

## Memoranda:

### MEDICAL, SURGICAL, OBSTETRICAL.

#### A FATAL CASE OF HAEMOPHILIA.

A BOY of 4 was brought to the hospital, and handed in by a drunken father without any history. Blood was running freely from the mouth, and when this was opened it was seen that there was a cut on the front of the right side of the tongue, about one-third of an inch long, and not very deep. I put a stitch in to draw the edges of the wound together, but as this did not stop the bleeding I had the child put under chloroform, and caught the cut ends of the bleeding vessel with pressure forceps. This seemed to stop the haemorrhage, but on putting two or three stitches in free oozing took place from the needle punctures. The bleeding went on uninterruptedly till a few hours before death, which took place about forty-eight hours after admission. We tried to get a continuous pressure on the tongue, but found this impossible on account of the resistance of the child. Calcium chloride in large doses was given. It was suggested that the carotid should be ligatured, but this was held to be inadmissible on account of the necessity of making a fresh wound, where there would be fresh haemorrhage to control.

We could not get much in the way of a history from the parents, but they said the two other children, both boys, were "bleeders." The child who died had had two previous attacks of severe haemorrhage, one from a tiny cut in the finger, which had nearly proved fatal.

This short note illustrates one or two well-known points in connexion with the disease. Thus about 90 per cent. of the cases occur in males, and over 50 per cent. die before they reach 7 years of age. The tendency usually appears early in life, and the first haemorrhage rarely kills.

L. A. PARRY, M.D., F.R.C.S., B.S.,  
Assistant Surgeon, Royal Alexandra Hospital  
for Sick Children, Brighton.

#### ARTIFICIAL RESPIRATION IN NEW-BORN INFANTS.

THE writer was rather sorry to see on page 1194 of the *BRITISH MEDICAL JOURNAL*, May 14th, 1910, a description, with figures, of the dirty and risky method introduced by Schultze in 1871; and he would like to call attention to a note on the subject by Dr. R. C. Buist, of Dundee, which appears in the *Transactions of the Edinburgh Obstetrical Society*, vol. xx, p. 77, 1894-5. Buist says, "Standing in a well-cleared space in the midst of a small room, whose other denizens were withdrawn into the corners, my feet planted well apart and arms extended, I taught the neonatus to perform a series of grand circles, while the meconium distributed itself in trajectories for which the room and its inmates, including the physician, formed a comprehensive recording surface. Another like experience reduced my traditional devotion to Schultze's method, until I found that all its characteristic advantages can be got in a less impressive way, of which, however, the onlookers could not relate that 'The bairn was so bad 'at the doctor had to throw't o'er his head.'"

Apart from the inconvenience indicated, Schultze's method is not free from risk. When Ahlfeld himself was demonstrating it one day, with a presumably healthy infant, the child suddenly died. Runge recorded "Haemorrhages in Lung and Pleura and in Adrenals" (*Charité Ann.*, 1882). Winter described "Blood in Peritoneum, Fracture of Rib, Rupture of Liver, and Dislocation of Spleen (enlarged)" (*Deutsch. med. Woch.*, 1888, p. 595). Gebhard attributed a traumatic haematothorax to the method.<sup>1</sup> Buist himself records a fractured clavicle. The writer once produced paralysis of one arm which lasted for two years in a child upon which he did "Schultze" off and on for one and a half hours, and has several times seen the slippery infant shoot from the hands of midwives who were attempting this method. If all the accidents which have occurred had been recorded the Schultze method would probably have been given up long ago. Silvester's method has the disadvantage of employing two persons, for one is required to fix the feet while

another moves the arms. Buist's own method he describes as follows:

I place the child face downward on the palm of my left hand with the head away from me. The upper and lower parts of the body and the limbs are thus dependent over the edges of the hand. I then roll the child over, and at the same time transfer



Fig. 1.—Buist's method—position of expiration.



Fig. 2.—Buist's method—position of inspiration.

it with a slight throw to my right hand in the dorsal position, the legs and arms being again dependent. It is then again re-transferred to the left hand in the first position and the whole movement is repeated twelve to sixteen times a minute.

The efficiency of this method was proved to be very high by experiment with a dead cat in whose trachea was a cannula connected with a Marey's tambour, which recorded the inspiratory and expiratory movements on a revolving cylinder.

The writer has used and taught Buist's method for many years and has found it effective, clean, and free from risk. It is easily learnt and can be continued for a long time without causing fatigue. The attached photographs taken at St. Mary's Hospital, Manchester, well illustrate the method.

Manchester.

W. E. FOTHERGILL.

#### FOREIGN BODY IN INFANT'S THROAT.

ON May 24th, 1910, a mother consulted me regarding her child, 11 weeks old. The history was that on May 1st, while the infant was being nursed by a sister aged 10 years, it suddenly had a fit of coughing and choking which lasted for over an hour. The child then fell asleep, but from this time the child had what the mother termed "something peculiar about its breathing," and sometimes vomited its food. She sought advice in the interval, and was told that the child was all right, as it could not live so long with a foreign body in the throat. A few days before I saw the child a shining object was noticed at the root of its tongue, which the mother thought was a "bubble."

On examining the throat the guard of a safety pin was just visible a little below the uvula, protruding from behind the tongue. While getting my instruments the pin disappeared; but on inverting the child and vigorously shaking it was again brought to view. I put the child lightly under chloroform, and with the aid of a pair of dressing forceps and the index finger of the opposite hand was able to extract a very rusted, open safety pin, a little over 1 in. in length. The pin formed a triangle, of which the apex was in the larynx. The base of this triangle was  $\frac{3}{4}$  in. long. The point of the pin was on the left side.

Is it possible that this pin could have been in the child's throat for three weeks with so little discomfort? The little sister could give me no light, and all the mother knew was that she had had two similar pins in the child's clothing, one of which was lost some time before. I state the facts for what they are worth. The pin being open prevented its going further down; and for a child of this age to cough it up was out of the question. Moreover, the point may have been caught in the pharyngeal wall, as the glands in the left anterior triangle were enlarged. I have seen the child at intervals since, and it seems nothing the worse.

Accrington.

GEORGE W. KNIPE, M.B., B.Ch.

FRATERNAL PSEUDO-HYPERTROPHIC  
PARALYSIS.

WHEN I was working in Natal some three years ago I observed three interesting cases in the same family of pseudo-hypertrophic muscular paralysis with its sequelae. On September 1st, 1907, when I was medical officer at Stanger, an Indian asked me for medicine for a friend who had not walked for years, adding that the man had two brothers, one of whom could just walk and the other could not. He also remarked spontaneously that at one time their leg muscles had been very large, but at the same time of little use. Next day I made a special journey of about thirty miles to Glen Dale Valley.

CASE I.—Chinnia, aged about 22, said that for five years he had been unable to move from his seat, and that the disease had been coming on since childhood. He had an enormous goitre on both sides; the isthmus also was greatly enlarged, and there was a firm nodule, about the size of a marble, in its centre. This goitre, he said, gave him no trouble. Looking at him generally, he appeared to consist of nothing but skin and bone. He apparently had no deltoid or upper or lower arm muscles except in the slightest degree. His legs were flexed and fixed with the knees in front of the axillae, and looked more like sticks than limbs; apparently all the leg muscles were atrophied, the flexors of the knee less than the extensors. The muscles of his shoulder girdles were atrophied, so that when lifted up his body appeared to drop through his shoulders. The abdominal muscles in proportion were slightly affected. Reflexes were absent. Sensation and the functions of the bladder and rectum were normal. He could just waggle his feet a few inches forwards and backwards on the ground, could move his arms a few inches, and could grasp my hands feebly; the hand muscles were in a better condition than those elsewhere. He was very cheerful and perfectly sensible. The bones were very tender to percussion, especially near the joints, no doubt on account of the loss of muscular covering. There was tuberculosis of the left lung. He died a few weeks later.

CASE II.—Madara was the next brother, aged about 18, and he said he had not walked for three years, and that the disease had been advancing since he was an infant. His condition was practically the same as that of his brother, with perhaps a little less atrophy; there was no goitre.

CASE III.—Muthukarappan, the youngest brother, walked with his legs crossed one in front of the other and with a definite shuffle. He lay down with a rush, and when asked to get up again turned over on his stomach and performed the classical feat of climbing up himself. He had enormous calf muscles, exceedingly hard; his thighs also were large, but not in the same proportion. His arms were small and weak and his grasp feeble. There was no enlargement of the thyroid; reflexes were absent; sensation and the function of the bladder and rectum normal. He complained of nothing but his inability to get about easily, and, in fact, he was a very bright specimen of an Indian boy. There was marked tendency to foot-drop; the peronei showed no apparent wasting. The several neighbours round reiterated the statement that later on he would be just like his brothers, and that they were once like him.

I could obtain no history of any other members of the family being so afflicted. The father died some years before either from pneumonia or phthisis. The mother was quite healthy, and there had been no other children. I intended to go and see them again, but was unable, and I do not know what has since become of them.

CHARLES J. BATTLE, L.R.C.P., M.R.C.S.

Boksburg, Transvaal.

## DISLOCATION OF THE NECK DURING SLEEP.

IN January, 1910, while in Nubia in connexion with the Archaeological Survey of that country, I was asked by a native to examine his son's neck, as it had recently become twisted and painful. The boy, about 8 years of age, had a very thick, short neck; his head was tilted to the right, and also rotated in the same direction. Any attempt to turn the head was accompanied by pain; the muscles on the left side of the back of the neck were extremely tender, and there was a definite lump, which I took to be contracted muscles, slightly to the left of the middle line. The father said the condition had lasted about two weeks. A liniment was given, with directions as to how to rub the tender part.

Soon after this episode I received the *Medical Review* (January), in which was an article on a paper by F. M. Sherman (*Journal of the American Medical Association*, June), entitled Dislocation of the Neck during Sleep. Sherman had seen altogether five cases of this condition, and suggested that some of the cases diagnosed as stiff neck may be examples of it.

About three weeks later I found the father and son waiting for me. The father said that the "medicine"

was of no use, as he had rubbed it on every day, but with no effect. The boy was examined again, and I then remembered the article. The torsion of the neck was, if possible, more marked than previously, and the tender lump of muscles was still present, but on palpating deeply over this lump I thought I could feel some bony irregularity in the neighbourhood of the articular processes on the left side of the neck. I could not feel the spines of the cervical vertebrae at all, owing to the fatness of the neck, and also probably on account of the boy's age, but judged the displacement, if such it was, to be about the middle of the cervical series of vertebrae. The head was quite immovable, and the attempt to bring it into the middle line caused great pain. I explained to the father that perhaps one of the bones of the neck had got slightly out of place, and that it would be necessary to give the boy chloroform. He agreed, and on being asked if he knew how it might have happened, he replied in Arabic, "Who knows? perhaps it came while he was asleep."

Having ascertained that the boy had had no food for some hours, he was placed on a table in a tent, and when fully under the anaesthetic he was dragged to the end of the table so as to allow his head to hang over the edge. Four native sailors were then requisitioned to hold him, and, placing one foot against a leg of the table, I pulled strongly and steadily backwards, keeping the head still in the twisted position, and then rotated it into the middle line, as described in the article. The boy was pushed back on to the table, and it was then found that the lump had entirely disappeared in the neck, and that the head could be turned easily to the left. He was kept lying down for an hour to recover from the anaesthetic, and was seen again before he went home. He could then turn his head at will quite easily to either side without pain, and did not even complain of pain when the originally tender muscles were palpated.

DOUGLAS E. DERRY, M.B., Ch.B.,

Anthropologist to the Archaeological Survey of Nubia.

## OEDEMA FROM CARDIAC DISEASE.

THE annexed photograph is a somewhat imperfect representation of the legs of a patient seen by me shortly before his death. The extent to which these legs were swollen would hardly perhaps be gathered from the picture. The left leg, which was the more swollen of the two, measured at its thickest part 33 in. in circumference, while the dorsal surface of the foot was so oedematous as almost to conceal the toes. Both legs were red and inflamed-looking. The patient died a few days after I first saw him, and

meantime a large amount of fluid had oozed out of the tissues of his legs. He was a man, aged 32, who had been an imbecile from his birth, and when I saw him the oedema of the legs had been increasing steadily for some six months. It was localized to the legs, the rest of the body being entirely free. Its primary cause was cardiac disease, but a secondary cause of importance was that, owing to his mental condition,

the patient could not be persuaded to lie down. Hence, any fluid with which the heart was unable to deal gravitated into his legs; this accounts for the immense swelling in this locality and the absence of dropsy elsewhere. I have to thank Dr. Duncan Clay of Brockley, in whose charge the patient was, for permission to put on record this curious outcome of combined cardiac and mental disease.

London, S.W.

F. R. PROCTOR-SIMS, M.R.C.S., L.R.C.P.



that he obtained satisfactory outlines with auscultatory percussion and friction does not make the method generally trustworthy, as I have not myself yet found an exponent of either method who could mark the outline of the uninflated stomach with any degree of accuracy.

#### A DEFINITION OF INFLAMMATION.

SIR,—The interesting letter of Dr. James Oliver pays a just tribute to the two definitions of inflammation upon which reliance can be placed.

No. 1, "Redness and swelling with heat and pain," written by Celsus in the first century A.D., he truly says still holds its sway, as well it may, on account of its comprehensive brevity; and, even if not perfect, it is quite satisfactory so far as it goes, and can never be abolished.

It is quoted everywhere, and nowhere more appreciatively than in the article by John Simon which opens the first volume of Holmes's *System of Surgery*. In the second edition of that work, of which the first four volumes came out in 1870, this eminent author prepares the way for the completion of his essay by Burdon-Sanderson in the fifth volume, issued in 1871, p. 729. Here the subject is dealt with in the light of microscopical research, and is introduced by that remarkable and most exact definition quoted by Dr. Oliver as follows:

No. 2, "The succession of changes which occurs in a living tissue when it is injured, provided that the injury is not of such a degree as at once to destroy its structure and vitality."

I consider Burdon-Sanderson's definition perfectly explicit, and embracing every idea that any one can include in the definition. No doubt it is capable of abbreviation in words, and in my lectures I have for over thirty years ventured to curtail it, after first stating it in full, thus: "The effects of injury on the living tissues." If the tissues are killed the effects on them cannot be inflammatory, and the brief sentence just given seems to me sufficient to fix the attention of beginners, and of others trying to learn the subject.

The definition suggested by Dr. Oliver, "Inflammation is reaction of a structure or tissue to alien irritation, whether physiological or not, or to injury which does not annihilate responsive power," does not to my view express anything different, or make the case any clearer.

But my object in writing is not to cavil at Dr. Oliver, whose interest in the matter deserves sympathy, and whose object, like my own, is to try to simplify our comprehension of the principles.

I do not think that any definition of inflammation, except that of Burdon-Sanderson, has gone to the root of the matter in the language of modern science, but even so it is merely a definition, which by itself is not of much use until some insight into the process is acquired, and for this it is necessary to turn to Lister's work on

"The early stages of inflammation," including  
 "The aggregation of the corpuscles of the blood,"  
 "The structure and functions of the blood-vessels,"  
 "The effects of irritants upon the circulation," and  
 "The effects of irritants upon the tissues"; supplemented by  
 "The parts of the nervous system which regulate the contractions of the arteries" and  
 "The cutaneous pigmentary system of the frog";

read by Joseph Lister at the Royal Society, June 18th, 1857, published in the *Philosophical Transactions*, Part II, 1858.

These are all reprinted in the *Collected Papers of Lord Lister*, Clarendon Press, 1909.—I am, etc.,

RUSHTON PARKER,  
 Liverpool, July 17th. Professor of Surgery in the University of Liverpool.

SIR,—Referring to Dr. James Oliver's letter in the *BRITISH MEDICAL JOURNAL* for July 16th, I would suggest that we can have no better and more brief definition of inflammation than that used by Burdon-Sanderson himself in 1891 (*Lancet*, November, 1891): "The reaction of living tissue to injury."

Of course, such injury may be mechanical, microbic, chemical, or physical.—I am, etc.,

London, July 18th. MARCUS M. BOWLAN.

#### MEDICAL BRANCH OF THE NAVY LEAGUE.

SIR,—As a member of the Provisional Committee of the Medical Branch of the Navy League, I am writing to ask you if you will be so good as to permit me in a few lines to announce to members of the British Medical Association that a meeting of the Branch will be held at the London University, South Kensington, on Friday, July 29th, at 12.45 p.m. The Provisional Committee hope that this time and place will prove convenient, and that many members of the British Medical Association will attend and lend the support of their presence to the work of the League. Sir R. Douglas Powell has kindly consented to become the first President of the Medical Branch of the Navy League.—I am, etc.,

London, W., July 19th.

E. D. MACNAMARA.

## Universities and Colleges.

### UNIVERSITY OF CAMBRIDGE.

THE following degrees have been conferred:

M.B., B.C.—J. D. Barris, C. N. Coad, K. T. Khong, H. Lee, G. B. Vainwright.  
 M.B.—R. Burgess, W. Harmens, O. Heath.  
 B.C.—N. L. Clarke, W. H. F. Eales, G. C. Lim, W. M. Penny, L. Powell, F. E. W. Rogers, M. H. Whiting, N. S. Williams.

### UNIVERSITY OF ABERDEEN.

#### Summer Graduation Ceremony.

THE ceremony in connexion with the summer graduation at Aberdeen University took place on July 13th, Principal George Adam Smith presiding. In former years the summer graduation ceremony has usually seen the capping of medical students mainly with a few science and law graduands. The change, however, in the arts curriculum, and particularly the introduction of the three term session, has brought up an increasing number of arts graduates, and it would appear that in a short time the summer graduation will take the place of the spring graduation as the most important academic meeting of the year. Professor Cash, who has succeeded Professor Finlay as Dean of the Medical Faculty, introduced the graduates in medicine, who were as follows:

M.D.—†W. Brander (Sheffield), †J. E. Kesson (Aberdeen), \*J. E. Mitchell (Carlisle), J. J. Johnson (London), R. McRae (Mintlaw), T. Taylor (Horne Hill), J. I. P. Wilson (Royal Waterloo Hospital).  
 M.B.—†R. Semple, J. E. Anderson, R. M. L. Anderson, J. B. Annanale, J. A. Macarthur, C. A. McDonald, A. J. McLeod, J. J. A. Nell, J. J. du Preez, E. L. Reid, J. Ritchie, J. D. Robertson, C. K. Smith, H. E. Smith, M.A., J. W. Stephen, W. Taylor, H. J. Thomson, W. M. Tough.

\* Commendation for thesis. † Highest honours for thesis.  
 ‡ Second class honours.

On the same occasion diplomas in Public Health were distributed to the following:

Williamina, Abel, A. D. Brunwin, R. R. Duncan, K. Ross, M.A., A. J. W. Stephen, †G. A. Williamson, M.A.

‡ With credit.

At the conclusion of the capping ceremony the Principal referred to the work of the year, noting that beyond its ordinary routine the administrative work had been chiefly occupied with the preparation of two new ordinances, one in conjunction with the other Scottish universities for graduation in law, and the other, not yet completed, with the medical curriculum and the degrees to which it leads; secondly, with the discussion in conference with the other universities of the whole system of the preliminary examinations, and certain proposals for their improvement; thirdly, with the consideration of a scheme by a Committee of the General Council for the restoration of the tomb of their founder, Bishop Elphinstone, which had received the approval of the University Court, and for which subscriptions were now being asked. It was a happy omen for the success of their endeavours to do justice to the memory of the great statesman who was Chancellor of Scotland as well as the first Chancellor of their university in the only Scottish college known as King's that the first subscription should have come from his present Majesty, King George V, and he felt certain that the graduates of the University and the citizens of Aberdeen would not fail to follow the lead thus royally given to them. Fourthly, there had been the preparation of plans for the extension of King's College; and fifthly, the completion of a new financial arrangement between the University and the Aberdeen and North of Scotland College of Agriculture. He wished to emphasize the need of new class-rooms, especially for English literature and history, of an examination hall, and of the extension of the library at King's College. Plans for these were being drawn by Dr. Marshall Mackenzie, the architect of the University, and he appealed to wealthy friends of the University for funds to enable them to make these urgently required additions worthy of the history of the college, and especially of the ancient chapel to which they must stand in such close connexion. The Principal then announced that Lord Strathcona, the Chancellor of the University, had munificently gifted £10,000, to be devoted to the endowment of a Chair of

**Agriculture.** This, the Principal indicated, was the first real step towards the establishment of a separate Faculty of Agriculture. The new Faculty would have the new Professor as its Dean, and among its members the Professors of Botany and Zoology, the possible Professor of Political Economy, and the holders of such Chairs in Agriculture and Forestry as might be ultimately instituted.

#### University Prizes.

The John Murray Medal and Scholarship for the most distinguished M.B. graduate of the year was awarded to Robert Richards, M.A., and the Struthers Medal and Prize in Anatomy to J. D. Fiddes, M.A., B.Sc., for a preparation showing the relations of duodenum, pancreas, and spleen of male adult.

#### UNIVERSITY OF DURHAM.

THE following candidates have been approved at the examinations indicated:

**FIRST M.B., B.C., Part I.**—C. N. Gover, C. S. P. Hamilton, C. Jacobs, L. Magee, R. Sells, K. I. S. Smith, H. G. Sparrow.  
**Part II.**—C. Armstrong, I. G. Cummings, G. B. Egerton, L. W. Hearn, F. Metcalfe, E. C. G. Parker, Jane Penman, H. A. P. Robertson, D. C. Scott, J. C. Spence, A. C. Taylor.  
**Part III.**—A. C. Freeth, F. W. Harlow, J. D. Johnston, Grace W. Pailthorpe, C. T. G. Pearce, H. L. P. Peregrine, E. K. Ryan.

**SECOND M.B., B.C. (Anatomy, Physiology, and Materia Medica).**—R. L. Kitching, E. Phillips, E. Bramley, G. Carse, C. Duncan, L. H. W. Iredale, A. G. McFarlane, Nora Murphy, C. A. B. O'Neill, A. Patterson, J. L. Pringle, E. Bitson, F. S. Road, C. O. Shackleton, J. S. Soutter, G. E. Stephenson, A. Sutcliffe, G. S. Woodman.

\* Second Class Honours.

**ROYAL COLLEGE OF SURGEONS OF ENGLAND.**  
QUARTERLY Council, July 14th, Mr. H. T. Butlin, President, in the chair.

#### Election of Members of Council.

The four Fellows elected to fill the vacancies occasioned by the retirement in relation of Mr. Morgan, C.V.O., and Mr. Lockwood, by the death of Mr. Clutton, and the resignation of Mr. Wright (Mr. Morgan not offering himself for re-election) were:

	Number of Votes.	Plumpers.
Mr. Charles Barrett Lockwood	532	58
Mr. Bilton Pollard	514	38
Mr. John Bland-Sutton	499	63
Mr. Charles Alfred Ballance, M.V.O.	484	19

#### The late King Edward.

A letter from the Secretary of State for Home Affairs was read conveying the King's thanks for the loyal and dutiful address of the College on the occasion of the lamented death of His late Majesty King Edward VII.

#### King George and the Honorary Fellowship.

The President reported that His Majesty the King had graciously consented to continue to be an Honorary Fellow of the College.

#### Museum and Library.

It was determined that a collection of medico-legal specimens should be formed in connexion with the College Museum.

#### Gifts of Books.

The best thanks of the Council were given to Sir John Tweedy for his gift of books, including some rare editions of the fifteenth century; and to Mr. Stephen Paget for presenting the late Sir James Paget's notes of lectures and various MSS.

#### Removal of Members.

Two members were removed from being members of the College on account of misconduct, and they were called upon to return their diplomas of membership.

#### British Medical Association Meeting.

The President stated that, with the permission of the Council, the Conservator of the Museum and the Pathological Curator would conduct members of the British Medical Association over the museum on Wednesday, July 27th, between 4 and 6 o'clock.

#### Election of Officers and Lecturers for the Ensuing Year.

Mr. H. T. Butlin was re-elected President for the ensuing year, and Mr. Clement Lucas and Mr. Mansell Moullin Vice-Presidents.

**Arris and Gale Lecturer.**—Grafton Elliot-Smith.  
**Erasmus Wilson Lecturer.**—Samuel George Shattock.

**Arnott Demonstrator.**—Arthur Keith.

**Hunterian Professors.**—Arthur Keith, Frederick William Edridge-Green, Walter d'Este Emery, Kenneth Weldon Goadby, Benjamin Moore.

#### Next Council Meeting.

The next Council meeting will be on Monday, July 25th.

#### ROYAL COLLEGE OF PHYSICIANS OF IRELAND.

##### King's Professorship of Medicine.

At a special business meeting of the President and Fellows of the Royal College of Physicians of Ireland held on Friday, July 8th, the following resolution was unanimously adopted:

Resolved: That the College cannot permit Dr. J. Magee Finny to retire from the King's Professorship of the Practice of Medicine without expressing their warm sense of the zeal and ability with which Dr. Finny discharged the duties of the professorship, including that of physician to Sir Patrick Dun's Hospital, for a period of twenty-eight years.

Before the meeting concluded Dr. James Craig was elected King's Professor of the Practice of Medicine in succession to Dr. J. Magee Finny, resigned.

#### CONJOINT BOARD IN ENGLAND.

THE following candidates have been approved at the examinations indicated:

**FIRST COLLEGE (Part IV: Practical Pharmacy).**—C. B. Alexander, H. P. Ashe, J. H. Baldwin, W. M. Binning, A. Bishara, H. G. B. Blackman, T. R. Bowen, E. Catford, W. L. Cockcroft, S. W. Coffin, A. G. W. Compton, E. S. Cuthbert, E. I. Davies, E. M. de Mowbray, C. K. G. Dick, W. A. Easton, D. T. Evans, L. E. Forster, J. W. Gilbert, H. C. Godding, F. C. Greig, H. J. Hacker, P. D. Hamilton, C. B. Hawthorne, C. L. Herklotz, A. H. Hilmy, L. C. D. Irvine, E. B. Johnson, C. G. Keane, N. S. Koch, J. Lakeman, C. de C. W. Langdon, B. H. C. Lea-Wilson, C. C. Ling, F. A. Mackay, W. K. McKay, K. H. McMillan, L. A. Malik, R. C. Matson, C. C. Messier, H. N. Morgan, R. S. Morhead, H. G. Moser, H. F. Overend, W. J. Paramore, G. M. Parker, H. Parker, M. G. Perera, S. V. P. Pill, T. B. B. Price, W. R. Pryn, B. Pyman, A. F. Rock, G. F. Rowcroft, H. A. Rowell, G. D. Shann, J. P. Shaw, F. R. B. Skrimshire, E. L. Spalding, T. S. Stafford, G. Stiell, F. Sykes, M. C. Thavara, E. M. Townsend, A. R. Upton, W. E. Wade, J. R. N. Warburton, G. W. Watson, G. H. D. Webb, E. P. W. Wedd, E. T. Willans, N. J. Willans, T. M. Wood-Robinson, E. J. Wright.

**SECOND COLLEGE (Anatomy and Physiology).**—C. W. Armstrong, E. R. Bailey, R. A. Banbury, B. Barnett, H. J. Bates, J. C. Bharucha, P. D. Bhiwandiwala, S. I. Blairman, W. H. Blake-more, E. C. Briscoe, M. H. Cane, E. R. Chambers, R. C. C. Clay, G. Cock, J. R. Davies, R. W. Davies, J. D. Driberg, W. J. I. Dwyer, R. S. Fawcett, G. Garland, A. O. Gray, D. M. Hanson, W. S. Herman, J. S. Higgs, F. T. Hill, J. F. Knight, J. L. Lauder, P. E. Lones, A. Lowndes, C. V. N. Lyne, G. N. Martin, G. S. Mather, J. Millard, W. Morris, H. P. Morton, F. H. Mosse, L. Page, J. R. Payne, J. A. Perera, A. S. Plant, F. P. Pocock, G. A. Pratt, S. J. S. Reid, A. Ridge-Jones, J. E. Rivera, A. E. Schokman, E. J. Staddon, T. J. Taunton, H. Topham, D. S. Twigg, A. S. Wakely, W. L. Webb, L. G. White.

#### CONJOINT BOARD IN SCOTLAND.

THE following candidates have been approved at the examinations indicated:

**FIRST COLLEGE.**—R. C. Marston, Edith M. Hewlett, J. R. C. Gordon, J. Gilchrist, G. L. Neil, J. Crawford, Amy B. E. A. Perriton, Madeline MacWilliam, W. L. Paterson, A. Crawford, J. A. Smith, G. Thomson, J. W. Cowie, J. Berry, J. Corcoran.

**SECOND COLLEGE.**—E. E. Owens, Amy B. A. Perriton, W. Bannatyne, W. Ashworth, J. G. Morrin, W. Laird, A. M. Robertson, A. S. Mackenzie, G. L. Clark.

**THIRD COLLEGE.**—D. W. Woodruff, G. W. Mason, F. W. Grant, A. L. Edwards, Fadamsji A. Dastoor, M. V. Walsh.

**FINAL.**—R. J. Helsby, Jane H. Fishill, K. Nath, A. D. C. Rob, J. A. Irwin, Z. A. De Cruz, J. Sullivan, T. Walsh, M. M. Daru, A. R. Harrison.

## The Services.

#### ROYAL ARMY MEDICAL CORPS.

##### EXAMINATION FOR PROMOTION.

##### Home Stations, 1910.

THE following is the list of successful candidates at the May Examination for Promotion of Majors of the Royal Army Medical Corps in Technical Subjects:

Major H. E. WINTER, Sanitation and Epidemiology; already passed in (d) ii, in Army Medical Organization in Peace and War, and in Medical History, etc. Major F. W. HARDY, M.B., Army Medical Organization in Peace and War; 3; already passed in (d) ii, in Sanitation and Epidemiology, and in Medical History, etc. Major L. A. MITCHELL, M.B., Medical History, etc.; already passed in (d) ii, in Army Medical Organization in Peace and War, and in Sanitation and Epidemiology. Majors C. B. LAWSON, M.B., and H. W. H. O'REILLY, M.B., Sanitation and Epidemiology; already passed in (d) ii, in Army Medical Organization in Peace and War, and in Medical History, etc. Major G. S. MANSFIELD, M.B., (d) ii, and in Army Medical Organization in Peace and War; already passed in Sanitation and Epidemiology, and in Medical History, etc. Major C. W. PROFFIT, M.B., Technical Subjects; has yet to pass in (d) ii. Major G. E. F. STAMMERS, (d) ii; 75; has yet to pass in Technical Subjects. Majors M. MACG. RATTRAY, M.B., and J. McD. MCCARTHY, M.B., (d) ii; have yet to pass in Technical Subjects. Capt. A. L. SCOTT, (d) ii; 75; already passed in (h). Capt. F. ASHE, (d) ii; already passed in (h). Capt. L. W. HARRISON, M.B., C. C. CUMMING, M.B., and J. F. MARTIN, M.B., (d) ii; 75; already passed in (h). Capt. C. S. SMITH, M.B., and F. M. PARRY, M.B., (d) ii; already passed in (h). Capt. D. O. HYDE, M.B., and G. J. HOUGHTON, (d) ii; 75; already passed in (h). Capt. C. H. CARR, M.D., (d) ii; already passed in (h). Capt. F. W. LAMBELLE, M.B., (d) ii; 75; already passed in (h). Capt. H. ROGERS, M.B., (d) ii; already passed in (h). Capt. M. G. WINDER, (d) ii; 75; already passed in (h). Capt. S. E. LEWIS, M.B.,



Assistant Surgeon in June, 1854, retiring in 1880 with the honorary rank of Brigade Surgeon. He had medical charge of a field force in Burma in 1856, being present in six engagements. He also served in India during the Mutiny in 1857-8, had medical charge of the Arrah Field Force from June to October, 1858, and was present in actions at Sirthooa (where he was wounded), Julpoora, Brahminagunge, Rampore, Perowra, Jumaon, Karrisath, and Jugdespore. He volunteered to overtake Sir Henry Havelock and take medical charge of his cavalry, and was present with them at the action of Neemaddee, and again with the field force in the last action at Mahoolan and in various minor engagements. He was three times mentioned in dispatches, and received the Mutiny medal.

## Medical News.

A MEETING has been convened at Caxton Hall on Wednesday, July 27th, by a number of medical men who are in general sympathy with the scheme of the Minority Report of the Poor Law Commission. A reception will be held at 4 p.m., when tea will be served. At 4.30 p.m. Mr. and Mrs. Sidney Webb will address the meeting. Discussion and questions will be welcomed. The chair will be taken by Dr. Herbert Manley, who will be supported by Dr. Christopher Addison, M.P., Dr. Dudley Buxton, and others. Invitations will be issued to all those attending the Annual Meeting of the British Medical Association.

A HOSPITAL entirely devoted to cancer and nervous diseases is to be established in Philadelphia.

THE Astley Cooper Prize for 1910 has been awarded to Professor E. H. Starling, F.R.S., for an essay upon the physiology of digestion, gastric and intestinal.

WE are informed that the Board of Education has approved the Wandsworth scheme for the treatment of school children found on medical inspection to be defective.

MR. ROBERT BRUDENELL CARTER, Knight of Justice, Deputy-Chairman of the British Ophthalmic Hospital, Jerusalem (a foundation of the Order), and formerly its Honorary Consulting Surgeon, has been appointed an Honorary Commander of the Order of the Hospital of St. John of Jerusalem in England.

ON Friday, July 29th, at the Central London Throat and Ear Hospital, Gray's Inn Road, from 3 to 5 p.m., there will be an exhibition of microscopical specimens pertaining to the throat, nose, and ear, and also a demonstration of interesting cases. The medical staff extend a cordial invitation to members of the Association to be present.

THE title of the Women's National Health Association of Great Britain has been altered to the Women's Imperial Health Association of Great Britain. The President is Muriel, Viscountess Helmsley. All information regarding the work of this Association can be obtained at the office, 3, Princes Street, Hanover Square, W.

A NEW institute for medical research, bearing the name of the Otho S. A. Sprague Memorial Institute for the Scientific Investigation of the Causes of Disease has been established in Chicago. Provision for establishing the institute was made in the will of O. S. A. Sprague, a Chicago merchant, who died last year. It has an immediate endowment of £200,000.

AT the Surrey Assizes on July 11th the grand jury threw out a bill of manslaughter against Surgeon-Major E. Farmar-Bringhurst, late of the Army Medical Staff. When charged subsequently under a coroner's warrant, the Chief Justice directed the jury to return a verdict of not guilty, saying that there was no evidence which would justify the defendant being put on his trial.

ARRANGEMENTS have been made at the Royal Dental Hospital for a series of six post-graduate lectures during the autumn. The first will be given at 6 p.m. on October 18th, and the rest on succeeding Tuesdays at the same hour. The lectures are free to internal students of London University and to past and present students of the hospital; to others the fee is two guineas.

THE gold medal offered for competition in connexion with the International Congress on Ophthalmology at Naples last year has been carried off by an English competitor, Dr. Thomson Henderson, of Nottingham. The prize was for the best essay on the subject of glaucoma. Dr. Henderson's paper was entitled, "The Rationale of Iridectomy in the Treatment of Glaucoma: an Anatomical, Physiological, and Pathological Research." Dr. Henderson's success will be especially welcomed by those who heard or read the papers on the same subject presented by him to the Section of Ophthalmology at Sheffield and Exeter.

DR. J. R. LUNN, the well-known Medical Superintendent of St. Marylebone Infirmary, was the recipient on July 6th of an inscribed chiming clock and a silver inkstand, presented to him by past and present members of the staff of the infirmary, and a few friends. Dr. Lunn has been associated with the infirmary since the day of its opening nearly thirty years ago, and his recent retirement is the subject of very general regret.

A SERIES of demonstrations on certain medical subjects are to be given at the London Hospital, at 2 p.m. on each week day, other than Saturday, from August 8th until the end of September. On Mondays the subject will be diseases of the lungs; on Tuesdays, those of the kidneys; on Wednesdays, children's diseases and those of the digestive system; on Thursdays, diseases of the nervous system; and on Fridays, those of the heart and vessels. The demonstrations are free to members of the medical profession on presentation of their card.

FROM an advance programme relating to the entertainment of members of the British Medical Association by the Corporation of the City of Bath next Saturday, July 30th, we gather that the arrangements in view include an expedition to the Cheddar Caves and Cliffs on Sunday. These caverns are famous for the variety and colour of their stalagmites. Those who take advantage of the special terms offered by the leading hotels for the week-end should give notice on registering and they will then be given a week-end ticket, travelling down by the special train which the Corporation has provided for the transport of its guests from and to London, and returning by any train they please on Monday.

THE foundation stone of the building to be erected as an annexe to the Middlesex Hospital and as an institution for cancer treatment and research, was laid by Prince Francis of Teck at a semi-private ceremony on July 14th. The cost of building, furnishing, and endowment, are to be met by the trustees of the late Henry Barnato, who left £250,000 for the erection of a memorial of some medical character to his brother Barnett Barnato and his nephew Woolf Joel. The building will have a frontage of 90 ft. in Nassau Street, and, in addition to other accommodation for various purposes, will provide two twenty-bed wards, and an out-patient department with a number of special treatment rooms and seating accommodation in the waiting hall for about 115 persons. Prince Francis of Teck stated that Her Majesty Queen Mary, who was to have laid the foundation stone, had promised to open the building on its completion next year.

AN open meeting of the Medical Library Association of Great Britain and Ireland will be held in the Mechanical Lecture Theatre (Old School of Science), South Kensington, on Wednesday and Thursday, July 27th and 28th, at 9 a.m. On Wednesday the president, Professor Osler, will deliver an address, and Mr. Victor G. Plarr will read a paper on the Catalogue of the Royal College of Surgeons of England, of which he is librarian. On the Thursday the following papers will be read: Mr. C. R. Hewitt, librarian, Royal Society of Medicine, on the Organization of a Medical Library; Mr. H. M. Barlow, assistant librarian, Royal College of Physicians in London, on the Medical Library Association—a few Observations; Mr. A. L. Clarke, assistant editor and cataloguer, Royal Society of Medicine, on Abstracts and Extracts in General and Professional Literature. An exhibition of rare and interesting books, papers relating to medical libraries, etc., will be held from Wednesday, July 27th, until Friday, July 29th.

A QUARTERLY court of the Society for Relief of Widows and Orphans of Medical Men was held on July 15th, Dr. Blandford, President, in the chair. Twenty directors were present. Four medical men were elected members of the society. The sum of £1,350 10s. was voted for the payment of the half-yearly grants to the annuitants of the charity. A widow of one of the members applied for relief; her husband had paid in subscriptions £21, and left his widow with an income of £20 per annum. The court voted that a grant at the rate of £50 per annum be made. Membership of the society is open to any registered medical practitioner who at the time of his election is resident within a twenty-mile radius of Charing Cross. The annual subscription is two guineas, but a member may become a life member by paying one sum, the amount of which is fixed by the by-laws of the society. The next election will be on October 12th, and application forms must reach the Secretary on or before September 21st. The invested moneys of the society now amount to £100,550. Full particulars and application forms for membership may be obtained from the Secretary at the offices of the society, 11, Chandos Street, Cavendish Square, W.