

until periodical and frequent examinations of the children are carried out by specially-trained medical men—not by semi-educated nurses—and until all suspicious and doubtful cases are at once submitted to competent experts. It may be easy enough for a nurse, or any one else who has seen a few cases, to "spot" an ordinary case of ringworm, with its patches of stumps or broken hairs, but every dermatologist knows how frequently old-standing cases come before him which have been wrongly diagnosed—even by medical men—and mistaken for eczema, seborrhoea, etc., or are supposed to be "cured," because there is hair all over and only a little scurf to be seen; cases, indeed, the true nature of which can only be made certain by skilled microscopical or cultural investigation. Not only do I contend it to be the duty of the authorities to adopt efficient measures, which is a matter quite feasible, for preventing, to a great extent at least, the contamination of healthy children who are forced to attend the elementary schools, but I further submit that the responsibility of the treatment of an unfortunate child who has presumably contracted a contagious skin disease at a Government school should also be undertaken by the State. It is, in my opinion, a cruel thing to force a child to go to a school where ringworm is known to exist, and then to saddle the poor parents with the expense and trouble of the subsequent treatment of the disease contracted at that school. It may be said that such children might be taken to the neighbouring hospitals for treatment, and so many of them are, but this also means trouble and expense, loss of time and wages for the family, as well as trouble and expense to the hospitals, to whose funds I am not aware that the county councils ever contribute.

It is, no doubt, mainly a question of expense. A few years ago, perhaps, ignorance, supineness, and penury in such matters might all have been laid to the charge of the School Board; but at the present day, and considering the enlightened interest the officers of the Education Department are taking in this International Congress, it is to be hoped that the lay authorities will come to realize the importance of the subject and to see that economy ought to be practised in less essential matters than the prevention of disease.

A great deal that I have said in reference to ringworm in schools may equally be said in regard to pediculosis and some other objectionable and preventable contagious diseases of the skin. I once, in conjunction with Dr. Alder-Smith, examined the heads of a large number of children in two London Board Schools; we found that only 2 per cent. of the girls' heads were free from pediculi or their ova. I do not think that this appalling proportion of infected heads is at the present time quite so great; but I am sure that a very large number of the children now attending the metropolitan elementary schools are so infected, and that there is still strong probability of any clean child attending these schools soon becoming in a similar condition. Not only do they contract the pediculi by close association in the class-rooms, passages, and play grounds, but also through their hats, which are hung in the anterooms one over the other and closely together.

MEMORANDA:

MEDICAL, SURGICAL, OBSTETRICAL.

TRANSPLANTATION OF THE URETERS.

ANOTHER operation of extraperitoneal transplantation of the ureters into the rectum for extroversion of bladder, performed in an exactly similar fashion to that in the case reported by me in your columns on June 22nd, p. 1481, was performed in this hospital on a boy of 13 years of age on April 15th of this year.

The patient made a good recovery, and was discharged from the hospital on the 15th of the following June.

For three weeks before the date of discharge from the hospital he was able to retain urine in his rectum from three and a half to four hours during the waking hours, that is, from 5 a.m. to 9 p.m. During the sleeping hours he was able to retain urine in his rectum from 9 p.m. to 5 a.m.

T. V. ARMUGAM,

Victoria Hospital, Bangalore, Madras, S. India.

DIURETIC ACTION OF THEOSINE SODIUM ACETATE. A DRUG which seems likely to take a prominent place among useful remedies is theosine sodium acetate. Its effect in the first case in which I employed it was striking, not to say dramatic.

The patient—a girl aged 13—was admitted into hospital with advanced aortic and mitral disease. She had been an in-patient of mine on three previous occasions, and, with the help of rest and digitalis, had each time been enabled to leave the hospital comparatively well. On her fourth admission she was so bad that I had little hope of her recovery. Dyspnoea was urgent: the heart was beating tumultuously, and the apex could be felt almost as far outwards as the axillary line; there was marked pulsation of the liver, the lower extremities and abdominal walls were anasarca, and considerable ascites was present.

The patient was put on digitalis, but this drug by itself did not seem to do any good. As the abdomen continued tense and there was considerable impediment to the descent of the diaphragm, paracentesis was resorted to, and 140 oz. of fluid were drawn off. A fortnight later the same amount was again removed, and the operation was repeated on ten other occasions—that is, twelve times in all—at intervals of a fortnight, the average amount of fluid removed each time being 140 oz.

When the thirteenth operation was done, the patient was almost moribund, and she begged that she might be tapped again, in the hope of getting relief from the distressing dyspnoea. It was then that the house physician, Mr. Hayes, conceived the idea of trying the effect of theosine sodium acetate. He accordingly ordered 5 grains to be taken every four hours. The first dose was given at seven o'clock in the evening. The effect was magical. During the night enormous quantities of water were passed, and by the next morning the whole of the anasarca had disappeared from the lower extremities, while not a trace of ascites remained. The patient could now breathe quite comfortably, and scarcely recognized her own anatomy, making display of the fact that she could easily put both her legs into a stocking which the day before could with difficulty be drawn on one leg.

During her stay in the hospital she had been taking digitalis on and off, and at the time of administering the theosine salt she was having five drops of the tincture thrice daily. I therefore tried the effect of leaving off the digitalis and keeping her on the salt alone. Directly this was done the fluid began to reaccumulate, and the same thing happened when the salt was left off and the digitalis given alone. Hence it was obvious that the copious diuresis and concomitant subsidence of the dropsy were due to the combined action of the two drugs. Theosine salt, to be effective, needs to be given with a cardiac tonic, such as digitalis. This has been my experience in all the cases in which I have given it. The patient soon after beginning this new treatment was able to walk about the ward, and in a few weeks to leave the hospital. Under the influence of digitalis, with the occasional addition of theosine, she remained for several months in better health than she had enjoyed for some time. She was then readmitted into hospital with pericarditis, to which she succumbed; but it was remarkable that throughout the whole of the illness she remained entirely free from dropsy.

I have now employed the theosine-digitalis treatment in several cases of cardiac dropsy, both in hospital patients and in others seen in consultation, and each time with the same result, although it has not always been so striking as in the above instance. I therefore feel some confidence in recommending this treatment in all cases of genuine cardiac dropsy. When, however, there is primary blockage in the lungs, as in chronic bronchitis with extreme emphysema, it is less efficacious. In the dropsy of parenchymatous nephritis the theosine salt has in my hands proved useless, but in the cardiac dropsy attending the final stage of granular kidney its diuretic action is eminently satisfactory. On the ascites occurring secondarily to primary portal obstruction the salt appears to have no effect.

A word as to the administering of the drug. It is a white powder, and may be given in cachets in doses of from 3 to 8 grains every four hours. Its effects should be carefully watched, as it is apt to irritate the stomach. This is, indeed, its chief drawback as at present administered.

HARRY CAMPBELL, M.D., F.R.C.P.
Physician, North-West London Hospital and the
Hospital for Nervous Diseases,
Welbeck Street.

ACQUIRED SYPHILIS IN AN INFANT, WITH TRANSMISSION TO THE MOTHER.

ALTHOUGH suspicion is from time to time aroused that so-called congenital syphilis in babies has been acquired since birth, it is but rarely that the proof is forthcoming. I have recently had an interesting example, in which it has been possible to ascertain that the infection was in no sense "congenital," either conceptional or post-conceptional.

The infant was a girl, aged 12 months, who about six weeks ago developed a cutaneous eruption, for which her mother sought advice. The child was well formed, plump, had cut several teeth, and had not suffered from "snuffles," or any previous skin eruptions; but now the whole trunk, the face and limbs were covered with a uniform yellow eruption, looking like wet "chamois leather," not raised, nor scaly, but having a greasy moist appearance without exudation; the rash was patchy on the scalp, while on the limbs and face irregular areas of normal skin persisted; on the vulva and round the anus were numerous condylomata; the throat was red and sore.

On inquiry, the mother submitted her opinion that the whole affair was attributable to the nefarious practice of vaccination (indeed, I have little doubt but that the case will come to the ears of, and be largely quoted by, the champions of the rights of small-pox). There was no evidence, historical or visible, that a chancre had developed at the site of vaccination, which operation had been performed when the child was 3 months old. On the other hand, there was a clear history that when she was about 8 months old a single troublesome sore had developed on the lower lip towards the left side, which had slowly disappeared in a month or six weeks, leaving a scar which after three or four months was sufficiently obvious. Two months after the appearance of the sore came the rash which, at the end of another two months, was as described above.

So in itself the case seemed to be of rather later development than an ordinary congenital case of syphilis, but the mother provided the proof. She was a well-developed, robust young woman with two older children (aged 8 and 4 years) quite healthy. She had had three miscarriages shortly after marriage, and none other since. Two months ago she attended the Bristol Royal Infirmary for a sore on the right breast, which apparently was not diagnosed, but aroused some interest and discussion. This healed in a few weeks, being dusted only with zinc oxide, and left a circular superficial thin scar on the right side of the right nipple, corresponding, so it proved, with the position of the scar in the baby's lip when placed at the breast.

The mother had a faint brown macular eruption all over the trunk, a sore throat with characteristic exudate on the tonsils, and complained of nocturnal headache and bone pains.

There seemed no doubt that she, too, had acquired syphilis, and that the breast had been the site of the chancre, which was derived from a similar and earlier lesion on the child's lip; the origin of the latter remains unexplained.

J. A. NIXON, M.B., M.R.C.P.
Physician to the Skin Department, Bristol Royal Infirmary.

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

HERTS COUNTY ASYLUM, HILL END, ST. ALBANS. A CASE OF SEVERE HEAD INJURY IN A PSYCHASTHENIC. (By BERNARD HART, M.B., M.R.C.S., Assistant Medical Officer.)

THE patient in the following case, a male, aged 40, was admitted on November 6th, 1906, suffering from a compound fracture of the skull and other head injuries. The following history was obtained: In the family, so far as was known, no cases of insanity, intemperance, or phthisis had occurred. The paternal grandfather died of "brain fever," his father suffered from squint, and had fits in childhood. The patient himself had always been a tempe-

rate, steady man, but of a reserved and unsocial nature, making but few friends. He was brought up as a baker, and worked in his father's shop until the latter failed in business. He then obtained employment as a shunter on the railway, a position which he retained till August, 1906. In 1894 he was run over by a railway truck, sustaining a compound fracture of both bones of the left leg. This injury was treated in Guy's Hospital; no noteworthy mental effect was observed. In August, 1906, he purchased a baker's business in a country village with some money inherited by his wife. The business, however, did not come up to expectations, and he was unable to make it pay. He worried considerably, and brooded a good deal, though he readily discussed the subject with his wife. On one occasion he remarked, "This place will turn my brain." For two or three weeks he has slept badly, and has been restless at night.

On the morning of November 6th, after his customary morning round, he went into the bakehouse, asking his wife to call for him at tea time. When she did so, she found him lying in a pool of blood, holding a billhook (a kind of hatchet used for chopping wood) in his hand. A broken hammer, blood stained, was found near by. When spoken to he did not answer at first, and seemed stunned, but a few minutes later he said that he wanted to "finish himself," and asked for a razor. He then quieted down, talked quite rationally, and asked when the doctor was to be expected. He was able to stand and to walk, and, on the arrival of the doctor, he assisted the latter intelligently in the dressing of the wound. He was then removed to the asylum, which he reached about five hours after the infliction of the injuries. On alighting from the carriage he staggered slightly, as if intoxicated, but was able to walk down to the ward.

State on Admission.—The patient is a strongly-built, well-nourished man. The ears have adherent lobules, but otherwise no stigmata of degeneration are present. Old healed fracture of both bones of left leg, with imperfect apposition and shortening of the limb. Temperature 98.2°, respirations 20, pulse 90—full, regular, of moderate tension. A considerable degree of arterio-sclerosis is present, and there is some tortuosity of both radial and brachial arteries. Tongue furred, but not tremulous, breath offensive. No abnormality can be detected in the thorax or abdomen. Knee-jerk present on left, almost imperceptible on right. Plantar flexion on both sides. Superficial reflexes active. Pupils of moderate size, equal, react to both light and accommodation. No disturbance in sensation can be made out—the grips are equal and of fair strength—and the movements of the facial muscles are unaffected. Numerous incised wounds of the scalp are present. They have a general antero-posterior direction, and are of varying length and depth. Situated in the median line, and running from point 1 in. above the glabella to the mid-point between glabella and occipital protuberance, is an irregular cavity fringed with half-severed strips of scalp. Over this area a large part of the scalp has disappeared, together with the outer table of the calvarium. The inner table, broken into several distinct pieces, which move up and down with the brain pulsation, is still present. In the apertures between these pieces small portions of the underlying dura mater can be seen. The latter is, apparently, uninjured. Haemorrhage has ceased. The facial expression is dull and despondent—the angles of the mouth are depressed, the inner ends of the eyebrows are drawn together, and the remaining facial muscles lack tone. The patient lies quite still, and does not speak unless addressed, but occasionally he sighs, and seems as if on the verge of tears. He is clear and collected, and gives a complete account of recent events, but gets somewhat irritable with prolonged questioning. He states that his business troubles preyed upon his mind, so that he hardly knew how to act. The idea of committing suicide never really occurred to him, but to-day the misery of everything seemed suddenly to overcome him, and he hit himself with the chopper without really knowing what he was doing. He thinks that he then lost consciousness, but is not certain. He remembers his wife coming in to call him to tea; it was only then that he realized what he had done. Still, he is tired of it all, and hopes that he will die soon. He emphatically denies having used a hammer in addition to the chopper. All this is related in a low, tired voice, with frequent sighs. He is docile, and willingly assists in the various manœuvres necessary for his treatment.

Progress.—The patient was kept in bed on a milk diet. The head was shaved, some of the ragged portions of scalp removed, and antiseptic dressings applied. November 7th, 1906: He had no sleep during the night, but lay quiet and motionless. Temperature this evening rose to 100°. Urine rather high coloured, faintly acid; no albumen or sugar; specific gravity, 1030. November 8th: Slept one hour during night. Temperature 98.6°. Pulse harder. Ophthalmoscope shows some engorgement of retinal veins. Patient complains of slight headache and of severe localized pain in the neighbourhood

by Drs. Mathieu, Burgerstein, and Kerr, that it would probably lead to greater progress if such bureau was not localized, but if each country had its own centre for the diffusion of knowledge, and to act as a clearing house in the matter of school hygiene, statistics, laws, and regulations. Finally, to supervise in scientific matters, and generally to do all that is possible at all times or places to forward the human interests which are bound up in the special lines of knowledge included in school hygiene, the International Committee has formed a small council.

This Council has all the powers of an ordinary committee. It can form subcommittees of experts on special inquiries. The usual committee procedure is to sit round a table and discuss matters, but this Council will deal with the various subjects that arise, submitting the different topics by correspondence, collating the answers, and finally making pronouncements in urgent matters after a meeting of the Council.

It is obvious that for efficiency such Council should be small and yet have in it elements to secure permanence, and at the same time possibilities of slow but constant change. This has been done by deciding that it shall consist of the President of the past Congress, the President of the Congress which has just been held, and the President of the next Congress. Nine other members are to be elected, of whom three are to be from the country where the Congress was last held, and three from the country where it will be held next, three being selected from other lands. Certain matters, for instance, will almost at once come under the consideration of this Council. Such might be quoted as:

The question of how medical inspection of schools can best be carried out with the maximum of efficiency and minimum of cost.

The question of how far the laws of health can best be imparted to the coming generation, so that later they will know how to care for themselves and those dependent on them.

The best systems or methods of physical training for both sexes at various ages.

The feeding of children requiring proper nutrition, so that it shall be done without developing pauperism, and with regard to those upon whom the cost falls.

These four matters are being dealt with practically in a great variety of ways, and this Council should be able to collect and analyse known facts to show which methods are best for any town or State.

It is obvious that information thus digested will have a very great value, politically as well as educationally, and this Council may in time come to be officially regarded as quite analogous, in matters of school hygiene, to that other Congress of Peace now in session at the Hague.—We are, etc.,

LAUDER BRUNTON,
President.
JAMES KERR,
E. WHITE WALLIS,
Honorary General Secretaries.

August 14th.

MEDICAL NEWS.

THE Central Midwives Board has notified that 243 candidates presented themselves for the examination for the certificate in midwifery held on August 1st last; 200 passed, and the percentage of failures was 17.7. The list showed that of the 200 successful candidates, 150 were trained by hospitals or nursing societies, and 50 by private teachers.

MR. HARCOURT COATES, Consulting Surgeon to the Salisbury Infirmary, and formerly President of the Southern Branch of the British Medical Association, who died on June 16th at the age of 54, has left the residue of his estate upon trust to build a wing or surgical ward to be known as the "Harcourt and Maud Coates Ward." The estate has been valued at £41,486 gross, with net personality £34,136. The Infirmary will probably benefit to the extent of about £20,000.

More than fourteen hundred persons have already notified their intention to take part in the Fourteenth International Congress of Hygiene and Demography to be held in Berlin from September 23rd to 29th. Among them are delegates of all the chief countries. The secretary of the English Committee is Professor G. H. F. Nuttall, 3, Craumer Road, Cambridge; the secretary-general of the Congress is Dr. Nietner, E. Chhornstrasse, 9, Berlin, W.C. The fee for membership has been fixed at £1. Relatives of members and college or university

students may be admitted to the meetings of the Congress on payment of 10s.

We learn from the *Poor-law Officers' Journal* that a movement is on foot with a view to presenting Dr. Milson Rhodes of Manchester with a testimonial. Beginning in the Chorlton Union, with which Dr. Rhodes has been so long associated, it has since spread much further afield, and even at this stage a considerable sum has been collected. Dr. Rhodes's connexion with Poor-law work is well known by readers of this JOURNAL; he has written a good many useful works dealing with the administration of workhouses and their annexes, and has always been prominent as an advocate of the claims of those who come within the sphere of the Poor Law, whether as poor and infirm or sick mentally or bodily, or as lay or professional officers. It is satisfactory to know that his energetic labours and the advantage accruing to the persons indicated have not been overlooked by those directly or indirectly connected with Poor-law administration. Subscriptions may be sent to the Editor of *The Poor-law Officers' Journal* at 18 and 19, Whitefriars Street, London, E.C.

SPEECH Day at the Heritage Invalid Craft Schools, Chailey, on August 8th, was attended by a good many of the foreign and other delegates to the International Congress on School Hygiene. These schools are carried on in connexion with the Guild of Brave Poor Things, which has its head quarters in Bermondsey, and branches in various parts of England. These particular schools are intended to enable crippled children to obtain a training in some trade or art which eventually will render them partially, if not wholly, self-supporting. As regards the boys, when their training in the school has made sufficient progress, they are drafted into a trade workshop, carried on in the village, and while there are treated as real craftsmen; they lodge in the village, go to work daily, and receive wages, the workshop being run on business lines. Another craft school for girls is in course of erection in the same village.

CALEDONIAN MEDICAL SOCIETY.—The twenty-seventh annual meeting of the Caledonian Medical Society was held in the Royal Eye Hospital, Bradford, on July 25th. Dr. Andrew Little, Surgeon to the Hospital, presided over a large representative gathering of members from both sides of the border. He took as the subject of his presidential address The Life and Work of the late Dr. John Henry Bell, of Bradford. Dr. Keay, Physician-Superintendent of the Edinburgh District Asylum, Bangour, was elected President for the ensuing year. The annual dinner was held at the Midland Hotel, Bradford, the same evening, when between 30 and 40 members and guests were present. The toast of the Society was proposed by Dr. Swanson, of York, and responded to by the President and Secretary; the Scottish Universities by Dr. Gordon Little, of Blundellsands, and acknowledged by Professor H. J. Campbell, of Leeds University. "Caledonia" was proposed by Dr. Rabagliati, of Bradford, and responded to by Dr. Cameron Gillies, of London.

MEDICAL SICKNESS AND ACCIDENT SOCIETY.—The usual monthly meeting of the Executive Committee of the Medical Sickness, Annuity, and Life Assurance Society was held at 6, Catherine Street, Strand, London, W.C., on July 26th. The chair was taken by Dr. J. Brindley James, and there were also present Dr. St. Clair B. Shadwell, Dr. Frederick S. Palmer, Dr. M. G. Biggs, Mr. F. S. Edwards, Mr. J. F. Colyer, Dr. F. J. Allan, Dr. J. W. Hunt, Mr. Edward Bartlett, and Dr. J. B. Ball. The accounts presented gave the records of the business of the Society for the first six months of the current year, and were very satisfactory. The amount paid away in sickness claims is the largest yet disbursed in any half year since the Society started in 1884, but as the number of members has steadily grown, and the average age of the members has also become greater, a regular increase in the amount of the sickness pay necessarily results. This was expected and fully provided for when the table of contributions was constructed. The annuity and life assurance branches of the Society are now stationary, as no new business has been done in them for many years. In the sickness branch, however, notwithstanding the large sums, now amounting to over £100,000, which have been paid away in claims, the funds are still rapidly growing, and the final accounts for the year will show a satisfactory addition to the reserves of the Society. A substantial portion of these reserves has at each valuation of the business been treated as a special security for the due payment of the annuities, usually £109 4s., paid to those members who are permanently incapacitated from professional work. There are now over two dozen members drawing these annuities, which are payable until the limiting age of membership, 65 years. Prospectuses and all further information from Mr. F. Addiscott, Secretary, Medical Sickness and Accident Society, 33, Chancery Lane, London, W.C.

cured.¹ It is, therefore, impossible to prove in any given case that syphilis was aborted by any local treatment of the initial lesion.

With regard to the second point, whether quinine has any action on the *Spirochaeta pallida*, I am not aware of any experiments having been tried from this point of view especially, but quinine has often been used as an auxiliary medication in cases of syphilis. Some time ago Dr. William Murray of Newcastle strongly advocated quinine in syphilitic cachexia, and I have myself used it for some years in cases of rebellious syphilis, or in syphilitic cachexia and anaemia, with apparent benefit. Assuming the *Spirochaeta pallida* to be a protozoon, which has not yet been absolutely proved (owing partly to the lamented death of Fritz Schaudinn), it is, of course, possible that the action of quinine might be analogous to its action on the malarial parasite, but I do not know whether any cases of syphilis have yet been treated by quinine alone. However, arsenic, in the form of atoxyl, has recently been tried from a similar point of view, based on the apparent success of its action on the protozoon parasite of sleeping sickness.

The curative action of atoxyl in syphilis, although somewhat vaunted by Hallopeau of Paris, does not appear to have been confirmed; but arsenic is a useful auxiliary medication in cases of syphilis in the same way as quinine.—I am, etc.,

London, W., July 28th.

C. F. MARSHALL.

INTESTINAL SAND.

SIR.—I regret that in a paper on abnormal fat assimilation appearing in the BRITISH MEDICAL JOURNAL of July 27th I quoted Duckworth and Garrod as concluding that intestinal sand was formed in the duodenum, instead of, as they suggest, the upper part of the colon.

The granules occurring in the case I quoted were found in the duodenum, and thus of interest in relation to the above authors' work on the site of formation of intestinal sand.—I am, etc.,

Liverpool, July 28th.

OWEN T. WILLIAMS.

OBITUARY.

ROBERT SAMUELS ARCHER, A.B., M.D., M.CH.DUB.,
LIVERPOOL.

We regret to record the death, at the age of 58, of this well-known practitioner. He was the eldest son of the late Rev. Arthur Ellis Archer, sometime Rector of Donard, co. Wicklow. He took his arts degree in 1870, and entered the School of Physic of the University of Dublin, graduating M.B., B.Ch., in 1872. He became L.M. of the Royal College of Physicians of Ireland in 1881, and M.D. of his University in 1887. He settled in Liverpool over thirty years ago. He held several appointments, having been Visiting Physician to the City Hospital, Priory Road; and for six years Physician to the Netherfield Road Fever Hospital. He was also for many years Medical Officer to the Post Office.

In the earlier days of his professional career he was an industrious writer, especially on fever, and was General Secretary and afterwards Vice-President of the Medical Institution. He had a large experience of small-pox. He had personally attended over 2,000 cases, and gave valuable evidence on the subject before the Royal Commission on Vaccination. He always maintained a warm interest in his University, and came to be looked upon as the leader of the graduates of Dublin University in the Liverpool district. He was particularly active in organizing the annual dinner of the graduates in Lancashire.

For some years he had suffered from diabetes mellitus which, however, did not incapacitate him from work, and on Sunday, August 4th, he was present at the thanksgiving service at St. George's Hall, looking in his usual health. His death, early on Thursday the 8th, was due to diabetic coma. He was attended in his last illness by Dr. Owen Bowen and by his old friend, Sir James Barr. He leaves a widow and one son. The funeral took place at Anfield Cemetery on August 10th.

He was a man much beloved by his friends and his patients, quiet and unassuming, and devoted to his professional work.

¹ American Journal of Surgery, November, 1906.

OBITUARY.

[AUG. 17, 1907.]

UNIVERSITIES AND COLLEGES.

UNIVERSITY OF CAMBRIDGE.

THE appointment of a University Lecturer in Botany will be made early in the Michaelmas term. The annual stipend is £100. Application should be made to the Vice-Chancellor before October 1st.

The Examination in Sanitary Science will commence Part I on October 2nd and Part II on October 7th.

UNIVERSITY OF LONDON.

MEETING OF THE SENATE.

A MEETING of the Senate was held on July 24th.

Recognition of Teachers.

The following were recognized as teachers of the University in the subjects and places indicated:

University College.—Dr. Herbert Tilley (Laryngology and Aural Surgery).

King's College.—Dr. Arthur Whitfield (Dermatology). *London Hospital*.—Dr. Harold Theodore Thompson (Clinical Medicine).

Guy's Hospital.—Dr. Arthur F. Hertz (Medicine).

St. Mary's Hospital.—Mr. Sidney Maynard Smith (Surgery).

Charing Cross Hospital.—Dr. J. M. H. Macleod (Dermatology).

Westminster Hospital.—Dr. Robert Jones (Mental Diseases).

London School of Tropical Medicine.—Dr. F. M. Sandwith (Tropical Medicine).

Advanced Lectures in Physiology.

The following scheme of advanced lectures in physiology for the session 1907-8 was approved.

The University (Physiological Laboratory).—(1) J. B. Leathes, M.B., B.Ch.: Animal Metabolism. Tuesdays, 5 p.m.; October to December, eight lectures. (2) H. M. Vernon, M.D., B.Ch.: Phenomena of Autolysis. Tuesdays, 5 p.m.; January to March, eight lectures. (3) J. A. Gardner, M.A., F.I.C.: Cholesterol and Allied Bodies. Tuesdays, 5 p.m.; May to July, eight lectures. (4) E. I. Spriggs, M.D., F.R.C.P.: The Construction of Diets in Health. Fridays, 5 p.m.; November, four lectures.

University College.—(5) W. M. Bayliss, M.A., D.Sc., F.R.S.: Physiological Problems Common to Animals and Plants. Wednesdays, 5 p.m.; October to December, eight lectures. (6) R. H. A. Plimmer, D.Sc.: The Chemistry of Certain Groups of Proteins. Wednesdays, 5 p.m.; January to March, eight lectures. (7) S. B. Schryver, D.Sc., Ph.D.: Dietetics and Metabolism. Fridays, 5 p.m.; January to March, eight lectures. (8) W. Page May, M.D., F.R.C.P.: Tracts of the Central Nervous System. Wednesdays, 5 p.m.; May to July, eight lectures.

King's College.—(9) O. Rosenheim, Ph.D.: The Borderland of Animal and Vegetable Chemistry. Mondays, 4.30 p.m.; November, three lectures. (10) T. G. Brodie, M.D., F.R.S.: Tissue Respiration. Mondays, 4.30 p.m.; January, four lectures. (11) F. W. Mott, M.D., F.R.S.: The Physiology of the Emotions. Mondays, 4.30 p.m.; February, two lectures. (12) W. D. Helliwellton, M.D., F.R.S.: Degeneration and Regeneration of Nerves. Mondays, 4.30 p.m.; March, two lectures. (13) C. S. Myers, M.D.: The Special Senses. Fridays, 4.30 p.m.; May to July, eight lectures.

Guy's Hospital.—(14) A. P. Beddard, M.D.: Secretion of Urine. Thursdays, 4 p.m.; November, four lectures. (15) A. F. Hertz, M.D., B.Ch.: The Passage of Food down the Alimentary Canal. Thursdays, 4 p.m.; October, four lectures. (16) M. S. Pembrey, M.D., B.Ch.: Physiology of Muscular Work. Thursdays, 4 p.m.; January to March, eight lectures. (17) J. S. Haldane, M.O., F.R.S.: Some Applications of Physiology to Industrial Hygiene. Thursdays, 4 p.m.; May, four lectures. (18) F. G. Hopkins, M.B., D.Sc.: Chemical Physiology of Muscle. Thursdays, 4 p.m.; June to July, four lectures.

London Hospital Medical College.—(19) J. Craw: Filtration as a Mechanism in Physiology and Pathology. Wednesdays, 4.30 p.m.; October and November, four lectures. (20) W. Bullock, M.D.; G. P. Mudge, M.R.C.S.; M. Greenwood, M.R.C.S.; and A. Bacot, F.E.S.: Inheritance in its Physiological and Pathological Aspects. Wednesdays, 4.30 p.m.; May and June, eight lectures. (21) L. Hill, M.B., F.R.S.; and M. Flack, B.A.: Some Aspects of the Physiology of the Heart. Wednesdays, 4.30 p.m.; May and June, eight lectures. Courses numbered 1, 2, 3, 5, 6, 7, 8, 13, 16, and 21 of the scheme were recognized as advanced lectures which a candidate at the B.Sc. (Honours) examination in physiology may name for part of his practical examination.

Panel of Lecturers in Physiology.—The name of Dr. E. I. Spriggs has been added to the panel of lecturers in physiology.

Report of Physiological Laboratory Committee.

The report presented by the Physiological Laboratory Committee on the five years' work of the laboratory stated that twenty-five courses of lectures on general physiology, electro-physiology, vegetable physiology, cytology, and experimental psychology had been delivered, and that the average attendance

at the different courses was from twenty to thirty. In accordance with the scheme prescribed by the Senate, the following courses of lectures had been published for the University by Mr. John Murray: (1) *The Signs of Life*, by Dr. A. D. Wailer; (2) *The Biochemistry of Muscles and Nerves*, by Professor W. D. Halliburton; (3) *Animal Metabolism*, by Dr. J. B. Leathes; (4) *The Morphology of Normal and Pathological Blood*, by Dr. G. A. Buckmaster. Sir T. Lauder Brunton's course on circulation is in the press.

Post-graduate research had been conducted during the five years by twenty-six teachers and students and the results published. The number of papers communicated from the laboratory to scientific journals was fifty-six down to June, 1907.

The aggregate income of the laboratory during 1902-6 inclusive had been £6,260 8s. 9d. (of which £4,200 was obtained by voluntary contributions), and the expenditure for the same period amounted to £4,986 0s. 6d.

Bust of Dr. E. A. Parkes.

The Senate resolved that the bust of Dr. E. A. Parkes presented to University College in commemoration of his service as a physician and clinical teacher in connexion with University College Hospital should be presented to the Medical School of the hospital.

Appointments.

Dr. F. C. Shrubshall has been added to the panel of University extension lecturers.

Dr. T. D. Griffiths has been elected one of the governors of the University College of South Wales, Aberystwyth.

Dr. S. Russell Wells has been elected Vice-Chairman of the Council for External Students for the year 1907-8.

Admission to the Faculty of Medicine.

Professor Arthur Whitfield, M.D., has been admitted to the Faculty of Medicine.

EXAMINATIONS.

The following candidates have been approved:

INTERMEDIATE EXAMINATION IN MEDICINE.—A. R. S. Alexander, R. W. Annison, W. R. W. Asplen, Ethel M. Baker, R. P. Ballard, A. D. E. Bayliss, J. D. Benjafield, Barbara Broster, H. L. Burton, R. H. Candy, H. W. Catto, †Nina G. Cotton, †A. N. Cox, Hazel H. Cuthbert, W. C. Dale, W. A. Daley, B.Sc., V. G. Desai, G. Dunderdale, J. B. Dunning, E. M. A. Duiviver, G. F. E. Dyke, †Florence M. Edmonds, R. B. Edwards, J. P. Elias, A. O. English, H. Gardner, †D. Green, T. Hare, W. L. Hibbert, G. R. Hind, J. S. Hopwood, †B. Hoyte, M. L. C. Irvine, †G. Jefferson, E. H. Jones, H. G. Kilner, E. C. Lindsay, †A. G. H. Lovell, G. G. Lytle, Emily C. Macirone, G. Maxfield, S. B. C. Maybury, J. H. Meers, D. A. Mitchell, Stella Myers, A. G. W. Owen, Mary M. Patterson, W. L. Pink, †H. Platt, N. L. M. Reader, †C. E. A. T. Rigg, †A. L. Robinson, C. J. Rogerson, Mary Schofield, Mary C. Scott, †C. E. Shattock, C. W. Shepherd, F. C. Shone, B. S. Simmonds, †T. D. M. Stout, J. B. Tackaberry, H. H. Tanner, N. Tattersall, †G. Taylor, G. O. Teichmann, †W. R. Thomas, H. A. Treadgold, T. A. F. Tyrrell, P. J. Veale, T. H. Whittington, J. C. Woods.

* Distinguished in Anatomy. † Distinguished in Physiology.

‡ Distinguished in Pharmacology. § Bracketed for a Scholarship.

UNIVERSITY OF EDINBURGH. GRADUATION CEREMONIAL.

THE summer graduation ceremonial took place in the McEwan Hall on Friday, July 26th, the Vice-Chancellor Principal Sir William Turner presiding, when the honorary degree of LL.D. was conferred *in absentia* on William Bayard, M.D. (Edinburgh, 1837), St. John, New Brunswick. In requesting the Vice-Chancellor to confer this degree *in absentia*, the Dean of the Faculty of Law (Sir Ludovic Grant) said: Before the candidates for medical degrees are presented, I shall ask you to confer the honorary degree of Doctor of Laws, *in absentia*, upon one who himself graduated as Doctor of Medicine in this University on August 1st, 1837—nearly three-quarters of a century ago. The venerable alumnus whom the Senatus Academicus desires to honour to-day is Dr. William Bayard, of St. John, New Brunswick, who next month will attain to the great age of 93 years, but who is, I rejoice to be able to say, in vigorous health himself, and still actively engaged in administering to the health of others. Dr. Bayard's long career forms a most interesting link between the new academic order and the old, for its commencement takes us back to the era when the University was still the town's College, when graduation in medicine was regulated, not by Ordinances, but by *Statuta Solennia*, and when the last of the Monros was still in office. So far as I am aware, there is no one who can challenge Dr. Bayard's title to be regarded as the patriarch of the whole vast tribe of Edinburgh graduates throughout the world. But, Sir, it is not because of his longevity alone that Dr. Bayard has been deemed worthy of academic recognition—yet higher grounds are furnished by the rare wisdom, the probity, the dignity, and nobility of character which he has ever displayed in the practice of his profession, and in social intercourse. He has long exercised, by virtue of these qualities, a salutary and ennobling influence amongst his medical brethren in New Brunswick, while by the entire community there he is greatly honoured and greatly beloved. The motto "*sans reproche*" was brought into close connexion with the name of Bayard more than four centuries ago, but I question if it applied more fitly and justly to the gallant chevalier than it does to the venerable doctor upon whom his Alma Mater now rejoices to bestow her highest honour.

The following degrees were then conferred:
M.D.—†E. Archer-Brown, †J. H. M. Bell, †G. J. Blackmore, †T. C. Blackwell, †R. A. Blake, D. W. Boswell, *O. C. Bradley, A. Brown, H. M. Brown, *H. J. M. Browne, †A. E. Burroughs, †Katherine J. S. Clark, Paula T. Copeland, †R. W. Craig, †J. Crawford, B.Sc., P. Crerar, J. E. T. Davies, †D. Ewart, F. E. Field, S. B. Figgis, G. H. L. Fitzwilliams, J. Fortune, †L. Gifford, †N. Glegg, J. L. Green, J. A. Gunn, M.A., B.Sc., †W. Hamilton, †P. A. Harry, W. Hume, †H. Kerr, L. Laurie, C. G. S. Leeds, W. Leslie, J. Lochhead, M.A., B.Sc., S. M'Donald, †W. C. W. M'Dowell, B.A., Robina Harlin, née M'Gregor, *N. M'Vicar, A. M. Malcolmson, *W. J. Malone, W. Miller, †H. P. Milligan, †R. H. Moffat, †R. C. Monnington, H. Mowat, H. L. Munro, *J. H. H. Pirie, B.Sc., †R. S. Ponder, F. E. B. Rabagliati, H. S. Reid, *L. C. P. Ritchie, †T. R. Smith, W. A. W. Smith, †R. S. Stephenson, *H. J. Stewart, H. A. Stewart, †A. C. Strain, †J. P. Sturrock, M.A., †W. D. Sutherland, J. Thomarson, M. F. Valenzia S. M. Varis, *R. M'L. Veitch, H. Wade, H. C. Weber, J. H. D. Webster, W. E. C. Williams, G. W. Young.

* Highly Commended for their Theses. † Commended for their Theses.

CH.M.—†S. Evans (India), M.B., C.M., 1893; *D. C. L. Fitzwilliams (Wales) M.B., Ch.B., 1902.
M.B., CH.M.—S. Rowland (England).
M.B., CH.B.—G. J. Adams, †J. B. Alexander, M.A., J. L. Annan, A. Arthur, †J. C. Ashton, R. G. A. Bagnall, D. M. Barcroft, A. C. Barker, C. B. Baxter, †A. E. Bennee, Mary F. Bignold, H. W. Binks, F. G. H. R. Black, J. A. Brand, A. Bremner, J. Brennan, H. F. Briggs, D. S. Buist, T. Burrell, P. D. Cameron, R. J. Chapman, W. D. Coghill, C. E. A. Coldicut, C. H. Corbett, T. Craig, F. W. M. Cunningham, C. H. Derkens, T. Derrick, P. Donald, M. Douglas, M.A., G. L. Duncan, †P. A. Euvrard, V. L. Evans, Josephine L. D. Field, S. B. Faulkner, W. P. Ferguson, M.A., B.Sc., Mary S. Finlayson, W. S. Forbes, †J. Fraser, O. M. Gericke, J. B. Gibson, M.A., B. M. Glover, I. M. Grant, D. G. Gray, A. R. Gunn, †D. J. Guthrie, *G. Henderson, Nettie D. Hendrie, W. S. Heron, A. F. Hewat, A. M. Hewat, M. Heyns, J. E. Hill, J. K. A. Hofmeyr, B.A., †J. H. Horne, A. Hunter, J. A. Jamieson, *R. H. Jamieson, W. W. Johns, R. F. Johnson, Blanche M. Z. Johnston, M. J. Johnston, *T. A. Johnston, W. D. S. Johnston, D. Johnstone, M.A., G. G. Jolly, S. W. Jouber, J. H. Lamb, J. H. Lechler, A. F. Lee, D. Lees, M.A., C. W. L. Luethgeff, W. S. McCune, A. Macdonald, W. K. Macdonald, A. T. Mackenzie, M.A., *R. E. McLaren, Helen M. McMillan, J. A. Manifold, L. R. H. P. Marshall, Ada E. Miller, Margaret M. Miller, C. I. Milne, C. J. Milne, A. P. Mitchell, J. A. Morris, J. Morrison, J. Muckhart, †J. J. Nelson, *C. E. Pattie, †W. J. Porteous, D. E. C. Pottinger, N. H. Prior, †D. H. Rai, M.A., C. Robertson, B.A., †D. Robertson, W. S. I. Robertson, W. A. Scoble, J. Scott, R. L. Scott, Alice C. Sharp, W. J. Simpson, E. D. Smith, F. F. S. Smith, Dorothy W. Stevenson, L. H. F. Thatcher, *C. A. Thelander, C. P. Theron, B.A., *D. Thomson, W. Thomson, W. W. Thomson, A. L. Thorley, F. J. G. Tocher, Lydia K. Towers, Martha B. Webb, J. C. B. Williams, D. J. Williamson, †J. L. Wilson, J. L. M. Wood.

* First-class honours. † Second-class honours.

B.Sc. IN PUBLIC HEALTH.—M. B. Buxton, M.B., C.M.

On the same occasion the Diploma in Tropical Medicine and Hygiene was conferred on A. G. H. Smart, M.B., Ch.B.

Gold Medals.

The following gentlemen then received gold medals for their M.D. Theses:

L. N. H. Biggs, J. A. Gunn, J. Lochhead, S. M'Donald, H. A. Stewart, H. Wade.

The following Fellowships and Prizes were then handed to the successful candidates:

The Goodsir Memorial Fellowship.—James Lochhead, M.A., B.Sc., M.D., Ch.B.

The Syme Surgical Fellowship.—James Walker Dawson, M.B., C.M. (in absentia)

The Milner Fothergill Medal in Therapeutics.—James A. Gunn, M.A., B.Sc., M.D., Ch.B.

The Gunning Victoria Jubilee Prize in Anatomy.—Alexander Ninian Bruce, B.Sc.

The Gunning Victoria Jubilee Prize in Chemistry.—Alexander Thomas Cameron, M.A., B.Sc.

The Ellis Prize in Physiology.—William Cramer, Ph.D., D.Sc.

The Etches Scholarship (the highest award for graduates as Bachelors of medicine).—Robert Hillhouse Jamieson, M.B., Ch.B.

The Allan Fellowship in Clinical Medicine and Clinical Surgery.—John Fraser, M.B., Ch.B.

The Freeland Barbour Fellowship.—Robert Hillhouse Jamieson, M.B., Ch.B.

The Buchanan Scholarship in Gynaecology.—Albert Edward Bennee, M.B., Ch.B.

The James Scott Scholarship in Midwifery.—David Lees, M.A., M.B., Ch.B.

The Mowat Scholarship in Practice of Physic.—Dewan Hakumat Rai, M.A., M.B., Ch.B.

The Murchison Memorial Scholarship in Clinical Medicine.—James Sutherland Edwards, M.B., Ch.B.

The McOash Graduates and Medical Bursaries.—Douglas James Guthrie, M.R., Ch.B., and John Howard Horne, M.B., Ch.B.—equal.

The Beaneby Prize in Anatomy and Surgery.—John Howard Horne, M.B., Ch.B.

The Conan Doyle Prize.—Albert Edward Bennee, M.B., Ch.B.

The Dorothy Gilfillan Memorial Prize.—Helen Meldrum McMillan, M.B., Ch.B.

The Wrightman Prize in Clinical Medicine.—Alexander Gibson, M.A., B.Sc.

The Anderson Henry Prize in Botany.—John William Bews, M.A., B.Sc.

The Gray Scholarship (for distinction in the final examination for B.Sc., spring and summer, 1907).—David Gibb, M.A., B.Sc.

The Promoter, Professor Sir Halliday Croome, then addressed the graduates. He spoke of the high traditions of medicine in Edinburgh, told the graduates they were the lineal descendants of Goodsir, Simpson, Lister, Christieon, Laycock, Syme, and Bennett. He urged them to continue work and progress

in their calling, spoke of their relation to patients and fellow practitioners, of jealousy, and of unsolved problems.

A luncheon in the University Union followed. At this Sir Donald Currie intimated his intention to pay the remaining balance of cost of extension of the Union.

ROYAL COLLEGE OF PHYSICIANS OF LONDON.
An ordinary quarterly comitia was held at the College on Thursday, July 25th, the President, Sir R. Douglas Powell, in the chair.

Lectures.

The President announced that the Bradshaw Lecture On Pleural Effusions and their Treatment would be delivered by Sir James Barr on November 5th, and the FitzPatrick Lectures On the History of Medicine by Dr. Pye-Smith on November 7th and 12th.

It was announced that for the year 1908 Dr. Herbert French had been appointed Goulstonian Lecturer; Sir James Sawyer, Lumleian Lecturer; Dr. Pye-Smith, FitzPatrick Lecturer; Professor Schäfer, Oliver-Sharpay Lecturer, and Dr. Dugdow, Horace Dobell Lecturer. Dr. Lazarus Barlow was appointed Croonian Lecturer for 1909.

Fellowship.

A. Shadwell, M.A., M.D. Oxon., and T. McCrae, M.D. Toronto, who were elected on April 25th, were admitted Fellows of the College.

Membership.

A. W. Falconer, M.D. Aberd., V. S. Hodson, M.B. Oxon., B. Hudson, M.A., M.B. Cantab., L.R.C.P., H. C. C. Mann, M.D. Lond., L.R.C.P., R. H. Miller, M.B. Lond., L.R.C.P., H. Pritchard, M.D. Lond., L.R.C.P., E. A. Ross, M.D. Cantab., G. MacI. C. Smith, M.A., M.B. Aberd., F. E. Tylecote, M.D. Vict., S. A. K. Wilson, M.A., M.B. Edin., were admitted Members of the College.

Licence.

The Licence of the College was granted to 114 gentlemen.

Diplomas in Public Health.

In conjunction with the College of Surgeons, Diplomas in Public Health were granted to 13 gentlemen.

Communications.

The following communications were received:

1. From the Committee of the International Congress on Psychiatry, Neurology, etc., to be held in Amsterdam, September 2nd to 7th next, inviting the College to send delegates. It was left to the President to nominate some Fellow to represent the College.

2. From Sir Dyce Duckworth and Dr. Heron, who represented the College at the funerals of Sir Joseph Fayer and Dr. Robert Barnes respectively.

3. From Dr. James Ramsay, of York, offering the College an autotype copy of an engraved portrait of James Atkinson, 1759-1839, author of *Medical Bibliography*, Letters A-B. The gift was accepted, and thanks returned to Dr. Ramsay.

4. From the Registrar of the General Medical Council, communicating the revised recommendations of the Council with regard to the instructions of students in practical midwifery. This was referred to the Committee of Management.

5. From the Secretary of the Royal College of Surgeons reporting proceedings of their Council on May 9th, June 13th, and July 11th.

6. From the Clerk to the London County Council thanking the College for advice regarding the connexion of cases of posterior basic meningitis with those of cerebro-spinal fever, and for recommendations as to registration of the two complaints, which the Council resolved to adopt.

College Officers.

On the nomination of the President and Council, the censors, examiners, and other college officers were elected.

Baly Medal.

On the recommendation of the Council, the Baly medal was awarded to Ernest H. Starling, M.D., F.R.C.P., F.R.S., Jodrell Professor of Physiology, University College, London, as having pre-eminently distinguished himself in the Science of Physiology.

Reports.

The following reports were received:

1. From the Representative of the College on the General Medical Council on the proceedings of the Council during its Session in May last.

2. From the Committee of Management (3) dated May 13th, June 3rd, and June 25th, recommending that Dr. H. H. Tooth and Mr. A. G. R. Foulerton be appointed Assessors to the Examinations of the London School of Tropical Medicine for the year ending June, 1908, and that the Municipal Technical School, Birmingham, Aldenham School, Elstree, and Alleyn's School, Dulwich, be added to the list of institutions recognized by the Examining Board in England for instruction in chemistry and physics. The recommendations were adopted.

The quarterly report of the Finance Committee, the annual report of the Library Committee, the annual report of the Curators of the Museum, and the quarterly report of the Examiners for the Licence on the results of the examinations in April last were received.

Books and other publications presented to the library during the past quarter were received, and thanks returned to the donors.

The newly-elected officers, examiners, and members of standing committees gave their faith to the College.

ROYAL NAVY AND ARMY MEDICAL SERVICES.

ROYAL ARMY MEDICAL CORPS.

The following candidates were successful at the May examination for promotion of Majors of the Royal Army Medical Corps in technical subjects:

Major J. Girvin, Sanitation and Epidemiology.¹

Major C. C. Fleming, D.S.O., M.B., Technical Subjects.²

Major G. S. Crawford, Technical Subjects.²

Major S. F. St. D. Green, M.B., (d) ii.³

Major H. E. Stadton, (a) ii.⁴

Lieutenant W. Byam, (d) ii, and in (h) ii and iii.⁵

Lieutenant H. C. Winckworth, (d) ii, and in (h) ii and iii.⁶

Lieutenant J. St. A. Maughan, (h) ii and in.⁷

Lieutenant C. F. Thomson, M.D., (d) ii and iii, and in (h) ii and iii.⁸

Lieutenant G. W. Heron, (d) ii, and in (h) ii and iii.⁹

Lieutenant R. J. B. Buchanan, (h) iii.⁹

Lieutenant G. S. Wallace, M.B., (d) ii, and in (h) ii and iii.¹⁰

Lieutenant T. H. Gibbon, M.I., (d) ii, and in (h) ii and iii.⁶

Lieutenant R. J. C. Thompson, (d) ii, and in (h) ii and iii.⁶

Lieutenant H. H. A. Emerson, M.B., (d) ii and in (h) ii and iii.⁶

Lieutenant A. M. Rose, M.B., (d) ii, and in (h) ii and iii.⁶

Lieutenant E. T. Potts, M.D., (d) ii, and in (h) ii and iii.⁶

Lieutenant W. McConaghay, M.B., (d) ii, and in (h) ii and iii.⁶

¹ Already passed in (d) ii, and in Army Medical Organization in Peace and War, in Selected Subjects, and in Laws and Customs of War.

² Already passed in (d) ii.

³ Has yet to pass in Technical Subjects.

⁴ 0.75 Has yet to pass in Technical subjects.

⁵ 0.75 in (d) ii. Already passed in (h) i.

⁶ 0.75 in (d) ii. Already passed in (h) i.

⁷ Already passed in (d) ii and in (h) i.

⁸ Already passed in (h) i.

⁹ Already passed in (d) ii and iii, and in (h) ii; has yet to pass in (h) i.

¹⁰ 0.75 in (d) ii; has yet to pass in (h) i.

The following is the list of successful candidates for commissions in the Royal Army Medical Corps at the recent examination in London, for which fifty-nine candidates entered:

	Marks.
T. McC. Phillips, B.A., M.B., B.Ch., R.U.I.	605
H. S. Dickson, B.A., Camb., M.R.C.S. Eng., L.R.C.P. Lond.	591
G. F. Dawson, M.A., M.B., B.Ch. Aberd.	586
H. V. B. Byatt, M.R.C.S. Eng., L.R.C.P. Lond.	573
R. E. Todd, M.B., B.S. Lond., M.R.C.S. Eng., L.R.C.P. Lond.	561
T. F. Lumb, M.R.C.S. Eng., L.R.C.P. Lond.	546
H. Gibson, M.R.C.S. Eng., L.R.C.P. Lond.	544
C. P. O'Brien Butler, L.R.C.P. & S.Irel.	518
G. Petit, L.R.C.P. & S.Irel.	514
J. B. Hanafin, L.R.C.P. & S.Irel.	512
J. A. Renshaw, M.R.C.S. Eng., L.R.C.P. Lond.	510
R. F. O. T. Dickinson, L.R.C.P. & S.Irel.	496
W. R. O'Farrell, L.R.C.P. & S.Irel.	494
R. De V. King, M.R.C.S. Eng., L.R.C.P. Lond.	493
D. B. McGrigor, M.B., B.Ch. Aberd.	490
C. T. Conyngham, B.A., M.B., B.Ch., B.A.O. Dub.	489
H. McC. Hanschell, M.R.C.S. Eng., L.R.C.P. Lond.	487
J. R. Lloyd, M.R.C.S. Eng., L.R.C.P. Lond.	486
H. W. Carson, M.B., B.Ch., B.A.O. U.I.	482
R. G. S. Gregg, B.A., M.B., B.Ch., B.A.O. Dub.	481
H. T. Treves, M.R.C.S. Eng., L.R.C.P. Lond.	474
F. T. Dowling, M.B., B.Ch., B.A.O., B.A.R.U.I.	471
J. C. L. Hington, M.R.C.S. Eng., L.R.C.P. Lond.	462
F. I. Stuart, M.B., B.Ch. Aberd.	457
B. A. Odulum, L.R.C.P. and S.Irel.	455
W. R. Spong, B.A., M.B., B.Ch. Aberd.	448
J. E. Grant, M.B., B.Ch. Aberd.	447
P. H. Hart, B.A., M.B., B.Ch., B.A.O. Dub.	441
A. E. B. Jones, M.D., M.B., B.Ch. Dub.	440
A. Hendry, M.B., B.Ch. Aberd.	420

INDIAN MEDICAL SERVICE.

The result of the July examination was announced on the July 27th. There were 36 candidates, of whom 34 ultimately entered for the examination. Of these 27 qualified, the first 14 being admitted as lieutenants on probation, while one candidate withdrew during the examination.

The names of the successful candidates, with their degrees, and a list of the marks obtained by them out of a possible total of 5,100 are given below:

	Marks.
1. H. W. Acton, M.R.C.S., L.R.C.P.	4,120
2. V. B. Green-Armytage, M.R.C.S., L.R.C.P.	3,834
3. A. N. Dickson, M.B., Cantab., M.R.C.S., L.R.C.P.	3,559
4. A. B. Zorab, M.B., B.S. Lond., M.R.C.S., L.R.C.P.	3,561
5. A. G. Coullie, M.B., Ch. Edin.	3,549
6. R. E. Wright, M.B., B.Ch. Dub.	3,540
7. W. H. Riddell, M.B., Ch. B. Edin.	3,510
8. A. J. H. Russell, M.B., B.Ch. St Andrews	3,464
9. D. H. Rai, M.B., Ch. B. Edin.	3,455
10. F. S. Smith, B.C. Cantab., M.R.C.S., L.R.C.P.	3,410
11. A. T. Denham, B.C. Cantab., M.R.C.S., L.R.C.P.	3,403
12. A. W. Howlett, M.B., Ch. B. Man.	3,349
13. F. A. Barker, B.C. Cantab.	3,316
14. A. N. Thomas, M.R.C.S., L.R.C.P.	3,283