daily local d'Arsonvalization with the glass vacuum tube and short spark gap.

Furunculosis is generally associated with impairment of health, which may be the result of the absorption of products of imperfect digestion, and is well treated by the aperient and diuretic sulphur waters (with or without

intestinal lavage), and a local treatment of the boils. Erythema in its common local form of intertrigo, which so easily passes into an eczema, and in its more general form, some gouty or rheumatic condition may underlie it, and be amenable to the saline sulphur waters for their aperient and diuretic action, and to the baths when the disease is in the stage proper for their exhibition.

Urticaria, in its chronic form often gouty or gastrointestinal in its origin, with an abnormally excitable nerve irritability, is well treated by a carefully adjusted dietary, and by sulphur waters, alkaline or saline, to correct digestion and to open up the channels of elimination. Alkaline sulphur baths soothe the irritable skin, and prelude the application of various antipruritic applications.

Syphilides, of the squamous and papular kinds, are treated specially by the alkaline sulphur baths at Starbeck, where their use is well supplemented by a full course of the sulphur waters, and where mercurial inunctions

after each bath are given, as at Aix.

Neuroses .- In every case of pruritus we have to correct any internal causes, which may be an overloaded system with hepatic or digestive disorder, for which the saline sulphur waters are applicable where the kidneys are sound. The baths, alkaline or mild sulphur, given at a moderate temperature, often have a soothing action upon the irritable cutaneous nerves.

## AUXILIARY TREATMENTS.

These deserve some final attention, although in some

directions already touched upon.

Electricity, as high-frequency currents, is in many cases a useful supplement to baths and waters. In the form of "autocondensation" it is a nerve tonic; locally, the "effleuve" with the glass vacuum electrode is useful in some dry eczemas, and also in psoriasis, where patches are of some extent but limited in number; also it relieves certain local pruriginous troubles, particularly pruritus ani.

Intestinal lavage (Plombières method) with alkaline sulphur water, is a good adjunct in those cases of skin disease where absorption of toxins from the bowel is suspected, as in certain cases of eczema, boils, urticaria, and

general pruritus.

Turkish and vapour baths may be of assistance in seborrhoea and acne, as well as in other cases where sulphur baths alone do not afford the requisite diaphoresis, and for these electric-light baths may be an alternative.

The Needle and Vichy massage-douche baths are good in some cases to improve general and vasomotor tone, as in acne, lupus erythematosus, and some neurotic skin affections

X-ray treatment is not at present available at our baths.

In concluding my preliminary historical remarks, I might have noted that it was as recently as 1832 that our first bathing establishment was built, the Old Victoria Baths.

In 1811 a Mrs. Hofland versified the erstwhile balneological amenities of "A Season in Harrogate":

Astonished, I saw, when I came to my doffing, A tub of hot water made just like a coffin, In which the good woman who attended the bath Declared I must lie down as straight as a lath, Just keeping my face above water, that so I might better inhale the fumes from below.
"But, mistress," quoth I, in a trembling condition,
"I hope you'll allow me one small requisition.
Since Scrophula, leperasy, herpes and scurvy,
Have all in this coffin been rolled topsyturvy, Have all in this coffin been rolled topsyturvy,
In a physical sense I presume it is meet,
Each guest should be wrapped in a clean winding sheet?"
"Oh no! my good sir! for whatever your case,
You ne'er can catch anything bad in this place,
And your being settled on solid foundation,
We Harrogate bath women spurn innovation.
So caveller like I submitted to power,
And was coddled in troth for the third of an hour."

## DEMONSTRATION.

Before the discussions commenced on Wednesday and Thursday Dr. WINKELRIED WILLIAMS (Brighton) monstrated a series of cases.

# Memoranda:

# MEDICAL, SURGICAL, OBSTETRICAL.

# VACCINE TREATMENT IN BUBONIC PLAGUE.

During the twelve months ending April, 1912, in applying the vaccine treatment in plague the peripheral blood of every case was systematically examined by a simple bacteriological method (by culture) at the bedside just before injecting the vaccine. In this detail, as well as in the quality of the vaccine employed, the present observation differs from that of 1907, where, with Dr. D. A. Turkhud, I applied the vaccine treatment in plague. The main fortunes of the vaccine readment in plague. features of the vaccine used in this year's observation are (1) that it was prepared from the first subcultures of rich growths on agar of peripheral bloods of virulent septicaemic plague cases, and therefore was abundant in the glutinous globulin characteristic of such cultures—the properties of the thin globulin-like protein has been described by the author elsewhere <sup>2</sup>—(2) that owing to the application of glycerine (and not of heat or Na<sub>2</sub>So<sub>4</sub>) in sterilizing the culture emulsion the vaccine contained only soluble immunizing substances and was free from coagulation and precipitation products, and, being stale (at least three months), was probably free from the toxic substances which Rowland had described as being present in fresh emulsion of plague cultures before they are destroyed by the coexisting proteolytic enzyme, also described by the same author; (3) the dose of vaccine administered corresponded, as a rule, to 100 agar tube and by computation to the glutinous products of about 75 to 80 million bacilli. Even double this dose has been borne well; only one injection was given at the earliest opportunity.

In every case the blood was obtained by a needle-prick of the finger tip and taken up with a straight glass pipette and planted straight on to a dry surface of an agar tube. With the ordinary sterility available with ether alcohol for the finger and spirit-lamp heat for the needle, pipette, etc., not a single contamination was found in all the cases observed. This culture method, in the author's opinion, was, for all practical purposes, quite a good index as to the non-septicaemic or septicaemic nature of the case, not a single colony being detachable even after a week in the former group, which colonies were demonstrable in about thirty-six hours in the latter group

of cases.

The number of cases in this observation is small and the value attachable to a computation of a percentage is greatly lessened, but the uniform reaction obtained after twelve to twenty-four hours of the vaccination in all cases, and the uninterrupted progress of a great proportion of the non-septicaemic cases appeared to justify a record of the figures.

Total Number of Cases Treated, 87.

	No.	Recovered.	Percentage of Recoveries.
Non-septicaemic	44	35	79.5
Septicaemic	43	0	0

These figures speak for themselves, and might be taken as an indication to continue the observation.

Bombay. R. Row, M.D., D.Sc.Lond.

<sup>1</sup>Row and Turkhud: Effect of a Salted Plague Toxin used as a Vaccine in Man. Bombay Physical and Medical Society's Journal, July, 1907.

<sup>2</sup>Row: Some Properties of a Plague Toxin, with Special Reference to a Salted Plague Vaccine. Ibid., April, 1907.

<sup>3</sup>Rowland: Journal of Hygiene, Plague Supplement, fifth and sixth report. 1911 and 1912.

1. It is extremely rare for atrophic changes to follow even a turbinectomy with the spokeshave (complete or

2. When such atrophy does follow it is due to the perpetuation of a condition of the mucous membrane present prior to operation. Certainly most of the cases we have in Manchester are associated with excessive secretion of mucus, and these can bear a large loss of secreting tissue with favourable results. It is in the anaemic young girl or the patient with a coexisting sinus disease (ethmoidal and sphenoidal especially) that extensive removal of tissue is undesirable, for it is in just these cases that atrophy occurs in time even without interference.

It is possible to remove a definite strip of turbinal with the spokeshave; my chief objection is that it leaves tags and also may injure the septum, thus requiring some tedious after-treatment. I am awaiting the completion of a new pair of forceps which, I think, will remove with one cut the turbinal in its entire length, or will remove a strip of desired breadth with precision.

With all the remarks of Mr. Stanley Green I cordially agree, especially as to the gratitude of patients for this

unorthodox treatment.

Again, I do not think my phrase, "a carefully graduated turbinectomy," is at all contradictory. Much confusion has arisen from the loose way in which the words "turbin-ectomy" and "turbinotomy" have been employed. Surely turbinotomy means nothing more than cutting the tur-binal, and is only part of the technique of performing turbinectomy.

Removal of a portion of the turbinal should not be called turbinotomy—removal of one lobe of the thyroid is a partial thyroidectomy, not a thyroidotomy; similarly with partial nophrectomy, not nephrotomy; partial gastrectomy, not gastrotomy. Removal of a portion of the larynx is not laryngotomy, but a modified laryngectomy. The correct nomenclature should, by analogy, be anterior or posterior turbinectomy, and complete or incomplete linear turbinectomy for removal of the whole turbinal or a strip of the whole length.—I am, etc.,

Manchester, Oct. 12th. WILLIAM WILSON, M.D., B.Sc.

Manchester, Oct. 12th.

# MEDICAL MISSIONS DEPARTMENT, S.P.G.

SIR,-I wish to make known some openings for junior members of the medical profession, which, putting aside other aspects of the work, provide a variety of cases and scope for the performance of important operations greater than commonly fall to the lot of general practitioners in this country. In the majority of these places there can be also the inspiring reflection that there is no other qualified doctor within many miles to whom the patients could possibly apply for the treatment they need. The salaries, except in the case of Rusapi, in Mashonaland, where there is a Government guarantee of £300 besides private practice, are small, but sufficient for comfortable maintenance of unmarried doctors, being the same both for men and women as those offered to the clergy working under similar conditions in the S.P.G. Missions in connexion with which these posts are.

The doctors must be in full sympathy with mission

work, but will not be required to do any but their professional work unless they desire it themselves. The vacancies are, for men: (1) Hazaribagh, Behar, India; (2) Rusapi, Mashonaland; (3) Kwamagwaza, Zululand. For women: (1) Ping Yin, North China; (2) Delhi, India; (3) Malacca. In all these places the hospitals are in full working order. Several more men are wanted for China and three women for India, but we could not send them at present owing to lack of funds. Our doctors never enter into competition with private practitioners or those working in Government posts. We appeal to members of the profession who are in sympathy with the efforts which the S.P.G. is now making to meet the great need for medical aid in places otherwise unprovided for to help us by bringing these vacancies to the notice of some who seem suited to fill them.

I shall be glad to answer fully any inquiries made from me about these posts and the needs and plans of this department of the S.P.G.—I am, etc.,
K. W. S. Kennedy, M.B.

Secretary, Medical Department, S.P.G.

# 15, Tufton Street, Westminster, Oct. 14th.

# Anibersities and Colleges.

UNIVERSITY OF CAMBRIDGE.
THE following candidates have been approved at the examina

ions indicated:

FIRST M.B. (Part I. Chemistry),—C. C. Beney, F. H. V. Bevan, I. M. Bickerton, C. M. Billington, C. M. Childe, H. Corsi, S. L. P. Davidson, K. Dykes, T. Fernandez, L. W. Finlow, J. D. Gabb, H. C. Gloster, C. G. Guy, G. A. Harrison, H. E. Lambert, R. J. Lathbury, O. G. Misquith, J. R. Mitchell, J. H. E., Moore, G. P. Morris, F. C. Odling, N. Rumboll, K. H. Tallerman, E. B. Verney, J. Whittingdale, M. Wong, F. G. Wood. (Part II. Physics): R. C. Bentley, W. L. Berry, F. H. V. Bevan, J. M. Bickerton, C. M. Billington, C. M. Childe, E. D. Collins, H. Corsi, S. R. E. Davies, S. L. P. Davidson, K. Dykes, L. W. Finlow, H. Franklyn, H. C. Gloster, H. C. Gunasekara, C. G. Guy, G. A. Harrison, P. R. Hatch, T. S. Hinnell, S. H. G. Humfrey, A. King, H. E. Lambert, R. B. P. Lansdown, P. Lazarus-Barlow, P. T. Liang, D. L. Macintyre, L. B. Maxwell, J. H. E. Moore, J. H. Naumann, P. M. Neighbour, R. H. Reece, N. Rumboll, A. N. Solly, F. V. Squires, K. H. Tallerman, W. B. Thompson, E. B. Verney, C. R. P. Wallace, A. T. Westlake, H. L. Willey, H. G. Wimbush, M. Wong, F. G. Wood. (Part III. Biology): J. M. Bickerton, C. M. Billington, A. D. Coates, S. L. P. Davidson, T. Fernandez, L. W. Finlow, A. M. Gaselee, H. C. Gloster, N. D. de M. Greenstreet, R. T. S. Gwynne, G. A. Harrison, L. B. Hartley, W. E. Heath, C. R. Hind, R. W. Jackson, P. C. Livingston, D. L. Macintyre, F. P. N. Parsons, H. R. Reece, C. E. Taylor, D. L. Tucker, W. E. Vandrey, E. R. Verney, M. D. Vint, S. Waterworth, A. T. Westlake, J. Whittingdale, D. E. Wijewardern, S. C. Williams, W. T. Williams-Green, M. Wong, F. G. Wood, L. M. Younghusband.

UNIVERSITY OF EDINBURGH.
THE following candidates have been approved at the examinations indicated:

UNIVERSITY OF EDINBURGH.
THE following candidates have been approved at the examinations indicated:

First M.B. (Zoology).—Lal S. Anand, San H. Aung, G. Buchanan, E. A. Carmichael, Anna G. Christie, P. C. Datta, H. M. Deans, E. Dickson, J. A. A. Duncan, M. H. A. Fletcher, D. P. Gay, H. A. E. Girby, W. A. Gray, E. F. Gritfin, W. A. Hennessy, S. S. Horwitz, J. T. Johnston, A. Klenerman, Y. C. Lee, G. N. Lomax, J. C. M'Cartney, D. M'Eachran, F. P. MacGillivray, R. D. Mackenzie, A. M. MacLachlan, P. B. Maitland, D. A. Miller, J. K. Mitchell, J. C. Moolman, T. B. Moyes, Tin Po Ng. P. V. Paul, K. N. Rao, C. B. Reekie, J. Riesnik, Mary J. D. Rutherford, J. K. Sen, C. Shapiro, J. O. P. Smith, Janet Smith, S. L. Smith, G. Verghese, T. C. Wakefield, J. D. White, (Physics).—M. S. Abaza, Y. Y. Chan, P. C. Datta, W. J. Dunloy, V. A. Earnshaw, K. J. Ebsworth, G. B. Flint, A. S. Garewal, H. P. D. Hellm, R. MacGarrol, A. G. Mackay, R. A. MacNab, P. V. Paul, Susan, A. Robertson, J. Robinson, Mary J. D. Rutherford, R. B. Smith, J. F. Stewart. (Botany).—M. S. Abaza, G. Balsillie, R. B. Barnfather, R. E. Batson, J. H. Brink, G. Buchanan, Anna G. Christie, E. Dickson, J. A. A. Duncan, T. S. Duncan, W. J. Dunlop, A. S. Garewal, D. P. Gay, R. N. Gibson, E. S. Jackson, G. N. Lomax, J. C. M'Cartney, D. Mackay, F. A. Meine, J. C. Moolman, J. K. Murray, R. B. Okholm, K. N. Rao, H. H. L. Richards, Susan A. Robertson, J. Robinson, J. K. Sen, J. Smith, J. F. Stewart, C. M. Thomas, D. F. Thompson, M. S. Toukhy, W. C. Tsoi, (Chemistry).—W. Bald, P. Barlow, G. P. Burns, N. A. Doggart, A. S. Garewal, F. Gunaratna, E. S. Jackson, N. Jennings, R. M'Garrol, A. R. Matheson, S. D. Nurse, J. Riesnik, Susan A. Robertson, Mary J. D. Rutherford, R. B. Smith, J. A. Stirling.
Second M.B. (Physiology).—G. S. Barnett, D. Colombos, K. M. Dey, S. L. Dmitrieff, P. W. Edwards, W. N. Greer, T. L. P. Harries, F. J. Haupffleisch, Jane E. Hay, Wilhelmina W. Hendry, A. Kennedy, A. C. Kirton, Isobel M. M'Lullich, Annie M. Madin, Isabella Morison, D. J. Morrison, J. E

# UNIVERSITY OF GLASGOW.

THE following candidates have been approved at the examinations indicated:

ions indicated:

FRST M B. (B., Botany; Z., Zoology; P., Physics; C., Chemistry).—

\*W. Adams (B., P.), T. A. J. Aitchison (Z., C.), \*R. Aitken (B., P.), J. R. P. Alexander (B., P.), G. W. Allan (Z., C.), T. F. Arnott (B., P.), D. Arthur (B., P., C.), J. Ashworth (B., P.), H. E. C. Bacon (C.), H. Bankhead (Z., P.), D. E. Brown (B., P.), G. Brown (B., P.), \*R. S. Caldwell (B., P.), R. B. Cameron (B., P.), W. J. S. Cameron (B., P.), W. M. Cameron (B., C.), M. Chalmers (B.), A. E. Cochrane (Z., C.), H. L. Coulthard (B., P.), J. S. Craig (B., P.), H. A. Cruickshank (B., P.), W. Dempster (B., C.), R. K. Duguid (B., P.), W. Edgar (B., P.), R. Erskine (B., P.), \*W. J. Ferguson (B., P.), J. P. Fleming (B., P.), T. Forrest (B., Z.), W. W. Forsyth (B., P., C.), R. S. France (B., P.), R. J. L. Fraser (B., P.), G. K. Fulton (B., Z., C.), \*J. B. D. Galbraith (B., P.), K. J. A. Gillanders (C.), C. N. Gordon (B.), W. H. Gordon, M.A.

(B., Z., P.), W. L. Gordon (B., Z.), G. O. Grant (B., P., C.), W. R. D. Hamilton (B., P.), A. Harpar (P., C.), W. E. Haydon (D.), C. C., C., C. Hamilton (B., P.), B. M. Hamilton (B., Z.), E. P. Irving (B., P.), E. J. Hollon (B., P.), B. W. Humble (B., Z.), E. P. Irving (B., P.), J. N. Kang, P.), B. W. Humble (B., Z.), E. P. Irving (B., P.), E. R. Green (B., P.), W. M. Kert (Z.), J. F. Killy (B., P.), F. A. B. M. Lang, M. W. B. Z.), J. S. Learn (C.), A. J. Macartney (B., B.), A. B. Mang, M. W. B. Z.), J. S. Learn (C.), A. J. Macartney (B., B.), A. B. Macdonald (B., P.), E. Macfarlane (Z. C.), R. F. M'Globon (B.), T. M'Gowan (B., P.), E. M'Glardon (C.), A. J. Macartney (B., B.), A. B. Macdonald (B., P.), E. Macfarlane (Z. C.), R. F. M'Globon (B.), T. W. M'William (C.), J. Marshall (B., P.), J. S. Martin (B., P.), W. M. William (C.), J. Marshall (B., P.), J. S. Martin (B., P.), A. M. C. Millar (C.), A. S. Miller (B., P.), G. A. Myles (B., P.), L. M. C. Millar (C.), F. P. M'Luskle (Z., C.), J. S. Martin (B., P.), A. M. C. Millar (C.), F. P. Paul (B.), "N. B. Peacock (B., C.), G. Pearson (Z., C.), B. T. Pelham (B., P.), C. K. T. Pelham (B., P.), C. K. T. Pelham (B., P.), C. M. T. Pelham (B., P.), C. K. T. Pelham (B., P.), C. M. T. Pelham (B., P.), C.

G. Hislop, \*Mary P. Hislop, \*W. Hornsby, A. Lindsay, \*D. M'Alpine, J. L. M'Bean, J. A. M'Connochie, \*J. W. M. M'Donald, J. MacIones, Aunie R. M'Kail, D. Mackinnon, J. R. C. Mackintosh, \*R. M'Lean, A. P. Martin, O. H. Mavor, A. U. Millar, M. Murphy, A. Naismith, T. M. Newton, J. Purdle, A. M. Ramsay, D. Smith, W. R. Snodgrass, W. R. Taylor, \*C. J. van Lingen, R. B. Wallace, \*M. White.

\*Passed with distinction in one or more subjects.

\*Under old and new regulations.

The following were degrees conferred by the Vice-Chancellor on October 9th:

M.B., Ch.B.—\*D. K. Adams, †W. J. Henry, †W. M. Conley, †T. M. Newton, †J. MacInnes, Nora M. A. Allan, E. A. C. Beard, S. H. Bennet, W. A. Brechin, D. P. Brown, Margaret J. Brown, B. Cohen, N. Crichlow, L. Crombie, D. A. Cush, G. D. de Kock, J. Dunbar, W. C. Fleishmann, W. Forsyth, W. Fotheringham, I. D. Grant, J. G. Hendry, G. Hislop, Mary P. Hislop, W. Hornsby, A. Lindsay, D. M'Alpine, J. L. M'Bean, J. A. M'Connochie, J. W. M'Donald, Annie R. M'Kail, D. Mackinnon, J. R. C. Mackintosh, R. M'Lean, A. P. Martin, O. H. Mavor, A. U. Millar, M. Murphy, A. N. J. Purdie, A. M. Ramsay, D. Smith, W. R. Snodgrass, W. R. Taylor, C. J. van Lingen, R. B. Wallace, M. White.

B.Sc. (Public Health).—Tehl Singh.

\*With honours. † With commendation.

\* With honours. † With commendation.

The Brunton Memorial Prize (value £10) for the most distinguished medical graduate of the year has been awarded to Mr. John S. K. Boyd.

# UNIVERSITY OF ST. ANDREWS.

THE following candidates have been approved at the examination indicated:

FIRST M.B. (Zoology) .- J. P. Leckie, Margaret W. Shirlaw.

UNIVERSITY OF LONDON.
THE UNIVERSITY BUILDINGS.
At the meeting of Convocation on October 14th the two following resolutions were adopted:

That whenever arrangements are made in connexion with a new site for the University they should expressly provide that the Government shall continue to provide accommodation for the University free from expense for rent, rates, taxes, and structural repairs, as it has done since the foundation of the University. That inasmuch as the accommodation for university purposes at South Kensington is neither adequate nor suitable, the Senate be requested to promote negotiations for a fitting site.

The second resolution, as originally moved and carried by a large majority as an amendment to another motion, contained the phrase "a new site," and the substitution of "fitting" for "new" was carried by 60 votes to 59.

ROYAL COLLEGE OF SURGEONS OF ENGLAND. A QUARTERLY council was held on October 9th, Sir Rickman J. Godlee, Bart., President, in the chair.

# Donations.

Donations.

Dr. Keatinge, Director of the Egyptian School of Medicine at Cairo, was asked to convey the thanks of the Council to the Egyptian Government for presenting to the College a series of "corrosion preparations" made by Professor Wahby and recently exhibited in the museum of the Seventeenth International Medical Congress.

The gratitude of the Council to the authorities of the Egyptian Exploration Fund for their presentation of twenty-four skulls discovered during excavations in Egypt last winter was also recorded.

The thanks of the Council were given to the Director of the Department of Agriculture at Washington, U.S.A., for presenting to the College a collection of plants and drawings made by Dr. Erwin E. Smith to illustrate tumour formation, and recently exhibited in the museum of the Seventeenth International Medical Congress.

Thanks were also given to Sir Thomas Wrightson, Bart., for his gift of a Leitz projection apparatus and a serial section of the human labyrinth.

ROYAL COLLEGE OF SURGEONS OF EDINBURGH. THE Liston Victoria Jubilee Prize (value £100) has been awarded to Mr. John David Malcolm for his investigation into the causes of shock.

# CONJOINT BOARD IN ENGLAND.

THE following candidates have been approved at the examination indicated:

FIRST COLLEGE (Part IV, Practical Pharmacy).—E. G. Anderson, W. Andrew, C. S. Archer, C. J. L. Blair, P. R. Chevreau, A. M. Clément, G. R. E. Colquhoun, A. J. Drew, A. P. Green, J. A. Gregory, Dorothy M. Henty, J. A. Hill, J. Hope, F. B. Jago, G. L. Lawlor, J. MacAdam, W. F. Matthews, W. Morris, C. F. Pedley, A. Peine, H. L. Peregrine, P. H. Rawson, A. St. Johnston, H. C. Samuel, A. E. Schokman, A.-elt. Selim, J. W. G. Steell, E. L. Stephenson, D. Stewart, G. A. O. White, S. M. Wilcox.

# CONJOINT BOARD IN SCOTLAND

THE following candidates have been approved at the examination indicated:

D.P.H. (Both Parts).—A. D. Campbell, G. R. Vohra, C. Cameron, W. A. Muir, N. R. R. Ubhaya, A. Campbell, G. G. Jolly, W. S. M'Laren, J. D. Saner, M. L. Bangara, G. Richardson, A. G. Ingram, J. A. MacLeod.

## KING'S COLLEGE HOSPITAL.

THE authorities of the medical school have made the following awards of entrance scholarships: The scholarship in science, for students commencing their medical studies, to Mr. H. O. Gunewardene; the scholarship in arts, for students of the same standing, to Mr. A. Blackstock; the scholarship in general and clinical pathology and pharmacology, for students commencing their final medical studies, to Mr. E. C. Malden. The corresponding scholarship in anatomy and physiology was divided between Mr. W. Wood and Mr. H. A. B. Whitlocke. All these scholarships are of the value of £50 each.

#### LONDON HOSPITAL.

THE name of the candidate to whom has been awarded the *Price Scholarship in Science* is C. S. Cloake, not C. S. Clarke, as printed in our issue for October 4th.

# Medical Aews.

THE autumn dinner of the Irish Medical Schools' and Graduates' Association will take place at the Hotel Cecil, Strand, W.C., on Thursday, October 30th.

DR. NORMAN PORRITT, Honorary Treasurer of the Society of Medical Phonographers, has forwarded on behalf of that society a cheque for £7 7s. towards the funds of the Royal Medical Benevolent Fund.

THE annual meeting of Fellows and Members of the Royal College of Surgeons of England will be held at the College, Lincoln's Inn Fields, W.C., on November 20th, at 3 p.m.

THE demonstration which was to have been given by Dr. Noguchi at the Royal Society of Medicine on October 13th was, owing to his indisposition, unavoidably postponed until Monday next, October 20th, at 5.30 p.m.

THE North London Medical and Chirurgical Society held its first meeting for the new session on October 9th, when an address on the mental diseases of old age was delivered by Sir George Savage. The President of the society, Dr. T. Wilson Parry, was in the chair.

An address on clinical psychiatry will be delivered by Dr. T. B. Hyslop at the opening meeting of the Chelsea Clinical Society at 8.30 p.m. next Tuesday. As last year, the society will hold its meetings in the club-room of the medical school of St. George's Hospital.

An address will be delivered in the Post-Graduate College, West London Hospital, on Thursday, October 30th, by Sir Gilbert Parker, M.P. Sir Alfred Pearce Gould, K.C.V.O., Dean of the Medical Faculty of the University of London, will take the chair at 5 p.m.

DR. FRANCIS WARNER will commence a course of lectures at the London Hospital Medical College on the neuroses and psychoses of children on Tuesday next, at 2 p.m. The syllabus of the lectures, which will be continued on the following Tuesdays, will be found in the advertisement columns.

THE next meeting of the Hunterian Society will be held in the library of ft. Bartholomew's Hospital at 9 p.m. on Wednesday, October 22nd. The President of the society, Dr. W. M. Ettles, will give an address, and this will be followed by a pathological demonstration by Dr. A. S. Woodwark. All members of the profession are cordially invited to attend.

THE Balneological and Climatological Section of the Royal Society of Medicine will hold its annual dinner at the Waldorf Hotel at 7.15 p.m. on October 23rd. It will follow a meeting of the Section at the society's honse, at which Dr. F. A. de T. Mouillot will deliver a presidential address descriptive of lessons derived from twenty years' experience of spa practice.

A COURSE of Gresham lectures to be given by Dr. F. M. Sandwith, Gresham Professor of Physic, on Tuesday, Wednesday, and Thursday, October 28th, 29th, and 30th, at 6 p.m., will deal with Harvey, Darwin, and Huxley respectively. On October 31st Dr. Sandwith will give a lantern demonstration bearing upon the subject of the lectures and will show some letters and other interesting relics.

THE opening address of the winter session of the North-East London Post-graduate College will be delivered at the Prince of Wales's Hospital, Tottenham, on Thursday, October 23rd, at 4.30 p.m., by Sir Arbuthnot Lane, Bart.,

the subject being Chronic Intestinal Stasis. Dr. W. Seaman Bainbridge (New York) and Dr. A. C. Jordan will show slides, and some twenty patients, who have undergone the operation devised by Sir Arbuthnot Lane, have agreed to attend. Tickets of admission to the meeting can be obtained by any medical practitioner on application to the Dean of the College, 142, Harley Street.

Some clinical observations on the employment of salvarsan in syphilitic pregnant women have been recorded by Dr. Sauvage, obstetrician to the Paris Hospitals. He admits that injection of salvarsan is not without danger to the life of the fetus, but considers that the risk is not high, and the influence of the drug, when it has become diffused over the mother's system, is decidedly favourable to the offspring. Dr. Sauvage adds that, though the standard signs of syphilitic taint are rare in the newborn child of a mother under this treatment he has seen malformations and general dystrophy, resembling those produced by syphilitic infection. Sauvage concludes that injections of salvarsan produce a decidedly favourable effect on syphilitic complications in active progress in gravid patients, but states that in actual practice the use of salvarsan in pregnancy involves risks so serious as to demand precise indications. When syphilitic infection is active, manifesting itself in the usual symptoms and in special complications incident to gestation, the treatment appears altogether good, and is favourable not only to the mother but likewise to the fetus. Syphilis, evidently in existence but not active, may indicate the advisability of salvarsan treatment if there be a distinct history of imperfect or neglected specific treatment before conception. On the other hand, when a syphilitic subject has been kept under suitable treatment for a long period before her pregnancy, and shows no complications during gestation, mercurial or mixed treatment is indicated, as salvarsan injections involve more risk. Women with renal and hepatic disease are unfitted to undergo salvarsan treatment.

An instance of a woman afflicted with acromegaly becoming pregnant is now under observation at Budapest (Dr. Lados Kalledey, Zentralbl. f. Gynak., No. 28, p. 1030). The catamenial function was suspended when the symptoms of acromegaly developed, yet when ovarian extract was administered it returned and impregnation occurred. was administered it returned and impregnation occurred. The patient was 32 years old, and married twelve years. There was no family history of importance, and she had enjoyed good health in youth. The periods began at 17, and were scanty, with little pain. At about the age of 20 her gait became unsteady; at the same time her feet steadily increased in size, and she was troubled with scarting headach relations and incompile. At the age vertigo, headache, palpitations, and insomnia. At the age of 22 complete amenorrhoea set in, and she began to grow fat. She was, when first examined last autumn, 5 ft.  $1\frac{1}{2}$  in. fat. She was, when his examined last addum, 5 10, 17 in in height, and of masculine appearance; indeed she was obliged to shave, as she had acquired a well-developed beard. The long bones were very big, the lips and nose thick, the subcutaneous fat universally over-developed, and the mammae large, mainly through a disproportionate drowth of adipose tissue. No organic disease of the heart and the mammae large, mainly through a disproportionate growth of adipose tissue. No organic disease of the heart or lungs could be detected, but the patient had an attack of syncope during examination; Romberg's sign was marked, and the gait was ataxic. The x rays failed to detect any abnormality in the base of the skull. The urine was free from sugar; the cervix was conical, but the uterus could not be well defined owing to the fatness of the abdominal wall. Dr. Kalledey diagnosed diminished ovarian and excessive hypophysial function, and early in December, 1912, began intravenous injections of a watery extract of ovarian substance, a cubic centimetre repreextract of ovarian substance, a cubic centimetre representing a gram of (cow's) ovarian tissue. injections at intervals of three weeks the gait improved, and headache and vertigo diminished. When she left the Budapest Gynaecological Clinique on January 6th, 1913, Dr. Kalledey prescribed three ovarian tabloids daily. January 22nd molimen was felt, and a few drops of blood appeared. On February 2nd free uterine haemorrhage developed, and the patient declared that she was obliged to wear smaller shoes and to alter the fit of her clothes, which had grown too wide for her. On March 2nd and 5th Kalledey administered 1 c.cm. by the veins, but treatment was suspended for a fortnight owing to what her family doctor diagnosed as influenza. On March 30th, the catamenia having failed to appear, the patient was examined. Signs of early pregnancy were detected, and the ovarian extract was discontinued. On April 30th all the signs of pregnancy in the second month were found, and a month later, when the report was prepared, gestation was proceeding normally.