

a second image of the spot used as the fixation point. This second image is obtained by reflection from a mirror hinged within a cone, the angle of the mirror determining the angular position of the second image on the retina. The cone can be rotated round its axis so that the second image is caused to make a circular excursion on the retina; in this way Bjerrum's method of investigation can be employed. An automatic registration is obtained by means of a needle which is carried by the mirror and extruded pneumatically by mechanism similar to that used for operating a photographic shutter. The second eye looks down a tube at a small spot the same size as the spot looked at by the eye under examination; the brain interprets this as the same spot, and stereoscopic fixation is thus obtained.

Memoranda:

MEDICAL, SURGICAL, OBSTETRICAL.

A CASE OF GUNSHOT WOUND.

A MILITIAMAN, aged 21, was admitted to the Lockhart Hospital on June 19th, who, a few hours previously, had been accidentally shot in the back during manoeuvres by a man some 5 to 10 yards behind him. At the time of the accident the patient felt as though he had been struck from behind, but did not fall, and even wished to walk over to the camp immediately afterwards. He experienced comparatively little shock, and on admission to hospital was not suffering much inconvenience. The temperature was 99°, and the pulse 80. The skin wound, a vertical slit with seared edges, was situated $\frac{1}{2}$ in. to the left of the middle line at the level of the eleventh dorsal vertebra.

The x rays were not available, so under chloroform an incision 3 in. long was made downwards and outwards from the wound, this being the direction of maximum tenderness. Nothing was discovered on superficial dissection, but a slight gap in the fibres of the lumbar fascia close to the original wound led one to introduce a probe, which passed obliquely outwards and revealed the bullet deeply imbedded in the erector

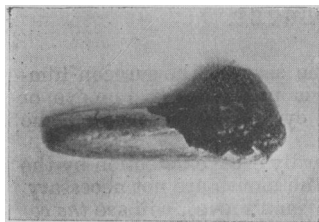


Fig. 1.

spinae muscle $2\frac{1}{2}$ in. from the point of entrance. It was easily removed with forceps, the incision was stitched, the wound drained and recovery was uneventful.

The accompanying photographs will serve to illustrate the main facts of the case.

Fig. 1 represents the bullet, of regulation Lee-Enfield pattern, as it appeared just after removal. The missile had carried along with it a small piece of the man's shirt, and this, as the photograph well shows, was matted with blood and closely adherent to its base at one side, where the cupro-nickel coating had burst slightly. The hole in the shirt where the part was torn away is shown in Fig. 2. The two projecting fibres to the left as well as the inner surface of the garment were bloodstained. Examination of the tunic through which the bullet first passed revealed only a small horizontal tear close to one of the seams.

The most noteworthy point in the case is the comparatively slight injury in a gunshot wound inflicted by a military rifle at close quarters. The distances given me by several eyewitnesses varied from 5 to 10 yards, and,

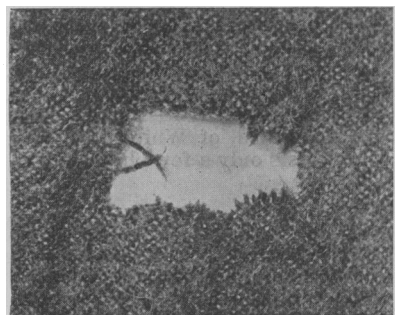


Fig. 2.

according to one, was "certainly not more than 15 yards." How a modern bullet having a muzzle velocity of over 2,000 ft. per second could merely inflict a flesh wound at a few yards' range is somewhat difficult of explanation. It had encountered no hard object—belt, button, etc.—in its course, nor had it struck bone on penetrating the body.

Lanark.

DOUGLAS J. GUTHRIE, M.B., Ch.B.

TICK FEVER IN NYASALAND.

My object in writing this note is to draw attention to the extremely wide range of distribution of tick fever in Nyasaland. At one time presumed to be confined more or less to the country to the south-west of Lake Nyasa, cases of spirochaetosis have now been met with over quite three-fourths of the Protectorate, the most highly infected areas being the districts bordering the lake. The disease appears to decline in incidence as one approaches the southern end of the Protectorate—that is to say, in the districts furthest away from the lake.

This precise knowledge of the distribution of tick fever has been obtained by medical officers at present engaged on sleeping-sickness investigations in the lake districts, which hitherto have been a *terra incognita* from the medical standpoint. In a native prison in one of these districts the floor, walls, and ceiling of the building were found to be teeming with *Ornithodoros moubata*, although none of the inmates of the prison complained of any febrile indisposition. The Indian hospital assistant, however, who was engaged on sleeping-sickness duty, but who happened, incidentally, to visit the prison, was shortly after laid up with what proved on blood examination to be a heavy spirochaete infection. This circumstance alone would establish the proof, if proof were necessary, that natives residing in localities infested with *O. moubata* must be more or less immune to the infection.

That this immunity is by no means general is evidenced by the frequent references in the medical officers' reports to the large number of natives constantly met with who in the course of routine blood examinations are found to harbour the parasite. One of the medical officers has observed that the clinical symptoms in heavy infections are often found to be less severe than in those cases where the organisms are scanty.

Before bringing this note to a close I should like to say one word regarding an affection which a few years ago—before the pathogenicity of *O. moubata* was recognized in this country—used to be called "Tanganyika blindness." It occasionally happened that a European came under treatment for a complaint which went by this name. There was a history in these cases of recurrent attacks of what was presumed to be malarial fever, and the eye condition was accordingly regarded as a malarial iritis. In the light of our present knowledge, however, there is little reason to doubt that a spirochaete infection was the cause of the iritis in these cases, and the name which this so-called "blindness" bore would indicate that tick fever must be prevalent on Lake Tanganyika also.

H. HEARSEY,

Zomba, Nyasaland.

Principal Medical Officer, Nyasaland.

DR. FREDERICK A. COOK, whose name has recently been in all men's mouths in connexion with the alleged discovery of the North Pole, was (says the *Journal of the American Medical Association*) born in Sullivan County, New York, on June 10th, 1865. After attending public schools in Brooklyn and graduating from the University of the City of New York, he took his medical course at the College of Physicians and Surgeons of Columbia University, New York, and practised in Brooklyn for a brief period. His interest early turned to scientific exploration, and he became surgeon of the Peary Expedition in 1891. Since then his time has been devoted largely to exploration work. He was surgeon of the Belgian Antarctic Expedition, in which he conducted himself so well that he was awarded medals by the Royal Society of Belgium and the Royal Geographical Society of Belgium, and was decorated with the Order of Leopold by the King of the Belgians. Another exploit was the ascent of Mount McKinley in Alaska, in which he was the pioneer, in 1906. In a work entitled *Through the First Antarctic Night*, he described his trip with the Belgian Expedition; in another, bearing the title *To the Top of Mount McKinley*, he gave an account of his ascent of that mountain.

Medical News.

DR. DANIEL JOHN CUNNINGHAM, late Professor of Anatomy in the University of Edinburgh, left personal estate valued at £17,846.

THE next meeting of the International Congress of Otolaryngology will be held in Boston, U.S.A., under the auspices of Harvard University, in August, 1912. Dr. Clarence J. Blake, of Boston, has been chosen to be President.

A SPECIAL commission of the French Senate, the reporter of which is M. Strauss, has recommended the prohibition of the use of feeding bottles with tubes, under penalty of fines from 2 to 100 francs, and imprisonment in case of repetition of the offence.

THE subject of Professor Osler's address at the London School of Tropical Medicine, which is to be delivered on October 28th, is *The Nation and the Tropics*. The work of the winter session will begin in the first week of October as usual.

SIR JOHN BYERS has been re-elected President of the Belfast Natural History and Philosophical Society for the session 1909-10. The society is one of the oldest provincial bodies of the kind in the United Kingdom, the present being the eighty-sixth year of its existence.

THE annual medical service of the Guild of St. Luke will be held in St. Paul's Cathedral on Wednesday, October 20th, at 7.30 p.m. The preacher will be the Rev. Father Waggett, S.S., J.E. For tickets and particulars application should be made to the Honorary Secretary, Dr. C. St. Aubyn-Farrer, 1, Harley Street, W.

AT the opening meeting of the Eugenics Education Society to be held at the Caxton Hall, Westminster, on Thursday, October 7th, at 5.15 p.m., Lieutenant-Colonel C. H. Melville, R.A.M.C., Professor of Hygiene, Army Medical College, will deliver an address on Eugenics and Military Service. Mr. Arnold White will preside.

THE Clinical Section of the Royal Society of Medicine is to hold its first meeting for the winter session next Friday, at 8 p.m. In addition to demonstrations of cases and specimens, papers will be read by Sir Dyce Duckworth on some cases of gout—one in a Mohammedan, the other in a boy of 14; and by Dr. Herringham on some cases of pneumonia in which displacement of the heart simulated pleural effusion.

THE new laboratories for physiology, chemistry, and physics of the London Hospital Medical College will be opened by Professor William Osler, F.R.S., on Friday, October 15th, at 4 p.m. At 4.30 he will deliver the Schorstein lecture on Syphilis and Aneurysm. Members of the medical profession will be admitted on presentation of their cards.

THE opening of the winter session at the Faculties of Science and of Medical Science at University College will be marked by the delivery of two public introductory lectures. The one dealing with radium emanations is to be delivered by Sir William Ramsay at 9 a.m. next Monday, and the other on Wednesday, at 7 p.m., by Professor H. R. Kenwood, the title of his address being, *What Hygiene Demands of School Teachers*.

ACCORDING to recent reports from East Africa sleeping sickness is causing fearful ravages, both among natives and Europeans on Lake Tanganyika, particularly in the Ujiji district. The principal centre of the disease is at the mouth of the river Malagarayi, where it enters the lake, and the district running south from that point. The head of the East Africa medical staff, Dr. Speissner, has gone there to inquire into the measures taken against the disease.

THE autumn meeting of the South-Eastern Division of the Medico-Psychological Association will be held, by the courtesy of Drs. Adams and Johnston, at Brooke House, Upper Clapton, N.E., on Wednesday, October 6th. Dr. F. W. Edridge-Green will read a paper on the theory of vision and colour perception, which will be illustrated with coloured lantern slides. Dr. T. Duncan Greenlees will present a communication on lunacy matters in Cape Colony. The members will dine together, after the meeting, at the Café Monico, Piccadilly Circus, W., at 6.45 p.m.

THE nineteenth Congress of Internal Medicine will be held at Milan from October 4th to the 8th. Among the communications promised are a report of the existing state of knowledge in regard to cancer, by Professors Devoto, Moreschi, and Veratti on Italian work in the field of internal medicine, by Professor Guiffé; and one on the mechanical and biological factors in the pathology of pregnancy. A special session will be devoted to tropical medicine, at which Professors Feletti, Gabbi, and others will read papers on Mediterranean fever, kala-

azar, and other subjects. In connexion with the Congress there will be a meeting of those who take an active interest in the struggle against endemic cretinism, when a report on the subject will be presented by Professor Tamburini, and a meeting of the National League against Malaria.

THE Board of Education of New York is, we learn from the *New York Medical Journal*, planning to remodel twenty class rooms in different public school buildings into open-air rooms, and equip them with special furniture. These rooms will be for the use of children who are anaemic and have a tendency to tuberculosis. Those already afflicted with the disease will not be accepted. The Board of Education now furnishes teachers for classes of tuberculous children on the ferryboats *Southfield* and *Middletown*, and is planning to supply teachers for the class on the roof of the Vanderbilt Clinic.

ON the initiative of Dr. Castellino, Professor of Medical Pathology in the University of Naples, an Italian National League against malaria has recently been formed. The first meeting will take place at Milan on October 6th and 7th, when the Congress of the Italian Society of Internal Medicine will be in session in the same city. Among the communications promised are the following: Professor Bordoni-Uffreduzzi, on the present state of knowledge in regard to malaria; Professor Castellino, on prophylaxis against malaria; Professor Golgi, on the pathology of malaria; Professor Grassi, on some questions relating to the pathology and treatment of malaria; Professor Queirolo, on little known abortive forms of malaria. Professor Baccelli will preside, and will deliver an inaugural address.

UNDER the name of *Scapa*, or *A Beautiful World*, the Society for Checking the Abuses of Public Advertising has just brought out an issue of the occasional journal in which it records its work. The society came into being some sixteen years ago, and, considering the nature of the forces with which it is contending, has achieved some excellent results. Among them is the passage of an Act specifically dealing with the matter by authorizing local authorities to frame by-laws to protect landscapes, promenades, and public parks within their area from disfiguring advertisements of any kind. So far advantage has not been taken freely of the existence of this Act; but the law is working, and this year several county councils have submitted by-laws for approval by the Home Office. Apart from this the society has, by memorials and representations, induced certain advertisers to remove or modify advertisements to which objection was taken. The more specific objects of the society are to protect the picturesque simplicity of rural, river and other scenery, and to assert generally the importance as a great public interest of maintaining the elements of interest and beauty in out-of-door life. The journal contains many illuminating descriptions of the way in which beautiful scenery is at present prostituted to other uses, and a great deal of interesting information as to what is being done on the subject in other countries. The address of the honorary secretary is The Keir, Wimbledon Common. He, like the editor of the journal, modestly conceals his name. We wish the society well.

THE usual monthly meeting of the Executive Committee of the Medical Sicknes, Annuity, and Life Assurance Society, was held at 429, Strand, London, W.C., on September 17th, Dr. J. Brindley James in the chair. The accounts presented showed that the business of the society was steadily progressing. In every year of the quarter of a century during which the operations of the society have been carried on there has been an increase in the number of members and in the amount of the accumulated funds, and the records of 1909 show that this year will be no exception to the rule. The number of members now approaches 3,000, and the funds amount to nearly a quarter of a million sterling, a most satisfactory result for a society which pays no commission and has no agents. The sickness experienced by the society in its early years was very much under the amount expected and provided for in the tables of contributions; but year by year the difference between the experienced and expected sickness has grown smaller until it has almost vanished, and it seems likely that for the future there will be but a small margin of this kind. A considerable saving is made each year in management expenses and the funds earn a large margin of interest over the rate assumed in the valuation. In this way a substantial surplus is produced and there is every reason to hope that the society will be able for many years to come to pay the handsome bonus which is now allotted to every member at 65. Prospectuses and all further particulars on application to Mr. F. Addiscott, Secretary, Medical Sicknes and Accident Society, 35, Chancery Lane, London, W.C.

correspondent asks what fee (if any) he is entitled to and to whom he is to apply for it.

* * We fear that our correspondent will not be able to establish his legal right to a fee in the circumstances. We believe it is not usual for the police to pay fees for professional services rendered in roadside cases, and as no inquest was held, the coroner would have to pay the fee (if any) out of his own pocket, and it is hardly likely he would be prepared to do this. We therefore suggest that our correspondent should courteously draw the attention of the coroner to the strong moral claim he has to some remuneration for his professional services. We may add that we think the coroner might at least have written a special letter of thanks for assistance so readily asked for and not less readily rendered.

Medico-Ethical.

The advice given in this column for the assistance of members is based on medico-ethical principles generally recognized by the profession, but must not be taken as representing direct findings of the Central Ethical Committee.

HEALTH LECTURES AND ADVERTISING.

D. C.—A public vaccinator, or any other member of the medical profession possessed of adequate knowledge, is only performing a duty to the public and to the profession by taking advantage of an opportunity to explain to a popular audience the aims and purpose of vaccination; and no exception ought to be taken to the publication of the title of the lecture on the syllabus of the society under whose auspices it is to be given, or on the large poster version of the syllabus which is placed outside the hall.

SUPERSESION BY A CONSULTANT.

ETHICS complains that he was asked to meet B., a general practitioner, in consultation on a case under his care, and in due course this consultation took place. The following day B. called again upon the patient, after intimating to our correspondent his intention to do so. Four days later the patient asked our correspondent to meet B. again. He did so, but before seeing the patient expressed his objection to B.'s action in calling the day after the consultation without being requested to do so. B. said he was requested by the patient. Our correspondent replied that he ought to have been told of this by both B. and the patient; consequently he declined further attendance. We are asked to say whether B. was guilty of a breach of ethics by calling the day after the consultation, and again by taking over the case having been called to it as a consultant, and whether A., in the circumstances mentioned, could have done anything but decline further attendance without loss of dignity?

* * B. was guilty of a breach of ethical rules in visiting the patient by himself, and the fact that he was asked to do so by the patient is immaterial, but as he intimated his intention to visit her at a certain time he gave our correspondent an opportunity to be present, or to demur to the arrangement. A. need not have declined further attendance; he should have insisted that B. should pay no further visits except in consultation with him, and at times mutually arranged between them.

Universities and Colleges.

UNIVERSITY OF LONDON.

ST. GEORGE'S HOSPITAL.

Lectures on Public Health.

A COURSE of six lectures on public health will be given in the Medical School of St. George's Hospital by Mr. F. E. Fremantle, Edward Jenner Lecturer on Public Health at St. George's Hospital, on Tuesdays, November 2nd, 9th, 16th, 23rd, 30th, and December 7th, at 4 o'clock. The following subjects will be discussed: (1) The Declining Birth-rate, (2) Vital Statistics, (3) Infant Health, (4) School Health, (5) Isolation Hospital, (6) Housing and Town Planning. The lectures are open to those interested in public health, a fee of half a guinea being charged for the course. Application for tickets of admission should be made to Mr. S. A. Williamson, Clerk to the Dean, St. George's Hospital Medical School, S.W.

THE last quinquennial census of medical practitioners in France shows that in 1906 there were 18,211 doctors of medicine and 928 *officiers de santé*. In 1876 there were 19,743 doctors and 6,633 *officiers de santé*. The latter diploma was abolished in 1892. Between 1898 and 1907 the average number of persons on whom the degree of doctor of medicine was conferred annually by the French faculties was 1,100. In 1908 the number fell to 966.

Obituary.

HUBERT ELWYN JONES BISS, M.A., M.D.CANTAB., D.P.H.

DR. HUBERT BISS, second son of Dr. C. Y. Biss, Physician to the Middlesex and Brompton Hospitals, died at Eastbourne on September 20th, at the age of 37.

He had, during the last year, suffered much pain, and, though it had been hoped that rest and treatment would restore his health, grave hæmorrhage occurred shortly after he, under advice, entered a nursing home only a week or two ago.

In spite of the assiduous care of Dr. Harper and other friends his condition became rapidly worse, and, when after some days of unconsciousness the end came, he was laid to rest at Ocklynge Cemetery on September 25th.

Biss was educated for the medical profession at King's College, Cambridge, and the Middlesex Hospital. He held the diplomas of M.R.C.S., L.R.C.P.Lond., and the degrees of M.A. and M.D.Camb. After holding office in 1897 as House Physician at the Brompton Hospital for Consumption, he was chosen to be in immediate medical attendance on the late Mr. Gladstone, with whom he resided for some months before his death at Hawarden in 1898.

The marks of esteem and confidence that Dr. Biss received then, and throughout the remainder of his career, from the family of his illustrious patient, sufficiently prove how well and wisely he justified the trust reposed in him. Subsequently Biss became an Assistant Medical Officer in the hospitals of the Metropolitan Asylums Board; obtained at Edinburgh a diploma in public health, and paid much attention to epidemiology and allied subjects.

Amongst other valuable papers written by him at this time one on The Borderlands of Scarlet Fever and Diphtheria deserves permanent recognition as a really masterly contribution to the elucidation of a difficult subject. On his marriage in 1903 Hubert Biss settled for a while at Eastbourne, but returned to London, attracted by opportunity for continuing his literary work as assistant editor of one of the medical journals, and at the same time engaging in assurance and other work.

Here his reputation and practice rapidly extended; his success seemed certain and secure; and, even when it was made clear to him that rest was necessary, he was full of plans and hopefulness for the future, while to the very last fresh demands on his time and abilities were being pressed on him. He had found work in which he delighted, and his peculiar abilities served him in such good stead, in court and elsewhere, that a desire, if not an intention, of being called to the Bar had already been formed. This and other things were, however, not to be.

Dr. Hubert Biss was a man who will not soon be forgotten by those who really knew him. He possessed unusual capacity, and had read and thought much.

His keen literary sense and humorous appreciation, his wide sympathies and his charm of manner made him to his friends the most delightful of companions. And the epithet of "freehearted," applied by a ballad writer whose MS. may be found in the Pepysian collection, to a Biss of the early seventeenth century—a once popular but now forgotten hero—rises in the mind with peculiar insistence. He has left a widow and a little son.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are Dr. Hermann Lossen, Honorary Professor of Surgery in the University of Heidelberg, aged 66; Dr. Santi Sirena, Professor of Pathological Anatomy in the University of Palermo; Dr. Antonio Curci, Professor of Materia Medica and Pharmacology in the University of Catania; Dr. L. Hendrix, a pioneer of paediatrics in Belgium, and one of the founders of polyclinics in that country; Dr. Alfons Edler von Rosthorn, Professor of Obstetrics and Gynaecology, first at Graz, then at Heidelberg, finally at Vienna, aged 52; Dr. Agnes Hacker, a well-known medical woman who practised as a surgeon in Berlin, aged 49; Dr. E. C. Hansen, Professor of Anatomy in the University of Copenhagen; Professor Max Eduard Jaffé, Surgical Director of the Jewish Municipal Hospital at Posen, aged 51; and Dr. R. Boddart, some time Professor of Pathological Anatomy in the University of Ghent, aged 75.