

## Memoranda :

### MEDICAL, SURGICAL, OBSTETRICAL.

#### TWO RAPIDLY-FATAL CASES OF PNEUMONIA.

IN March last, as I was standing at my hall door one evening bidding good-bye to a patient at 5 p.m., I saw an elderly man filling a bucket of water at the village pump, and chatting to two other men living in the neighbourhood. At 7.15 p.m. I was called to see this man, who was ill. He was sitting in a chair at his door gasping for breath; his face was ashen; he told me he was caught in his stomach and could not get his breath. I tried to get him to lie down in order to examine him carefully, but he could not breathe and jumped up at once into a sitting position. I examined his lungs and found pneumonia at the left base. I injected strychnine and digitalin, gave him medicinal and other stimulants, but in spite of all he died in six hours.

On September 28th, 1909, about 7 p.m., I was called to see a farmer, aged 31, weighing 19 st. On the previous day he had received a great wetting. On September 28th he started to thresh corn in his barn with a horse threshing machine. He fed the machine himself, which, I understand, causes a fearful draught to play all over the feeder, not to speak of the dust that arises during the process. He fed the machine until 6.45 p.m., when he entered his house but did not take any supper. He went up to bed feeling sick and weak; he was shivering very much, and vomited twice. I found him in bed, with a large amount of bedclothes over him trying to get warm; his temperature was 101.6°, his pulse 124, his respirations were 56, but ten minutes after they were 36. He complained of a great pain across the pelvis, sharp pain in the head, and a tightness in his throat, but no pain or stitch in the chest. I found his throat inflamed, and the only thing abnormal in his lungs was a small patch of congestion about 1½ in. square at the base of the right lung; his face was dusky and anxious. I diagnosed pneumonia.

The next morning there was a patch of fine râles at the end of inspiration (about 4 in. by 1½ in.) at the base of each lung close to the spinal column; the temperature was 101°, pulse 128, and respirations 48; he complained greatly of headache and pain over the sacrum. I procured a nurse at once, also oxygen and ice. I had given him the previous evening a diaphoretic and diuretic mixture every three hours, with strychnine and caffeine every six hours, and did everything that could be done for him, but in thirty hours after stopping work he was dying, and died in thirty-five hours.

His face became quite black before death, and immediately after death blood flowed from the mouth. I wet-cupped the back of both lungs but only a little jet-black blood was obtained; it was too thick to flow; he expectorated once thick blood quite black. There was such a layer of fat over his body that not a single vein over the entire arm was visible, even after applying a tourniquet, for I was prepared to bleed him rather extensively if the blood in the veins would flow at all, which was a matter of doubt. I did not open the temporal artery as I considered it would not relieve the right side of the heart. He also received hypodermics of strychnine, and was conscious to the last.

Rhode, King's Co., Ireland.

W. T. MILLS.

#### AVULSION OF THE EYEBALL DURING INSTRUMENTAL DELIVERY.

ON April 7th this year I attended Mrs. C., aged 34, 10 para, in her confinement. As I had attended this same patient at her previous confinement I knew that she had a generally contracted pelvis. The midwife in attendance told me that the woman had been in labour for fourteen hours, the membranes had ruptured about four hours before my arrival, and since then no progress had been made, although the pains had been strong and regular.

I found the os fully dilated, the presentation vertex, and the position L.O.A.; the head was at the brim, the posterior fontanelle was low down, while the anterior was out of reach. I gave chloroform, put on forceps, and delivered the woman without having to use any excessive force in traction. The rest of the labour was normal, but on examining the child, a well-developed female, I found

that the right eyeball was completely dislocated from the orbit, and lying on the cheek below, the optic nerve evidently being torn right across. Under the circumstances there seemed to be nothing else to do but to remove the eyeball, and this I did, applying a dressing to the orbit; there was some hæmorrhage from the orbit at first, but this soon ceased.

The child's face was scarcely marked by the forceps, nor was there any displacement of the bones, and both mother and child made an uninterrupted recovery. This accident, so far as I can discover, seems to be unique in the practice of midwifery; it is a most unfortunate accident to happen to any child, but even more distressing, if possible, when the child is of the female sex.

Dunbar.

A. E. TURNBULL, M.B., Ch.B. Edin.

#### LYMPHO-SARCOMA COMPLICATED BY PULMONARY TUBERCULOSIS.

J. C., aged 27 years, a carpenter, became ill with vague pains in the chest, under the sternum and left hypochondrium. His two paternal uncles died of "cancer of the liver" and "heart disease," his mother of cancer of the breast. The patient himself has never been strong and had suffered from anaemia, but there was no history of severe illness.

When he applied to me he complained of cough and pain on deep inspiration, retching, and chilliness. He stated that six weeks earlier he had suffered from "neuralgic pain" over the right side of the abdomen and between the shoulders, with dark-coloured urine. There was dullness over both apices, with a harsh inspiratory murmur. The supraclavicular and cervical glands were the size of walnuts; they were larger on the right side, freely movable, and painless. The sputum contained tubercle bacilli. Temperature 99°, pulse 96. He was ordered a generous diet, open air, and syr. fer. phosph. co. 3j t.d.s.

During the following month the pains in the chest were sometimes less, but for a week he had slight jaundice, with dark-coloured urine and severe pains in the right hypochondriac and epigastric regions.

On December 17th, a little more than a month from the commencement of treatment, the sputum was reported to be free from tubercle bacilli, but the temperature still rose in the evening to 100° or 101°, and there were nightly sweats; he became very feeble and emaciated, and began to complain of more deep-seated pain beneath the sternum, the swelling of all the superficial glands became more marked, and he was unable to sleep owing to incessant cough. The temperature now rose to 102° at night, and the axillary glands were large and painful, and there was increased vocal resonance over both bases. He complained of severe itching of the skin of the abdomen, arms, and legs; it was unaffected by local applications in ordinary doses of morphine hypodermically; an injection of pilocarpin nitrate produced profuse diaphoresis, and gave immediate relief, lasting for several hours. The jaundice became more intense, and was clearly due to pressure by enlarged glands. He complained of intense pain in the umbilical region.

Four months after the commencement of his illness he developed delusions of persecution with visual and sensory hallucinations. The face and lower limbs became oedematous, there was intense abdominal pain, and he could not bear to have the surface touched. He was very emaciated, feeble, and the icteric tinge much deeper.

During the next month the itching was less severe, the superficial glands became more swollen but less painful. His mental condition became worse, and after a ferocious attack upon his nurses he was removed to an asylum where he died nine months after the commencement of his illness.

Post-mortem examination showed great enlargement of all the lymphatic glands due to sarcomatous growth, with secondary deposits in the liver, spleen and kidneys, and posterior mediastinum; with pressure upon the common bile ducts, bronchi, and inferior vena cava. The tuberculous lesions on both sides were completely healed. During his illness several blood examinations were made, all showing increase of leucocytes and great diminution of red corpuscles. The spleen was never perceptibly enlarged.

Lechlade.

F. W. PILKINGTON.

# Universities and Colleges.

## ROYAL COLLEGE OF SURGEONS OF ENGLAND.

### ANNUAL MEETING OF FELLOWS AND MEMBERS.

THE annual meeting of the Fellows and Members of the Royal College of Surgeons of England was held on November 18th at the College, the chair being taken by the PRESIDENT (Mr. Butlin).

The PRESIDENT placed before the meeting the report of the Council for a period from August, 1908, to August, 1909,<sup>1</sup> and in the course of his remarks on it referred to the proposed combination of the College with the University of London to secure a degree in medicine for the average London medical student. The College, he said, would do all in its power for the benefit of students in the metropolis, and would give evidence before the Royal Commission on University Education in London which had been recently appointed. In regard to the admission of women to the Membership and Fellowship examinations, the necessary alterations had been made in the by-laws, and had been approved by the Home Secretary. The President also referred to the efforts made to secure payment to medical men called in by midwives in cases of emergency under the Midwives Act, and he expressed his opinion that the existing condition of things in that respect was a great hardship on medical men.

Dr. W. G. DICKINSON referred to the paragraph of the report in which the following words occurred: "The property of the College is not vested in the existing Members, but in the body corporate." He asked the President for a definition of the term "body corporate." Was it a "spook" or some sort of imaginary body to be alluded to when convenient?

The PRESIDENT replied that the "body corporate" was the past, present, and future Members of the College.

Dr. DICKINSON then asked if the proposed scheme with the London University had fallen through.

The PRESIDENT said that the scheme of the proposed combination with the University of London had not fallen through, but it appeared that the Senate of the University of London was not inclined to do anything in the matter while the present Royal Commission on University Education in London was sitting.

Mr. F. COLLINGWOOD asked for a statement as to whether the question of the Members of the College having a part in the administration of the College had ever been before the Council.

The PRESIDENT replied that the question had been before the Council on more than one occasion.

Mr. JOSEPH SMITH then moved:

That this twenty-fifth annual meeting of Fellows and Members again affirms the desirability of admitting Members to direct representation on the Council, which as now constituted does not represent the whole corporation; and that it does so in order that the constitution of the Council of the Royal College of Surgeons of England shall be in keeping with modern ideas of true representation.

He said that his motion had been before the meetings of the Fellows and Members for the last twenty-five years; it had been carried in most cases unanimously, and in other cases with a very small minority voting against it. The motion was supported, not only by the Members of the College, but also by a vast number of enlightened Fellows. It must be quite clear to the Council that the condition of things was such that it could not possibly continue. It was absolutely wrong that some 17,000 Members of the College should be ostracized in the manner that they were at present. The Council received the resolution of the Members year after year, and replied simply with a *non possumus*, giving no reasons whatever for their conduct. In the BRITISH MEDICAL JOURNAL a letter had recently appeared in which a clear and broad statement of the position was put forward by a writer who signed himself "Fiat Justitia Ruat Coelum." He trusted that that motto would guide the President of the College when he retired into the Council chamber and considered the motion that he (Mr. Smith) was putting before the meeting.

Mr. COLLINGWOOD, in seconding the motion, pointed out that medical students had been driven away from London to study for their medical degrees in provincial towns.

Dr. W. H. DAY asked where the College would be without its Members who provided the income. The time had come when the 17,000 educated men who were the Members of the College would be forced to appeal to Parliament or otherwise bring influence to bear to demand justice.

Dr. S. WILSON pointed out that if the Council granted seats to four of the Members of the College on the Council,

then the disabilities and complaints of the Members could be brought to the notice of the Council.

Mr. H. ELLIOT-BLAKE spoke in support of the motion, and Mr. C. C. J. WILKINSON declared that the Members were neglected by the College, giving a sad description of the hard conditions of life in which a large number of the Members of the College were working.

Mr. S. W. OWEN pointed out the disability under which Members of the College laboured in courts of law when giving evidence, by reason of the fact that juries were continually being told that Members of the College were not doctors.

Mr. W. W. STOCKEN said that the membership question would settle itself by the gradual extinction of the College, unless something were done to stop medical students going to the provinces, where they could get a degree in medicine.

Dr. DICKINSON said that the question was not whether the Members would be represented or not on the Council, but it was when that representation should come into effect.

Mr. Joseph Smith's motion was then put to the meeting and carried *nem. con.*

Dr. A. S. MORTON then moved:

That, in fulfilment of the promise made by the President of the College in 1906, this meeting strongly urges the Council to impress upon the Government the necessity of amending the Midwives Act next session, in order that provision may be made to secure just remuneration for professional services rendered by medical men under this Act.

He said that unless the College had supported the Midwives Act it would not have become law. The members of the Council did not practise midwifery; if the members of the College had representation on the Council it would be able to learn the true condition of affairs.

Mr. DAY seconded the motion, and Mr. STOCKEN, in speaking in support of it, said that in his practice midwifery cases had dropped from 100 a year to 17 in consequence of the passing of the Midwives Act. The practitioners were called in to the difficult cases and received no payment.

Mr. COLLINGWOOD said that the responsibilities and the expenses of the general practitioner were increasing without any corresponding addition to his remuneration.

The PRESIDENT described his early experiences as an assistant in a country practice when he attended midwifery cases. He had been informed by the Chairman of the Central Midwives Board that now was the time for the College to send in representation to the Privy Council to say that the College approved of the recommendation in the report of the Departmental Committee on the working of the Midwives Act. The opportune moment had arrived for the Council to approach the Government to press forward the question of the payment of medical men called in by midwives under the Midwives Act; and he assured the meeting that it was fully recognized that it amounted to a misfortune to the whole country that medical men were not paid when called in by midwives. The President concluded by stating that he would bring the subject before the meeting of the Council in December.

The motion proposed by Dr. Morton was then put to the meeting and carried.

The following motion, proposed by Mr. H. ELLIOT-BLAKE and seconded by Mr. BRINDLEY JAMES, was carried:

That the Council of the Royal College of Surgeons of England, through their Joint Committee of Delegates, and when it is found necessary, and in any agreement with the Royal College of Physicians of London, be asked to approve of and promote a new charter and Act of Parliament to incorporate the Royal Colleges of Surgeons of England and Physicians of London so as to form Royal Colleges or parts of the University of London.

## UNIVERSITY OF CAMBRIDGE.

### Professorship of Biology.

THE Council of the Senate will on Monday, January 17th, 1910, proceed to the election of a professor of biology in succession to Professor Bateson. Applications must be made to the Vice-Chancellor on or before January 10th, 1910.

### A Laboratory for Experimental Psychology.

The special board for Moral Science has called the attention of the Senate in a report to the need of more adequate accommodation for the laboratory of experimental psychology. At present, the report states, this department is housed in a damp, dark, and ill-ventilated cottage at 16, Mill Lane, the property of the Syndics of the University Press, who allow the department to occupy it. It is estimated that a building adequate for the present needs of the department might be erected at a cost of £3,000, and equipped for £1,000 more. Provision for the cost of maintenance, estimated at £1,000, is also necessary. Towards the amount required nearly £3,700 has been already promised or paid, but this includes an offer of £3,000 made on condition that the building is begun without delay.

<sup>1</sup> This report was noticed in the BRITISH MEDICAL JOURNAL of November 6th, p. 138.

## UNIVERSITY OF LONDON.

THE following candidates have been approved at the examinations indicated:

THIRD M.B., B.S. (*Honours*).—†E. M. A. Duviolier, Guy's Hospital; †G. Jefferson, Victoria University of Manchester; †G. H. Peall, Guy's Hospital; †H. Platt (University medal), Victoria University of Manchester; \*W. R. Thomas, Charing Cross Hospital; †E. F. G. Tucker, London Hospital; \*J. W. J. Willcox, University of Bristol.

\* Distinguished in medicine. † Distinguished in surgery.

THIRD M.B., B.S. (*Pass*).—M. E. Ball, R. P. Ballard, Ella M. Barker, A. Bernstein, B. Biggar, Anne Borrow, H. L. Burton, H. D. Clement-Smith, A. Davies, M. R. Dobson, R. C. V. Edsall, A. O. English, E. L. Fyffe, A. A. Greenwood, D. J. Harries, C. R. Hoskyn, W. S. Hughes, M. L. C. Irvine, W. B. Johnson, J. E. L. Johnston, R. H. H. Jolly, E. A. Lloyd, G. G. Lytle, E. L. W. Mandel, E. W. Matthews, E. R. Morley, J. S. New, A. H. Peniston, W. J. Petty, C. J. Rogerson, F. C. Searle, C. W. Shepherd, G. R. Strong, J. B. Tackaberry, Margaret G. Thackrah, B.A., J. E. H. Turton, B. R. Vickers, Gladys M. J. Watts, H. O. West, R. T. Williams, E. W. Witney, C. I. Wright, S. Wyard.

THIRD M.B., B.S. (*Group I only*).—J. A. Atkinson, A. D. E. Bayliss, H. W. Catto, Ethel M. Connan, Nina G. Cotton, J. P. Elias, E. L. Elliott, W. M. Feldman, Dossibai R. C. Patel, W. L. Fink, A. H. Pollard, G. Price, S. I. Rabinowitz, E. E. A. T. Rigg, H. D. Robinson, R. H. Wilsaw.

THIRD M.B., B.S. (*Group II only*).—Mary H. Atherton, G. H. Chisnell, P. C. Conran, R. L. Crabb, J. R. B. Dobson, D. Green, A. R. Jones, D. Kennedy, J. S. H. Lewis, J. P. Little, Ethel M. Morgan, H. O'Meara, A. B. Porteous, G. F. R. Smith, T. Stanfield, N. Tattersall, G. O. Teichmann, W. Weir.

## VICTORIA UNIVERSITY OF MANCHESTER.

## MEETING OF UNIVERSITY COURT.

At the last meeting of the Court, under the presidency of Vice-Chancellor Hopkinson, sympathetic reference was made to the late Alderman Thompson, and a resolution was passed expressing the Court's high sense of the great value of the long and devoted services of Dr. Thompson rendered to the Owens College and the University in the office of Treasurer for more than twenty years.

## Report of Council.

Sir Frank Forbes Adam then presented the report of the Council for the past year. Allusion was first made to the way in which the work of the departments had been hampered by want of space and accommodation and by deficiency of apparatus. The old difficulty was want of funds, and the Council had decided that among the many claims on it the most urgent was that of the chemical department. The new laboratories opened in October were well up to date and satisfactory in every way. The cost had been met by the munificence of Mr. Carnegie and other generous contributors, but still more was needed for equipment. The new engineering laboratories, opened last July, also wanted more equipment. Reference was then made to changes in the staff, including the retirement of Professor Boyd Dawkins and the appointment of Sir T. Holland in his place, and also the retirement of Professor Young, who had been succeeded in the Chair of Anatomy by Dr. Elliott Smith. Among the new developments was the establishment of a Chair of Cryptogamic Botany, a Department of Agriculture, a Lectureship in Experimental Psychology, tutorial classes for work people, courses for journalists, and classes for Bible students. Last year the total number of students was 1,419 and this year 1,518, an increase of 99. The university contingent of the Officers' Training Corps had increased from 111 to 175.

In supporting the report, Sir Wm. Mather said that already excellent original research had been done in the engineering department, for which accommodation was not possible before. The physical laboratory, established a few years ago under Professor Schuster, had also developed enormously. In the chemistry department there was no branch of chemistry that was not now provided for in proportion to the number of students.

## Financial Report.

Mr. Broadfield, Treasurer, presented the financial report, which showed that the expenditure had increased from £67,399 to £73,120, but the receipts had increased at about the same rate, and the balance of income over expenditure was £21, against £42 last year. The total assets now amounted to £1,268,285, an increase on the year of £111,191, mainly accounted for by the inclusion of sums given by the late Mrs. Rylands, Professor Barker, Mr. G. Harrison, and Mr. Carnegie. Professor Barker's bequest was £23,000, and was left for the foundation of the chair of cryptogamic botany now occupied by Professor Lang. Professor Barker's success as a lecturer in the university was shown by a list of the brilliantly successful men that studied under him in mathematics. Among these were Sir J. J. Thomson, Dr. Horace Lamb, Dr. A. Schuster, and the late Dr. John Hopkinson. The report was adopted.

## Election of Governors and Members of the Council.

The following governors were reappointed: Sir H. Roscoe, and Messrs. T. G. Ashton, H. L. Behrens, H. J. Goldschmidt, and Walter Whitehead; while Mr. V. K. Armitage was elected in place of the late Alderman Thomson.

Mr. H. H. Smith-Carrington and Mr. A. C. Maberley were elected to fill vacancies as members of the Council, and the following were reappointed: Sir Frank F. Adam, Mr. H. L. Behrens, Mr. J. F. Cheetham, Sir Ed. Donner, Mr. Alfred Haworth, Alderman Goldschmidt, Mr. Ivan Levinstein, and Mr. Wm. Thorburn.

## Honorary Degrees.

A resolution was unanimously adopted to confer the degree of D.Sc. on Professor Boyd Dawkins for the distinction he had achieved in research in prehistoric and Roman archaeology. It was also resolved to delegate the authorization of honorary degrees in future to the Council.

## Evening Courses.

Dr. Schuster then presented a report of the Senate on the question of evening courses as qualifying for degrees, and he proposed:

That the Court is of opinion, having regard to the report of the Senate and the facts stated in the appendices, that it is not desirable at present to take steps for the institution of courses of study in the evening leading to degrees in arts, science, or technology.

He said there were great differences of opinion as to the advisability of instituting degrees for evening students, but leaving the abstract question as to whether it was desirable or not, the practical question to be considered was whether, balancing the advantages and disadvantages, the great expenditure necessary should be incurred. The Vice-Chancellor said that the Court was bound, in face of the facts, to agree with the Senate. The failure of other universities in any such scheme showed that Manchester would not be warranted in undertaking it at present. The case of commerce was quite different, for in this the practical work was done in offices of all kinds, in banks, and other places, and there was no difficulty in having evening classes. The university would also be willing to institute high-class instruction in any subject for which there was a demand. The resolution of Professor Schuster was unanimously carried.

## Department of Agriculture.

A resolution was also carried appointing an advisory committee on agriculture. To carry on this work the university had combined with the Cheshire County Council, and students would have six months' practical work on a farm alternating with six months' work in the university.

## UNIVERSITY OF DUBLIN.

THE following candidates have been approved at the examinations indicated:

FINAL M.B., CH.B., B.A.O. (*Medicine, Part II*).—\*A. A. M'Connell, \*B. H. Moore, P. H. Lemass, W. R. Watson, L. Trichard, E. B. Bate, R. E. Lee, J. D. Murphy, H. S. Metcalf, C. H. Denham, W. H. Hart.

FINAL M.B., CH.B., B.A.O. (*Surgery, Part II*).—\*H. Müller, \*J. W. Flood, Beatrice M. Hamilton, P. H. Lemass, A. A. M'Connell, R. E. Lee, J. E. N. Ryan.

\* Passed on high marks.

## SOCIETY OF APOTHECARIES OF LONDON.

THE following candidates have been appointed in the subjects indicated:

SURGERY.—\*B. T. Lang.

MEDICINE.—\*S. Danziger, \*C. J. Thompson, \*T. A. F. Tyrrell.

FORENSIC MEDICINE.—S. Danziger, C. P. A. de L. Pereira, T. A. F. Tyrrell.

MIDWIFERY.—S. Danziger, W. H. Watson.

\* Section I.

† Section II.

The diploma of the Society has been granted to Mr. T. A. F. Tyrrell.

## The Services.

## ROYAL ARMY MEDICAL SERVICES.

## EXAMINATION FOR COMMISSIONS.

AN examination for not less than five commissions in the Royal Army Medical Corps will be held on January 26th, 1910, and following days. Candidates who are over the regulated limit of age at the date of the examination will be permitted to deduct from their actual age any period of service in the field after October, 1899, that they could reckon towards retired pay and gratuity, if such deduction will bring them within the age limit. Further particulars will be found in the advertising columns, but it may here be stated that applications to compete should be made to the Secretary, War Office, London, S.W., not later than January 17th, 1910.

## INDIAN MEDICAL SERVICES.

## PAY OF OFFICERS.

"ANOTHER OFFICER" writes: In my note on the I.M.S., published at p. 1202 of the JOURNAL for October 16th, there is one mistake, doubtless due to my bad handwriting. The military pay of a major of twelve years' standing is Rs. 650, not Rs. 750, giving a total pay and allowances of Rs. 800. The point I wished to bring out was that, even with the additional pay of a gaol, the pay of the civil surgeon is no more than that of the regimental doctor, while his duties are far more onerous.

If we take two captains, each with seven years' service, one in charge of a regiment, the other a civil surgeon with the charge of a small gaol, their pay will be identical:

Regimental medical officer, 500 grade + 150 staff = Rs. 650.

Civil surgeon, 600 pay + 50 gaol = Rs. 650.

## Medical News.

THE King has been pleased to approve of the Polar Medal, with a clasp inscribed "Antarctic, 1907-9," being granted to members of the Shackleton Antarctic Expedition, 1907-9. Dr. E. Marshall is among the recipients of the medal in silver.

DR. THOMAS DE MELLO BREYNER, Physician in Ordinary to His Majesty the King of Portugal, has been appointed by King Edward an Honorary Commander of the Royal Victorian Order, on the occasion of the visit to Windsor of the King of Portugal.

EMERITUS PROFESSOR THOMAS PURDIE has offered to the University of St. Andrews the sum of £2,000 to provide the salary of an assistant in the Purdie Chemical Research Laboratory.

THE Symons gold medal of the Royal Meteorological Society has been awarded to Mr. William Napier Shaw, D.Sc., F.R.S., Director of the Meteorological Office, and Reader in Meteorology in the University of London.

MR. GEORGE H. LODGE L.R.C.P. and S.Ed., L.D.S., R.C.S.S., formerly Mayor, now Deputy Mayor of the borough of Rotherham, has been added to the Commission of the Peace for that borough.

SIR WATSON CHEYNE, Bart., C.B., F.R.S., and Dr. Purves Stewart have been appointed consulting surgeon and consulting physician respectively to the Central London Throat and Ear Hospital.

THE Liverpool medical students will hold their annual dinner in the Adelphi Hotel on Saturday, December 11th, at 7.30 p.m. Dr. J. Hill Abram will be in the chair and Mr. R. Craig Dun, F.R.C.S., in the vice-chair. It is hoped that as many post students as possible will be present at the dinner. Further particulars can be obtained from the Honorary Secretaries, Mr. John Campbell and Mr. R. H. Knowles, at the Medical School.

A METHOD of handling milk which presents some points of interest and novelty was described and demonstrated before a party of medical men on November 20th by the representatives of a new undertaking, the White Cross Creamery Company. The company has its working head quarters near the village of Knebworth, in Hertfordshire, and later on it is proposed to start other working centres in other of the home counties. Its distributing dépôt is in the West End of London. The milk is obtained from farms none of which are more than six miles from the factory, and it is calculated that within little more than half an hour of the time that it is drawn all milk will, as a rule, come under treatment at the factory, where it is at once placed in a centrifugalized machine in which dirt is collected in a central drum. The separated milk is afterwards maintained at 140° F. in an air-heated vessel, until it has been reduced in bulk to one-fifth of its original amount, filtered air being meantime continuously driven through it. The cream is treated in much the same fashion, but the insufflation of air is omitted, and any scum rising to the surface is constantly cleared away. Finally the milk and cream, both reduced in bulk, are mixed, the proportion which they then form to the original being one-fourth. The milk is then sent to the London dépôt, where, when intended for ordinary distribution, the 75 parts of water removed by the previous treatment are replaced by an equivalent amount of cold sterilized water. The result is a fluid claimed to have the ordinary taste of natural unpasteurized milk, and containing 3½ per cent. of cream. At the same time, the treatment has, it is claimed, reduced its bacterial contents by some 99 per cent., while all pathogenic organisms, including tubercle, which it may have contained, have been destroyed. The aëration in the case of the separated milk, and the scumming in the case of the cream, are regarded as of special value, the forced aëration for at least two hours securing destruction of anaërobic organisms, and the scumming leaving any microbial life in the cream fully exposed to the action of the heat. The company states that the saving in the cost of transport due to the reduced bulk of the milk fully covers the expense of treatment. It also avers that the milk will be found to keep in perfect condition for from twelve to thirty-six hours longer than ordinary milk. The process has been devised by Dr. Campbell, of New York, and the statements as to its results are borne out by reports from Dr. Klein, F.R.S.

## Letters, Notes, and Answers.

### BRITISH MEDICAL ASSOCIATION AND BRITISH MEDICAL JOURNAL.

THE offices of the British Medical Association and of the BRITISH MEDICAL JOURNAL are at 429, Strand, London.

*Queries, answers, and communications relating to subjects to which special departments of the BRITISH MEDICAL JOURNAL are devoted will be found under their respective headings.*

### QUERIES.

SOME time ago the suggestion was made that a reserve of all men who had had any military service or training should be formed, but we do not recall that anything more has been heard of the proposal. If any correspondent has information on the point we should be glad to have it.

### TREATMENT OF MUSCULO-SPIRAL RHEUMATISM.

TALBOT, a rheumatic subject, suffers from this variety for the first time. It resists all the internal and external remedies that have been tried. It is now fairly chronic. Putting on the coat is painful. Sleep is interrupted by intervals of pain in the course of the nerve. Golfing has become impossible. What special treatment can be recommended?

### INCOME TAX.

I. T. has not made a return of his income for over fifteen years, but has taken the risk and paid the income tax assessed by the commissioners. He made a return this year of his total income from all sources in order to claim the reduction for earned income, and this showed that he was not entitled to the abatement of £120 that he had been allowed until last year. The collector now says he must make good the loss to the revenue, threatening penalties as an alternative. I. T. wishes to know whether the collector's statement is correct, and for how many years he should pay, and to what penalties he is liable.

\* \* The question of penalties under the Income Tax Acts is very complicated, and it is very difficult to pronounce an opinion without fuller information. The legal position is that the collector cannot recover any duties underpaid prior to the year ending April 5th, 1908, and his only resource would be by proceedings for penalty in case a penalty has been incurred since April 5th, 1908. It is not quite clear what our correspondent means by "this year." If for the years 1908-9 and 1909-10 the professional return has been made in due time and on the full amount of the liability to income tax, and there was no incorrect statement in the declaration of total income, it is probable that no penalty is now recoverable. If, on the other hand, there is anything wrong with the return or claim for either of those years, the Crown could proceed for penalties of £20, and treble the income-tax payable. It will be observed that no penalties are recoverable for years prior to April, 1908, but the powers of the Crown in respect of any subsequent default are such as to enable insistence on restitution for earlier years. It is, we believe, usual to accept the amount of duty underpaid during the previous six years in lieu of proceedings.

### UNILATERAL PARALYSIS OF THE SPHINCTER IRIDIS AND OF ACCOMMODATION.

ÆSCULAPIUS describes a case in which there is unilateral paralysis of the sphincter iridis and of accommodation. The left pupil is much larger than the right and accommodation is greatly impaired. The patient is otherwise healthy, and there is no history of syphilis. Five years ago he had diphtheria. There is no history of injury before the onset of the trouble. He asks for advice as to treatment.

\* \* The case must necessarily be obscure in the absence of localizing symptoms. It is unlikely that the diphtheria is responsible for it, though if, as some hold, the paralysis following this disease is due to hæmorrhage in the floor of the fourth ventricle, it may cause permanent injury. Paralysis has been known to follow influenza, but the most frequent cause is some nuclear lesion. It is a well known symptom as a forerunner of serious mental and nervous diseases, and this may occur years before any other symptoms become manifest. The possibility that a patient, especially if a woman, is using atropine or some form of belladonna to the eyes must never be forgotten; such cases are by no means infrequent. Electricity is unlikely to be of any service whatever, though the application of the interrupted current of such a strength as could be comfortably borne would certainly do no harm. A suitable convex lens would assist reading, and should be worn, but its strength will depend upon the refraction of the

## THE BRITISH MEDICAL ASSOCIATION.

## THE BRITISH MEDICAL JOURNAL.

The British Medical Association, established in 1832, exists for the promotion of medicine and the allied sciences, and the maintenance of the honour and interests of the medical profession.

The British Medical Journal, published by the Association for the increase and dissemination of medical knowledge and the discussion of scientific, political and social questions affecting the medical profession, has gained an important circulation throughout the world, and is one of the chief means by which the clinical and scientific work accomplished by British workers is brought to the knowledge of the profession in foreign countries.

The Divisions and Branches of the British Medical Association established throughout the United Kingdom and in most other parts of the British Empire, hold periodical meetings, and a General Meeting of the Association, which all members are entitled to attend, is held once a year. All the proceedings, scientific, clinical, and medico-political, of the Annual General Meeting are promptly reported in The British Medical Journal, and an Epitome of Current Medical Literature, devoted mainly to analyses of foreign medical publications, is published weekly. For the convenience of members, the proceedings of the Association, including those of its Divisions and Branches, relating to medico-political and administrative matters are collected in a Supplement, which forms a part of each weekly issue of The British Medical Journal.

The British Medical Journal, while not neglecting to record the progress of the sciences of physiology, pathology and bacteriology, to the advancement of which the Association annually allots a sum of over £1,000 in Research Scholarships and Grants, is mainly devoted to practical and social medicine, and publishes in every number clinical lectures, essays, addresses, and reports, the majority of the latter being short notes from general practice, the value of which is recognised not only at home, but abroad, being frequently quoted in foreign medical publications.

The British Medical Journal is forwarded weekly, post free, to every member of the British Medical Association wherever he may reside. The annual subscription to the Association is twenty-five shillings. Every medical practitioner who is registered in the United Kingdom, or who, being resident elsewhere in the British Empire, possesses recognised medical qualifications, is eligible to be elected a member of the British Medical Association.

If resident in the United Kingdom or any other part of the Empire where there is a Branch of the Association, a candidate for election should apply to the Honorary Secretary of the Branch, or if resident in a district where there is no Branch, to the Financial Secretary and Business Manager, 429, Strand, London, W.C., who will in all cases supply the necessary form and other information.

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It is the custom to publish in each issue of The British Medical Journal, in addition to numerous clinical papers, one or more clinical lectures or addresses on clinical subjects. Among those for the publication of which during 1910 arrangements have already been made, are the following :—

- ON PNEUMONIA*, by WILLIAM OSLER, M.D., F.R.S., *Regius Professor of Medicine, Oxford.*
- ON PLEURAL EFFUSION*, by SIR THOMAS OLIVER, M.D., F.R.C.P., *Physician Royal Victoria Infirmary, Newcastle-on-Tyne; Professor of Physiology University of Durham.*
- ON MENTAL AND CARDIAC STRAIN*, by SIR LAUDER BRUNTON, M.D., F.R.S., *Consulting Physician to St. Bartholomew's Hospital.*
- ON DISEASE OF THE HEART AND CIRCULATION and ON THE TREATMENT OF DYSPEPSIA*, by DAVID DRUMMOND, M.A., M.D., *Senior Physician Royal Victoria Infirmary, Newcastle-on-Tyne, and Joint Lecturer on the Principles and Practice of Medicine in the University of Durham.*
- ON THE CHARACTER OF FLUIDS WITHDRAWN FROM THE PERITONEAL SAC IN CASES OF ASCITES AND OTHER ACCUMULATIONS*, by R. G. HEBB, M.D., F.R.C.P., *Physician to the Westminster Hospital, Consulting Pathologist Queen Charlotte's Hospital.*
- ON RHEUMATISM AND RHEUMATOID CONDITIONS*, by CHARLES J. MACALISTER, M.D., *Lecturer on Clinical Medicine University of Liverpool, and Honorary Physician and Lecturer on Practical Medicine Liverpool Royal Southern Hospital.*
- ON INJURIES OF THE HEART*, by J. BLAND-SUTTON, F.R.C.S., *Senior Surgeon Chelsea Hospital for Women, Surgeon and Lecturer on Surgery Middlesex Hospital.*
- ON THE USES OF COLCHICUM*, by G. A. GIBSON, M.D., F.R.C.P., *Physician Royal Infirmary, Edinburgh, Consulting Physician Deaconess Hospital.*
- ON SOME POINTS IN THE SURGERY OF THE BRAIN*, by SIR VICTOR HORSLEY, F.R.S., F.R.C.S., *Surgeon to the National Hospital for the Paralysed and Epileptic, Queen Square.*
- ON THE CEREBELLUM AND ITS AFFECTIONS, being the Lettsomian Lectures*, by J. S. RISIEN RUSSELL, M.D., F.R.C.P., *Physician University College Hospital.*
- ON ANOREXIA NERVOSA*, by W. HALE WHITE, M.D., F.R.C.P., *Senior Physician Guy's Hospital.*
- ON NERVE STORMS*, by GUTHRIE RANKIN, M.D., F.R.C.P., *Physician Seamen's Hospital Society, and Royal Waterloo Hospital for Children and Women.*
- ON THE TREATMENT OF TYPHOID FEVER*, by F. J. SMITH, M.D., F.R.C.P., *Physician and Senior Pathologist London Hospital.*
- ON THE TREATMENT OF CANCER OF THE ŒSOPHAGUS*, by W. ARBUTHNOT LANE, M.S., *Surgeon to Guy's Hospital, and to the Hospital for Sick Children, Great Ormond Street.*
- ON SOME POINTS IN DISEASES OF THE STOMACH*, by CHARLES BOLTON, M.D., M.R.C.P., *Assistant Physician University College Hospital.*
- ON THE SURGICAL TREATMENT OF GASTRIC ULCER AND THE COMPLICATIONS OF ULCER*, by KEITH W. MONSARRAT, F.R.C.S. ED., *Surgeon to the Northern Hospital, and Lecturer on Clinical Surgery University of Liverpool.*
- ON THE EARLY DIAGNOSIS OF CARCINOMA OF THE STOMACH*, by C. W. MANSELL MOULLIN, M.D., F.R.C.S., *Senior Surgeon London Hospital.*
- ON DUODENAL ULCER*, by A. F. HERTZ, M.D., *Assistant Physician and Physician in Charge Electrical Department Guy's Hospital; Demonstrator in Morbid Anatomy Guy's Hospital Medical School.*
- ON APPENDIX DYSPEPSIA*, by B. G. A. MOYNIHAN, M.S., F.R.C.S., *Surgeon Leeds General Infirmary.*
- ON THE DIAGNOSIS OF ACUTE INTESTINAL OBSTRUCTION*, by H. BETHAM ROBINSON, M.D., M.S., F.R.C.S., *Lecturer on Practical Surgery St. Thomas's Hospital; Consulting Surgeon East London Hospital for Children.*
- ON THE SURGERY OF THE HEPATIC AND COMMON BILE DUCTS, WITH NOTES OF A SUCCESSFUL CASE OF HEPATICO-CHOLEDOCHOSTOMY*, by J. LYNN THOMAS, C.B., F.R.C.S., *Surgeon Cardiff Infirmary.*
- ON THE TREATMENT OF INGUINAL HERNIA BY OPERATION*, by C. YELVERTON PEARSON, F.R.C.S. Eng., M.D.R.U.I., *Surgeon Cork North Infirmary, Professor of Surgery Queen's College, Cork.*
- ON THE TREATMENT OF CHRONIC NEPHRITIS*, by ALFRED G. BARRS, M.D., F.R.C.P., *Honorary Physician Leeds General Infirmary, Professor of Medicine University of Leeds.*
- ON SEPTIC PYELITIS AND PYELONEPHRITIS*, by W. P. HERRINGHAM, M.D., F.R.C.P., *Physician and Lecturer on Forensic Medicine, St. Bartholomew's Hospital, and Consulting Physician Paddington Green Children's Hospital.*
- ON URÆMIC RASHES*, by H. D. ROLLESTON, M.D., F.R.C.P., *Senior Physician St. George's Hospital, Physician Victoria Hospital for Children.*

- ON URETHRAL CALCULI. A REVIEW OF THE METHODS EMPLOYED FOR THEIR REMOVAL, WITH NOTES OF TWO SUCCESSFUL CASES OF TRANSPERITONEAL URETERO-LITHOTOMY, by SINCLAIR WHITE, M.Ch., F.R.C.S., *Senior Hon. Surgeon to the Royal Infirmary, and Lecturer on Surgery in the University of Sheffield.*
- ON SUGGESTIONS CONCERNING THE RELATIONS OF TUBERCLE, SYPHILIS, AND MALIGNANT DISEASE, by J. RUTHERFORD MORISON, F.R.C.S., *Senior Surgeon Newcastle-on-Tyne Royal Victoria Infirmary.*
- ON TUBERCULOUS DISEASE OF JOINTS, by F. C. WALLIS, F.R.C.S., *Surgeon to Charing Cross Hospital.*
- ON RADIUM: SOME OF ITS PHYSICAL AND THERAPEUTIC PROPERTIES, by J. MACKENZIE DAVIDSON, M.B., C.M., *Medical Officer in Charge Röntgen Ray Department, Royal London Ophthalmic Hospital, and Consulting Medical Officer X-Ray Department, Charing Cross Hospital.*
- ON THE SURGICAL TREATMENT OF CERTAIN CASES OF GLYCOSURIA, by A. W. MAYO ROBSON, F.R.C.S., *Emeritus Professor of Surgery University of Leeds; Honorary Surgeon Dreadnought Hospital.*
- ON ELASTIC TRACTION IN SURGERY, by G. A. WRIGHT, F.R.C.S., *Surgeon Manchester Royal Infirmary, Consulting Surgeon Hospital for Children, Pendlebury; Professor of Surgery University of Manchester.*
- ON DERANGEMENTS OF THE KNEE, by ROBERT JONES, F.R.C.S. Ed., *Honorary Surgeon Royal Southern Hospital, and Surgeon Liverpool Country Hospital for Children.*
- ON A TRAUMATIC CAUSE OF CHRONIC MASTITIS, by G. LENTHAL CHEATLE, C.B., F.R.C.S., *Surgeon King's College Hospital.*

The Annual Meeting for 1910 will be held in London. In addition to the address of the President, Mr. Butlin, and the addresses in Medicine and Surgery, and the proceedings of the Annual Representative Meeting, which begins on Friday, July 22nd, full reports of the meetings of the Sections will be published in The British Medical Journal at an early date after the meeting. There will be on this occasion twenty-one Sections, as follows:—Anæsthetics; Anatomy; Bacteriology; Dermatology; Diseases of Children; Gynæcology and Obstetrics; Laryngology; Medical Sociology; Medicine; Naval, Military and Ambulance; Odontology; Ophthalmology; Otology; Pathology; Pharmacology and Therapeutics; Physiology; Psychological Medicine with Neurology; Radiology and Medical Electricity; State Medicine; Surgery; Tropical Medicine.

The membership of the British Medical Association is twenty-one thousand. The circulation of The British Medical Journal is between twenty-four and twenty-five thousand a week; it reaches every part of the British Empire and every civilized country in the world.

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November, 1909.