and that in the near future a further centre for instruction in these subjects would be erected in the immediate neighbourhood of the Imperial Institute; for without this centre there could be no effective concentration, inasmuch as University College and King's College did not meet the requirements of other schools. The representatives of the Board pointed out to the delegates of the University that the transference of their students to University College and King's College must act to the detriment of their school and diminish the number of students entering each year, until this third centre had been erected; but they agreed to sacrifice their own immediate interests and adopted the agreement of July, 1905, referred to above, as they felt so strongly that the policy of the university was the right one, and the one most calculated to assist medical education in London and to attract students to the metropolis. They entered into this agreement, however, on the distinct understanding that a third centre of instruction would be erected in the immediate neighbourhood of the Imperial Institute within a few years. They were informed that such a scheme was the settled policy of the Senate of the University, that it had been approved *nemine contradicente* by the Medical Faculty, that an appeal had been issued soliciting funds for such an institute, that His Majesty the King had expressed approval of the scheme and had graciously subscribed to the Appeal, that His Royal Highness the Prince of Wales had referred to the matter in terms of appreciation, and that King Edward's Hospital Fund had expressed satisfaction on the ground that such concentration would put an end to the practice of the funds of the charitable public, which were subscribed for hospital purposes, being diverted to the purposes of medical education.

The Board is of opinion that any departure from the settled policy of the University in the matter of the erection of a third centre in the immediate neighbourhood of the Imperial Institute would be a grave breach of the contract entered into between the University and this hospital, and they feel assured that the Senate will refuse, when all the facts are considered, to countenance any such breach of faith.

I am, Sir,
Your obedient servant,
(Signed) A. WILLIAM WEST,
Treasurer.

The Committee also had before it the resolution adopted by the school meeting at Guy's Hospital on May 7th, published in the JOURNAL of June 15th, p. 1461.

In view of the fact that the sum hitherto raised for the Institute of Medical Sciences is inadequate to cover the expenses of the scheme generally approved by the Senate on October 22nd, 1902, the Committee recommended as follows:

That the Institute of Medical Sciences Committee be authorized to prepare a modification of the above-mentioned scheme, with power to communicate with the governing bodies of the medical schools of the University, and of the hospitals with which they are connected, with the faculty of medicine, and with such experts on scientific, medical, and architectural questions as they may think desirable.

The Principal was instructed to inform the treasurers of St. George's Hospital and of Guy's Hospital respectively that their communications are receiving the earnest attention of the Senate.

The Faculty of Medicine.

At a meeting of the Faculty of Medicine held on Friday, June 28th, the following resolution was proposed by Dr. Leonard Hill:

That in view of the inadequate response to the appeal for the proposed institute of medical sciences, the incorporation of University College, the impending incorporation of King's College, and the published decision of four of the medical schools not to participate in the scheme of concentration at South Kensington, this faculty is of opinion that it is no longer desirable to proceed with the scheme for the institution of a third centre for the teaching of preliminary and intermediate medical sciences at South Kensington.

An amendment was proposed by Professor Starling:

That the Senate be advised to proceed with the provision at South Kensington of an institute for teaching the preliminary and intermediate medical subjects, for the students of such medical schools as are willing to give up the teaching of those subjects; on the understanding that no attempt be made, by method of examination or otherwise, to favour the university centres at the expense of other medical schools, and that any person at present engaged in teaching the preliminary and early medical subjects at schools which are desirous of taking part in this scheme shall not suffer either in position or emolument.

After considerable discussion the amendment was put to the meeting and was lost by 72 to 77 votes.

The original resolution was then put and carried by 77 to 72 votes.

WESTMINSTER HOSPITAL MEDICAL SCHOOL.

At Westminster Hospital, on July 2nd, Mr. Alfred Lyttelton distributed the prizes to the successful students of the medical school. Mr. E. P. Paton announced that the Epsom Scholarship of 120 guineas was awarded to Mr. A. E. Newth, and that Mr. S. Hoyte had won scholarships amounting to £51.

Mr. Lyttelton, in his address to the students, referred to the manifold qualities necessary for the successful practitioner of medicine. A doctor could rarely know all the circumstances in a case, and had to exercise divination and combine with the gentlest manner the virile qualities of decision and authority aided by intuition. There were two qualities that were as valuable for success as intellectual gifts, and those were patience and a cheerful continuity of perseverance. It was difficult to go on improving in professional studies without the encouragement of some reward, but Mr. Lyttelton declared that in this "tough" world the men who did big things were those who went on improving after about 35. Turning to the question of athletics, he said that they were overdone in the present age, but that that should not prevent rational men from doing what was necessary to keep body and nerve sound and true.

ST. THOMAS'S HOSPITAL.

Prize Distribution.

Mr. H. Rider Haggard distributed the prizes to the successful students at St. Thomas's Hospital Medical School on June 26th in the Governors' Hall of the Hospital. Mr. J. G. Wainwright, the Treasurer of the Hospital, spoke of the difficulties of carrying on medical education at the present time, and said that the Governors of the Hospital recognized that the preliminary teachers in the Medical School were most inadequately paid, whilst the hospital physicians and surgeons received absolutely nothing for their lectures and teaching. Certain Government and County Council funds were available for secondary education, but medical education was apparently considered not to need any such help. Owing to this the London Medical Schools were handicapped in competition with the Provincial Universities able to offer many attractions and a cheaper education to students seeking to qualify for the profession. The Governors of the hospital had determined to make an appeal for the endowment of a Pathological Research Fund to promote the study of pathology.

Mr. Rider Haggard, after distributing the prizes, delivered an address to the students. He said, referring to his novel, *Dr. Therne*, that in the second chapter of this novel there was a ghastly description of the ravages of small-pox in a small town in a wild part of Mexico; in the course of his travels he had seen a great deal of the terrible results of the want of vaccination and he had used fiction in order to bring home the error of their ways to some who did not believe in vaccination. His plan was so successful that many of the people who had disbelieved consented to be vaccinated. He then proceeded to deal with the superstitions of the present day. The scientific and religious heresy of Christian Science came from America and was spreading and increasing in this country, and thousands of people were arguing that the medical profession was useless. Mr. Rider Haggard then turned to the subject of the Peculiar People, and described how a man had been imprisoned for two months for causing the death of two of his children by refusing to call in a doctor. The speaker next touched upon the question of rural depopulation, and observed that medical men would have to face the modern condition of the crowding of a large population into the cities. No one knew what was to be the result of that vast, silent, and continuous movement from the land into those collections of

boxes of bricks and mortar called towns The concentration caused suffering and sickness, and although medical men could not remedy the condition they must try to deal with the effects. The remorseless shrinkage of the birth-rate would engage their attention when they went into practice, and the frightful wastage of child life must be dealt with by the scientists of the future and necessary precautions instilled into the minds of the parents. Mr. Rider Haggard concluded by pointing out that medical men by cultivating imagination would gain in sympathy, and with sympathy they would be endowed with greater insight. He exhorted the students to devote themselves to hard continuous work, and thereby earn the noble title of "the beloved physician"

UNIVERSITY OF MANCHESTER.

Vice-Chancellor's Annual Statement.

FROM the annual statement for 1906-7 it appears that the total number of students attending in the Faculty of Medicine was 325, including 14 women students. Of these 167 were working in preparation for the Degree Examinations of this University; 13 for the University of London; 4 for other universities; 4 were preparing for the Fellowship of the Royal College of Surgeons; 49 were preparing for the Conjoint Examination of the Royal College of Physicians and Surgeons of England; 15 for the Triple Qualification of the Scotch Colleges; 73 were working in the following special departments, namely, dental, 36; pharmaceutical, 6; public health, 31.

The important change in the medical curriculum, under which a larger part of the five years' curriculum will be devoted to clinical work and to the subjects subsequent to the second M.B. Examination, has now come into force. A new ordinance has also been passed under which it will be possible to proceed to the degree of M.D. by examination as an alternative to the presentation of a dissertation. The examination will be of an advanced character, and will include clinical and practical work as well as written papers.

New regulations have been made for securing that the course of practical study for students in midwifery shall be thorough and complete. Regulations of a similar character have since been laid down by the General Medical Council. The facilities afforded in St. Mary's Hospitals make it possible to carry these regulations into effect in Manchester in a satisfactory manner.

The number of students in the four halls of residence was 111.

Graduation Ceremonial.

The Graduation Ceremonial took place on June 29th, when the degree of Doctor of Medicine was conferred on Roy Appleton, Colin McKean Craig, Henry Dean Haworth, Charles Sefton O'Neill, Eric Maurice Wilkins.

The dissertations of Drs. Craig, O'Neill, and Wilkins were deemed worthy of commendation.

The University Prize in Medicine was divided between Herbert Evelyn Allanson and John Gow.

The following candidates have been approved at the examinations indicated.

FIRST M.B. (*Part I: Chemistry and Physics*).—N. Duggan, A. H. Holmes, L. W. Howlett, D. S. Jones, W. H. Kauntze, W. H. Laslett, N. Matthews, Jane C. Miller, L. Moss, F. Oppenheimer, S. B. Radley, C. F. Scott, C. M. Stallard, R. P. Stewart, J. S. B. Stopford, G. K. Thompson, W. Warburton, H. D. Willis, *H. G. Peake.

FIRST M.B. (*Part II: Biology*).—C. E. Butterworth, V. S. Cox, N. Duggan, C. W. Fort, A. H. Holmes, L. W. Howlett, D. S. Jones, W. H. Kauntze, W. H. Laslett, T. W. Martin, N. Matthews, Jane C. Miller, L. Moss, F. Oppenheimer, W. H. Parkinson, H. G. Peake, S. B. Radley, J. Rothwell, C. M. Stallard, R. P. Stewart, W. Stirling, J. S. B. Stopford, G. K. Thompson, W. Warburton.

*Physics.

UNIVERSITY OF WALES.

UNIVERSITY COLLEGE, CARDIFF.

IN return for a grant of £200 the authorities of University College, Cardiff, have offered to allocate to Newport five free studentships and admission to certain classes at a fee of £13 13s. instead of £30 Newport students who attend for a portion of a course are to be admitted to the majority of classes on payment of one-third the usual fees, and Newport is to have the right to elect a representative on the Council of the College. The Secondary Committee recommend that the offer should be accepted.

ROYAL COLLEGE OF SURGEONS IN IRELAND.

THE Barker anatomical prize for 1908 is offered for dissections to illustrate the muscular and ligamentous anatomy of the shoulder-joint. The prize, which is of the value of 20 guineas, is open to any student whose name is on the anatomical class list of a school in the United Kingdom. Preparations must be received on or before April 30th, 1908, by the curator, from whom further particulars can be obtained.

TRINITY COLLEGE, DUBLIN.

THE following candidates have been approved at the examinations indicated:

PRELIMINARY SCIENTIFIC (*Physics and Chemistry*).—B. G. Quinlan, R. G. M'Entire, H. L. W. Woodroffe, P. Murphy, J. M. Elliott, T. G. Harpur, A. Chance, E. Ll. F. Nash, T. L. Bookey, F. C. Crosslé, A. F. Shaw, L. Shiel, O. C. Tandy, E. H. H. Lloyd Dodd, F. Breen, A. E. Malone, G. M. Maybury, R. W. Murphy, H. E. Williams, H. M'C Fleming, M. M'Knight, J. C. Kelly, A. A. Louw, R. C. M'Kelvy, H. L. Blackley.

PRELIMINARY SCIENTIFIC (*Botany and Zoology*).—*H. L. W. Woodroffe. *A. F. Shaw, *F. C. Crosslé, *T. G. Harpur, *Georgina Revington, *H. T. Bates, *Eileen M. Hewitt, *F. B. M'Carter, *G. G. P. Beckett, Dorothy K. Milne, F. Usher, P. D. Long, R. W. Murphy, J. T. Higgins, T. King-Edwards, H. S. Campion, A. Chance, Marjory Chapman, F. T. G. Corscadden, R. Grandy, R. P. Pollard, J. N. G. Nolan, C. Rutherford, S. D. Crichton, B. G. Quinlan, R. G. Ball

FINAL (*Part II, Midwifery*).—F. R. Seymour, H. de C. Dillon, W. A. R. Spong, W. E. M. Armstrong, R. de C. Wheeler, A. E. Knapp, T. P. Dowley, J. H. Waterhouse, A. H. Smith.

FINAL (*Part II, Surgery*).—*W. Pearson, *R. E Wright, *R. G. S. Gregg, *A. J. Powell, W. E. M. Armstrong, F. Stevenson, H. de C. Dillon, O. St. J. Gogarty, T. B. W. MacQuaide, R. Holmes, W. D. Mitchell, J. C. C. Hogan, Madeleine S. Baker, C. H. O'Rorke, J. E. McFarlane, J. C. Ridgway, W. A. R. Spong.

* Passed on high marks.

Medico-Legal.

THE WORKMEN'S COMPENSATION ACT AND THE MEDICAL PROFESSION.

THE DEFINITION OF "WORKMAN"

THE following note on this point appeared in the *Law Journal* for June 29th: The first question which naturally suggests itself is, Who is a workman within the meaning of the Act? Subject to the exception of (1) any person employed otherwise than by way of manual labour whose remuneration exceeds £250 a year, (2) any person whose employment is of a casual nature and who is employed otherwise than for the purposes of the employer's trade or business, (3) policemen, (4) outworkers, and (5) resident members of the employer's family, "workman" means any person who has entered into or works under a contract of service or apprenticeship, and it is not necessary that his work be manual. This definition implies that unless the relation of master and servant exists between the parties, there is no right to compensation, and difficult points will certainly arise in determining whether an applicant is a servant or a contractor, especially as regards persons who do work of a domestic kind. For instance, is a man engaged to clean windows once a week a "workman"? Probably not, in most cases, for he only has to do a definite job, and is entitled to do it in his own way. Again, the position of a charwoman or laundress who is engaged to clean offices or chambers is not free from doubt. Frequently she can choose her own time provided that she keeps out of the way in business hours, and is not, in fact, subject to any control in the performance of her work. It is impossible at present to lay down any general rule as to her legal position.

ALLEGED STREET OBSTRUCTION BY A MOTOR CAR.

A CASE which was heard on June 29th at Redditch involved a point of some interest to the practitioner who uses a motor and acts as his own chauffeur. Mr. Richard Henry Spencer, surgeon, of Alchester, was charged with obstructing the free passage of the Worcester Road, Inkberrow, on June 19th. A constable stated that at 8.50 p.m. on the night in question he saw a motor car standing in the Worcester Road. He watched it until half-past 10. Two horses which were being driven down the road shied, and refused to pass the car. When he spoke to defendant about causing an obstruction he replied he had been on business. In cross-examination he said that if a car had been there for a minute he would charge the driver with obstructing the road. Witness accepted the statement that the road was 19½ ft. wide, and that the width of the car was 4 ft. 9 in. at its widest part. He admitted that he did not draw Mr. Spencer's attention to the matter until he came out of the house. The car was silent. Lewis Simpson, farm labourer, Inkberrow, corroborated, but admitted that the car was close to the kerb, and there was plenty of room for vehicles to pass. It was submitted on behalf of the defendant that there was no case for him to answer. There was no wilful obstruction. The Chairman said the Bench were of opinion that there was no case against defendant. The charge was accordingly dismissed. The Superintendent of Police intimated that he should ask the Bench to state a case.

THE report for the year 1906 of the British Ophthalmic Hospital, Jerusalem, belonging to the Grand Priory of the Order of the Hospital of St. John of Jerusalem in England, shows that a great deal of useful work is being done, and that the hospital is winning still high opinions both from the authorities and from the people it is designed to benefit. The Patriarch of the Orthodox Greek Church has sent a donation of £16 to maintain a bed for one year, and the Turkish Government has now granted exemption from taxation to the whole of the property of the Order in Jerusalem. The number of in-patients in 1906 was 912, and of new out-patients 8,528; the number of operations was 1,542, anaesthetics being administered in 780 cases. The operations on in-patients included 719 for diseases of the cornea and 120 for diseases of the lens.