

and the axillary nerves have since recovered from the effects of the previous pressure. On August 15th Mr. Thurstan Holland at the Royal Infirmary kindly ordered an x-ray photograph of the leg, which showed fracture, united, high up in the fibula. On September 15th he also kindly permitted the photographs Figs. 3 and 4 to be taken by his assistant, Mr. Woods, and developed by Miss Irven. This patient is blind of the left eye owing to cataract, but can see well with the right. She is living in lodgings on the proceeds of her insurance compensation until able once more to seek a situation. It will be seen that her life is a difficult one, and that her perseverance deserves encouragement.

Memoranda :

MEDICAL, SURGICAL, OBSTETRICAL.

TREATMENT OF TUBERCULOUS PERITONITIS.

In two apparently hopeless cases of tuberculous peritonitis in children I found the administration of the following mixture very beneficial:

R. Calcii carb. (precip.)	...	128 grains
Ol. creosoti	...	32 minims
Mucil. tragacanth, q.s.	...	
Potass. iod.	...	16 grains
Saccharini	...	8 grains
Ol. menthae pip. vel anisi	...	5 minims
Aq. ad	...	8 oz.

Dose.—5ij every four hours for a child of 5 years.

Tincture of opium or compound tincture of camphor may be added for the relief of pain and diarrhoea if present.

The cases were two boys, aged 3 and 5 years respectively. The younger I saw more than three years ago. He had large, easily palpable masses in his bulging abdomen, and all the other symptoms of this wasting malady well developed. He had been ill for a long time, gradually getting worse, and his parents had been informed that there was little or no hope of recovery. The elder I saw eighteen months ago; the intestines and peritoneal glands were matted into one mass about the size of a small football, somewhat irregular in outline, and not only palpable but observable under the abdominal wall.

I at once put him on the mixture; but as there were present attacks of severe colic with partial obstruction and vomiting, I sent him to a consulting surgeon in Manchester, who recommended laparotomy as being frequently beneficial in such cases, and a lateral anastomosis for relief of the intestinal obstruction. His prognosis, however, was so hopeless that the parents decided against operation, and the boy continued to take the mixture, supplemented by petroleum emulsion recommended by the consultant. A diet of easily digested food, principally of milk, was prescribed.

The first case, who took cod-liver oil emulsion along with the mixture, began at once to improve, and in two months the abdominal tumours had disappeared and his general health vastly improved. There has not been any recurrence, and to-day he is a fine specimen of a strong and healthy boy. The second case, like the first, began to improve directly he came under treatment, and in two months the abdominal mass had shrunk to the size of a Tangerine orange, and all the other symptoms, such as fever, pain, and diarrhoea, disappeared. At the end of another month I failed to detect any lump at all, and his general condition was much improved. He has continued in good health for over a year, and is a bright and healthy looking lad.

I may add that I have found this mixture, with and without opium, very beneficial in phthisis, particularly in less acute cases.

HUGH LAWRIE, M.B., C.M., D.P.H., M.O.H.
Ramsbottom, Lancs.

RIGHT SHOULDER PAIN IN PERFORATED DUODENAL ULCER.

THE case here recorded is, I think, of interest, first, because of the acute pain referred to the right shoulder, secondly, because of the association of appendicitis and duodenal

ulcer, which has been pointed out by Drs. Mayo and Patterson.

W. C., a bricklayer aged 62, while at work on August 22nd, at 5 p.m. was taken with sudden and violent pain in the abdomen, and vomited once. He was driven home about two miles; on arrival he was somewhat collapsed, was put to bed, and vomited again. I was sent for at 9 p.m., and found him groaning with pain, which, he said, was in his right shoulder and abdomen. On touching the abdomen lightly he shouted out with pain in the right shoulder. The muscles on the right side of the abdomen were tense with board-like rigidity; the most painful spot was over the region of the duodenum, but he complained very much more of the pain in the shoulder than of that in the abdomen. The temperature was 99° F. and the pulse 85. There was a history of many years of indigestion, which had been worse of late; the pain had awakened him a few nights previously.

I thought that he was probably suffering from a perforated duodenal ulcer, and had him sent into the Worcester Infirmary. He was there operated upon by Mr. Gostling (who has kindly allowed me to publish the case); a pin-point perforation of the duodenum was found and was sutured. The perforation was covered with lymph, and was only found when this was cleared away. The appendix was next examined; it was found to be inflamed and was removed. The patient made an uninterrupted recovery.

Upton-on-Severn.

C. P. BURD, M.R.C.S., L.R.C.P.

Reports

ON

MEDICAL AND SURGICAL PRACTICE IN HOSPITALS AND ASYLUMS.

DERBYSHIRE ROYAL INFIRMARY.

A CASE OF EMBOLISM OF THE SUPERIOR MESENTERIC ARTERY.

(By FRANCIS L. A. GREAVES, F.R.C.S., Surgeon to the Infirmary.)

On the afternoon of September 20th, 1913, I was called to the Royal Infirmary to see a man, aged 28, admitted for acute intestinal obstruction.

The history was as follows: Five days previously he was seized with colicky pains in the abdomen; this was at first not very bad, but becoming more acute he had to leave work. The bowels acted that night. His own doctor was summoned in the early hours of the following morning. From this time until admission there had been no evacuation of the bowels, except that two days before admission an enema was administered and a small result was obtained; no flatus was passed, however, and the symptoms were not relieved. There was no blood in the motion. Vomiting commenced about twenty-four hours after the pain was noticed, the vomit became a dark-coloured fluid before admission, and was regurgitant in character. There was no previous history of any abdominal trouble.

On admission he looked profoundly ill; he was a thin man, with rather a pale, sunken face. His pulse was feeble (80), respirations rapid (28), temperature 98°. He did not complain of great pain, but the whole abdomen was tender on palpation. His teeth were carious, his tongue furred but moist. The whole abdomen was distended enormously, there was no visible peristalsis, and the distension appeared uniform. On palpation the anterior abdominal wall was uniformly rigid, but not board-like, and as already mentioned tenderness was everywhere present. On percussion, well-marked shifting dullness was detected in both flanks and in the hypogastric region.

The provisional diagnosis of chronic tuberculous peritonitis, which had become acute, was made, and he was prepared for operation.

Operation.

An incision was made below the umbilicus in the middle line, and on the peritoneum being opened a very large amount of dark-green fluid, with a faintly faeculent odour, was liberated. The pelvis and flanks were full of this

fession of this country, this omission effectually obliterates my identity. (2) The description of the degree of labyrinthine deafness in those four cases, as independently otologically tested, was "extreme." This qualifying word was omitted. (3) On page 1384 of the issue of the 22nd instant there occurs the statement:

Dr. H. D. McCulloch, in a paper on the therapeutics of radio-active agencies in disease, with special reference to the cure of chronic nerve deafness and deaf-mutism, stated that since the date of his original statements on this subject a good deal of corroborative evidence had accumulated abroad.

No such statement was made by me, as this is not true. If you will take the trouble of referring to the report that was sent to you, you will find that I made no such statement with regard to the therapeutics of radio-active agencies in the cure of chronic nerve deafness. Indeed, there have been only two corroborations of this particular original work of mine abroad, as far as I am aware—namely, the one case reported by an aural surgeon at Boston, U.S.A., in August last year, and those cases reported on page 558 of the *Medizinische Klinik* of Berlin in its issue of April 6th last by Dr. Hugel. But the particular connexion in which I cited the experience of others abroad was distinctly stated in the report which you received in common with other editors. It was in the following terms:

Dr. McCulloch incidentally drew attention to the important immunizing effect in subacute infectious processes, referring to his previous contributions on that subject, and to the amount of corroborative evidence that had since accumulated abroad.

You will find this item correctly reported as such in the *Lancet* of the 15th instant on page 1396.

(4) You omitted to mention the establishment of my priority in this field of otology, or the fact of the circulation of my paper previous to the meeting. (5) You omitted to mention some of the favourable comments that were made and the names of those others who took part in this discussion, while you mention every word of such unfavourable criticism as happened to be offered, without even inserting the fact that "Dr. McCulloch replied."

As such reports are calculated seriously to damage my professional reputation in the minds of my medical friends, as well as to frustrate the object of my long researches for the benefit of humanity at large, I shall be obliged to take serious action in the matter (and on this occasion not in the constitutional manner, to which I have hitherto confined myself) unless you comply with this reasonable request for correction, giving such correction a prominence at least equal to the misconstructions of which I complain.—I am, etc.,

London, W., Nov. 26th.

H. D. McCULLOCH.

LONDON MEDICO-PSYCHOLOGICAL CLINIC.

SIR,—Will you kindly allow me to state in your columns that I am no longer on the Committee of the Psycho-Medical Clinic?—I am, etc.,

London, W., Nov. 26th.

CONSTANCE E. LONG.

SIR,—As my name has been given as a supporter of a proposed psycho-medical clinic I shall be obliged if you will allow me to say that I gave my support under a misapprehension of the institution's aims and constitution.

I have withdrawn from association with it, and I should only support a movement conducted on strictly professional lines.—I am, etc.,

London, W., Nov. 22nd.

CHAS. LLOYD TUCKEY, M.D.

AT the festival dinner of the Great Northern Central Hospital on November 20th, Sir Felix Schuster, who was in the chair, said that the hospital was the only general hospital in Islington, which, with its 350,000 inhabitants, was the largest borough in London. The available accommodation during the last concluded year was 185 beds, and in these 2,517 persons received in-patient treatment. The nursing staff was at present very badly housed, and if new accommodation could be provided for them at a cost of £12,000 it would be possible to receive more patients. The accumulated maintenance debt of the hospital was approximately £10,000, but during the course of the evening donations to the amount of £7,488 were announced.

The Services.

DUBLIN UNIVERSITY VOLUNTARY AID DETACHMENT.

LAST week the Dublin University Voluntary Aid Detachment held its first annual meeting in Trinity College. The report stated that in March, 1911, the idea originated of starting a Voluntary Aid Detachment of women students and graduates of Dublin University, the prime movers being Dr. A. T. Dixon, professor of anatomy, Dublin University, and Dr. Lily Baker, demonstrator in anatomy to the women medical students. The preliminary course of lectures were given by Dr. Lily Baker, and those on nursing by Dr. Ella Webb. The detachment was registered under the Territorial Branch of the St. John Ambulance Association in June, 1912, and thus became a nursing unit of the Territorial Force. In the event of war or national emergency the members agree to serve as army nurses in their own country. The latest addition to the means of training has been the opening to the corps of the Drumcondra Hospital, the members each being allowed to put in one week in the wards under the direction of the nurses. During the last two summers the corps has gone into camp in the country, and has been provided with a certain amount of hospital equipment by the St. John Ambulance Association. This year flag-signalling has been added to the general course of ambulance instruction. The Provost, Dr. Traill, distributed the prizes and medallions won during the year.

Universities and Colleges.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

ANNUAL MEETING OF FELLOWS AND MEMBERS.

MR. G. B. MAKINS, C.B., Vice-President of the College, presided at the annual meeting of Fellows and Members on November 20th at 3 p.m.

Chairman's Introductory Remarks.

MR. MAKINS first expressed the regret of the Council that the President, Sir Rickman Godlee, had been prevented from attending the annual meeting. He referred to the important part which he had been called upon to take in the inauguration ceremony of the American College of Surgeons. In presenting the report he briefly referred to certain paragraphs. In regard to the Insurance Act he informed the meeting that since August 1st a watching committee of the Joint Committee had been appointed. The object of this committee was to collect information in regard to the working of the Act, and to advise when any event rendered action desirable.¹ After referring to the paragraphs dealing with the title of "Doctor" and with the report of Mr. Golding-Bird on the work of the Central Midwives Board, he called attention to the statement of expenditure of the College on the Queen Square estate. This statement showed that the amount received by the College from the sale of the old examination hall was roughly £2,600 less than the amount expended on the new building; all of this, save £500, had now been paid. As a set-off it was to be remembered, first, that the College had a freehold hall which was built in such a manner as to give complete satisfaction to all concerned; and, secondly, that the working expenses had been reduced by £1,000 a year as far as the College of Surgeons was concerned. The number of Fellows and Members received into the College, as well as the number of licences in dental surgery and diplomas in public health and tropical medicine, was approximately the same as in previous years; this Mr. Makins ventured to consider satisfactory. Lastly, he spoke briefly on the statement of income and expenditure.

Questions.

DR. SIDNEY C. LAWRENCE, the Honorary Secretary of the Society of Members, asked a number of questions, to which Mr. MAKINS replied. Among these was one dealing with the courtesy title of "Dr." Dr. LAWRENCE inquired why the courtesy title was not given on the agenda paper to Mr. Brindley James. He considered that as an act of courtesy the Council should do this without being asked. The CHAIRMAN stated that if Mr. James had intimated a desire to be called "Dr.," the Council would have placed this title before his name on the paper. Dr. LAWRENCE further asked who was bearing the expenses of the President on his visit to America. The reply was that the President himself was probably paying all his expenses; the College was not doing so.

SIR VICTOR HORSLEY pressed for a reply to his question regarding the interview at the Home Office on the subject

¹ BRITISH MEDICAL JOURNAL, November 15th, 1913, p. 1336.

of the scarcity of bodies for dissection and other teaching purposes. It appeared from the reply that the Home Office did not suggest introducing legislation, and Sir VICTOR HORSLEY insisted that this meant that nothing would come of the action taken.

Dr. NELSON HARDY suggested that the Council should consider the advisability of co-opting Members or Fellows in general practice on to the Insurance Joint Committee. Mr. MAKINS resisted the proposal, as he considered that the Committee would be more valuable with its present constitution. The suggestion would, however, be considered in Council. Dr. MORTON also asked some questions, as did Dr. COLLINGWOOD and Dr. OLDFIELD.

Direct Representation.

Dr. J. BRINDLEY JAMES moved the following resolution:

That this twenty-ninth annual meeting of Fellows and Members again affirms the desirability of admitting Members to direct representation on the Council of the College, which, as now constituted, only represents those Members who also hold the Fellowship; 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 contended that this resolution, which had already been passed without opposition twenty-eight times, had received wide support from the Fellows of the College as well as from the Members. The late Sir Jonathan Hutchinson had expressed himself to the effect that the Members had a moral right to be represented on the College. He maintained that the conduct of the affairs of the College would be beneficially affected by the admission of a few Members. At present the exclusive election of operating or hospital surgeons was disadvantageous to the profession, for they did not take a sufficiently wide survey of the matters of importance. There would be no damage to the privilege of the Fellowship by the admission of suitable Members. Members were at present eligible to hold office as examiners, professors, and prizemen; why not also to serve on the Council?

Dr. SIDNEY LAWRENCE, who seconded, regretted the retirement of Dr. Joseph Smith, who had led the Society of Members for so many years. Owing to advancing years he had been forced to step down, but still continued to give his moral support to their scheme. He maintained that the Society of Members had been of the greatest possible use to the College. After stating that some of the Members of the Council thought it extremely stupid and foolish for the Council to maintain a position of obstinacy, and that they did not even represent the majority of the enlightened Fellows, the speaker referred to the result of the interview with the Government in 1907 on this subject. He expressed the opinion that the reason why the Council had not told the Members the result of that interview was that the Government's reply was favourable to the Members. He then dealt with the official reply to the resolution passed last year. He applauded the courage of Sir Alfred Pearce Gould for having attempted to give a reply at the meeting, but condemned Sir Rickman Godlee for his silence. The reply of the Council this year was a reference to a report issued in 1907, which report was inaccurate where it was not insolent. The courses it was open for the Members to take if the Council persisted in its present attitude were many. They could influence students not to take the diploma of the Conjoint Board, but to go to some provincial university and get a degree. Sooner or later the Society of Members would adopt a more active policy. He expressed the hope that the Council would be sensible enough to see that it was in the highest interests of the College to accept the resolution.

Dr. VINCENT BELL supported the resolution, but at the same time dissociated himself from what had been said by the proposer and seconder. He advocated acceptance of the resolution as a means of removing the attacks which the Society of Members made on the Council year by year, and he also considered that in many instances Members were only prevented from obtaining the Fellowship of the College by financial reasons.

Dr. COLLINGWOOD contended that in the twentieth century there could be no question as to the right of members of a corporation having a say in its government. The time was past when the legal right obtained by charter or Act of Parliament of autocratic government of any society could be upheld. It had become absurd. The Members had not used force in any form in their endeavour to obtain their rights, and the Council had therefore relied on apathy in their resistance.

Sir VICTOR HORSLEY moved the adjournment of the debate. He did so for two reasons of first importance. The first was the constitutional question. Last year Sir

Rickman Godlee had maintained silence when invited by him to give the reasons why the Council refused the Members their elementary rights. In his closing speech, he (Sir Victor Horsley) had pointed out that Sir Rickman Godlee, as President of the College, would have the opportunity of replying this year. He regarded the fact that Sir Rickman Godlee had made a statement at the Apothecaries' Hall shortly after last year's annual meeting as a breach of courtesy. He claimed that the meeting had a right to a definite reply. Until they knew the reasons for the refusal, it was not possible to go to the Privy Council for intervention. That reply must be given by the President, and for this reason it was essential that the debate should be adjourned until he had returned from America. The second reason was that a disciplinary point had arisen in the conduct of the President in the hearing of penal cases, which had resulted in the removal of two Members from the list.

The VICE-PRESIDENT stated that he was unable to accept the motion, but on being pressed, allowed Dr. George Jones to second the motion, before finally deciding the point. Dr. GEORGE JONES urged that the President only could speak as the mouthpiece of the Council. But apart from this very strong reason for the adjournment, the second reason was still more powerful. Sir Victor Horsley had in polite terms practically suggested a vote of censure on the President, and since Sir Victor Horsley would not attack a man save to his face, it was necessary to give the President an opportunity of defending himself on a personal charge. On the point of procedure, he urged that every society and meeting could, if they desired, adjourn a debate.

Mr. MAKINS refused the motion. Dr. OLDFIELD said that according to the Charter of the College the Members had no powers or rights whatsoever, since the Chairman could terminate a meeting or stop a Member from speaking.

The CHAIRMAN declined to allow Dr. Oldfield to proceed on this point, and Dr. OLDFIELD then spoke to the original motion. He asked the Council what it was doing for the Members. They wanted comfort, help, and advice. The Members, by the provisions of the Charter, were quite impotent. They looked to the Council for their rights, but always got the same answer. They would get it again this year. On referring to the reply published, he found that in the year 1907 the Council had conceived and brought forth a child, of which it appeared to be very proud, for it always referred to this child-reply since. (Sir VICTOR HORSLEY interjected that the child was mentally defective.) But the Council had been sterile since that year. The Council appeared to think that when the annual meeting amended the resolution referring to the action of the Council on the insurance question, the meeting had approved of this action. In reality it had been sarcastic, and only approved of the action "so far as it goes." The reference in the report to this was an insult to the Members. In their reference to the representation question the Council had not met the Members at all. He suggested one of two methods. The Council could either select a suitable Member each year, and by making him an Honorary Fellow take him into the Council, or it could apply for a supplementary Charter.

Dr. F. G. LARKIN suggested that the attitude of the Members might be prompted by some jealousy.

Dr. GEORGE JONES indignantly repudiated this suggestion, and added that it was ridiculous to bring forward reasons for or against this resolution; it merely sought to uphold the principle of representative government, which had long since been accepted as the only reasonable form of constitution. His concluding remarks included a survey of parliamentary and other forms of central as well as local government of the present day.

The resolution was put to the meeting and carried *nemine contradicente*.

Financial Resolutions.

Dr. A. S. MORTON moved:

That this meeting of Fellows and Members requests the Council to include in their next annual report a balance sheet, showing fully and without reserve the assets and liabilities of the College on Midsummer Day, 1913.

He began by criticizing the items in the income and expenditure account published in the annual report, and was requested by the CHAIRMAN to address himself to the question of a balance sheet. Continuing, he criticized the expenditure of the Council in certain instances. He particularly pointed out that the items dealing with the printing and production of the *Calendar* and *Catalogues*

were large, while a very small sum resulted from the sale of these publications.

Dr. OLDFIELD seconded the motion, and at the same time, with the permission of the Chairman, covered those points dealt with in the following motion, in order that when the time came he could merely move it without speaking again. He made a special point of the fact that the expenditure on the examinations for the Membership was low as compared with the large revenue from this examination, while in the case of the Fellowship the income was only a little in excess of the expenditure. He asked questions in regard to the various items of expenditure, and then turned his attention to the assets of the College. He made various suggestions as to the best means of spending the balance. The motion was put and carried, 12 voting for and none against.

Dr. OLDFIELD then formally moved:

That this annual meeting of the Royal College of Surgeons places on record that it is not satisfied with the administration of the College finances as carried out by the Council, and resolves that such steps as are within its power to take, if any, shall be taken by this annual meeting to remedy the same, and that, if it has no power, steps be taken to secure for it the necessary authority.

Dr. LAWRENCE seconded in a short speech. He objected to the expenditure on the dinner, and Sir VICTOR HORSLEY expressed the opinion that it was absurd to make out that the dignity of the Council would be enhanced by the holding of an annual dinner. The moneys expended would be very properly given to the British Medical Benevolent Fund, in aid of some of the many distressing cases which were dealt with by that Fund.

The CHAIRMAN replied to the criticisms raised in the two discussions. In regard to the *Catalogues* and *Calendar*, it was obvious that the cost must be high, and that the sale must be extremely limited. The value of the publications, and indeed their necessity, could scarcely be challenged. The other points were dealt with severally.

The resolution was carried by 10 to 0.

Count-out.

Dr. W. G. DICKINSON was then called upon to move a further resolution, when he pointed out that there was not a quorum of Members and Fellows in the theatre. This having been confirmed by a count being taken, the meeting terminated automatically.

THE "CALENDAR" OF THE ROYAL COLLEGE OF SURGEONS OF ENGLAND.

THE *Calendar* of the Royal College of Surgeons of England for 1913 includes the usual list of officers, professors, lecturers, examiners, Members and Fellows, with charters, by-laws, and the annual report of the Conservator of the Museum. One rather conspicuous feature is the list of fifteen new Honorary Fellows elected last July. Of the Honorary Fellows elected only thirteen years ago, no fewer than sixteen are dead, including the late King. His present Majesty was elected in 1909, when Prince of Wales. There are now 1,589 Fellows on the ordinary list. Of these 1,556 obtained the diploma by examination, 27 were elected as Members of twenty years' standing, 4 elected otherwise, 1 (Eleanor Davies-Colley) Fellow by examination under the Medical Act of 1876, and 1 (Arthur E. J. Barker) elected *ad eundem*. In the Chronological Register of Fellows, the familiar names of Barwell and Bryant head the list, under the date 1853. The total number of Members amounts to 17,126, and there are still 287 who hold the long-suppressed diploma of Licentiate in Midwifery. The Licentiates in Dental Surgery number 2,559, the Diplomates in Public Health 786, and the Diplomates in Tropical Medicine and Hygiene, holding the diploma granted conjointly with the College of Physicians, number 13. The change from the Embankment to the new Examination Hall in Queen Square has proved financially advantageous, but large as the balance of income over expenditure has been, it has not been large enough to cover the depreciation during the year of the securities held by the College, amounting, as this does, to £8,874. All the expenses incurred by the building of the new Examination Hall have been paid, excepting a sum of £500 still due to the builders. The Librarian, Mr. Victor Plarr, reports that during the past year the library was open on 275 days, and that the number of readers was 8,380, an average of 30 a day, a slight decrease, due, the Librarian believes, to the fact that visitors to the library often neglect to sign their names in the book kept in the hall of the College for the purpose.

THE ADMINISTRATION OF THE ROYAL COLLEGE OF SURGEONS.

Dr. JOSIAH OLDFIELD (London, E.C.) writes:

It must be a matter of deep interest to every reader of your JOURNAL to know that at the annual meeting of Fellows and Members of the Royal College of Surgeons there was not a single Fellow or Member to be found there to support the conduct of the College by the Council. It is pathetic in the extreme to find distinguished surgeons of worldwide eminence so blind to the spirit of the age as to find themselves at an annual meeting without a single friend or supporter.

It is quite evident that the matter cannot stay where it is. Twelve members of the Council were present, and not one of them was able to say a single word in support of their persistently obstructive attitude against the wider and wiser administration of the College. Upon the face of it their administration must stand condemned, since not a single Fellow or Member of over 10,000 of which the corporation consists could be found to come and support the Council in the face of resolutions which condemned their attitude.

In these days it is impossible for a few highly placed officials to combat the unanimous demand of thousands of their fellow-members of the corporation, and since for nearly twenty years the Council of the College have definitely refused to take any steps for giving Members full voting power, or a seat on the Council, the only alternative is for the unanimous body of Members to petition for an alteration of the Charter.

I venture to suggest that there would be two simple ways which would to some extent meet the needs of the case—namely, the power of the Council under its present charter to elect two Members to the F.R.C.S. annually without examination; therefore, if the Members themselves selected one of themselves, and the Council honoured their choice with an F.R.C.S. and a seat on the Council, one would feel that, at any rate, the Council took some interest in and appreciated to some extent the administrative capacity of its members.

The other alternative I suggested was that under its present Charter the Council could constitute a quarterly meeting of Members for the purpose of acting as a legislative and consultative body; their resolutions would then have to come before the Council for ratification before becoming valid.

The present condition of the Council is that they take no interest in or care for the present needs of the medical profession, as represented by the great body of Members, and that therefore we who are Members of the College possess no legislative body and no organization which will protect or help us in the times of stress through which we are passing.

Since the Council will neither do the work that is required, nor allow others to do it, the only alternative is to take steps to alter the Charter, and the annual meeting decided that within certain limits this should be done.

UNIVERSITY OF CAMBRIDGE.

The following degrees have been conferred:

M.D., B.A.—I. Peters.
M.B., B.C.—J. B. Hance, R. Hodson.
M.B.—H. F. Comyn.

UNIVERSITY OF LONDON.

The following candidates have been approved at the examination indicated:

THIRD M.B., B.S. (Both Groups).—*H. J. O. Ewing, *H. L. H. Greer, *A. E. Hallinan, *L. M. Badell, *A. C. Palmer, *C. E. Thornton, J. Appleyard, C. H. Attenborough, Margaret M. Baden, A. C. L. O. Bilderbeck, G. F. Bradley, A. J. Clarke, R. J. Clausen, F. W. T. Clemens, J. A. Cowan, J. M. Curé, J. P. Davies, R. D. Davy, S. F. Dudley, W. H. Eggar, Pattie R. Elliott, A. S. Erulkar, D. M. Gibson, C. E. A. Goddard, C. F. Hacker, C. C. Harrison, G. M. Heiron, P. H. Henson, M. Hocken, T. H. Holroyd, J. M. Joly, W. H. Jones, T. P. Kilner, W. Leslie, Muriel A. Lloyd, Margaret J. M'Enery, G. Matthews, H. B. Parker, Hilda M. Pollard, W. J. A. Quine, H. M. Rashbrook, A. E. Roberts, A. D. Rope, D. Ross, A. L. Shearwood, H. Smith, E. N. Snowden, E. S. Sowerby, J. Vaughan-James, H. B. Walker, E. W. Whiting, G. Whittington.

* Passed with Honours.

† University Medal.

Group I Only.—T. I. Bennett, Mabel K. Bishopp, G. M. Campbell, A. S. Cohen, M. B. Cooper, W. E. Milligan, R. Woodhouse.
Group II Only.—F. C. Alton, J. Bostock, L. G. Bourdillon, G. J. Bowen, A. R. C. Dooley, H. W. Evans, C. H. Gould, F. A. Grange, W. E. Kingdon, L. Levene, R. J. M. Love, Ethel M. Magill, W. J. Morris, J. L. Preston, M. Radford, C. S. L. Roberts, W. Simpson, J. S. Sloper, F. G. A. Smyth, H. J. D. Smythe, H. Webb, H. White.

UNIVERSITY OF SHEFFIELD.

Department of Pathology.

MR. J. H. DIBLE, M.B., Ch.B.Glasg., has been appointed to the post of Junior Demonstrator in Pathology, vice Dr. Douglas, resigned.

For the John Hall Gold Medal in Pathology William Barnsley Allen and Gordon Fowler Stones have been bracketed equal.

UNIVERSITY OF EDINBURGH.

UNIVERSITY COURT.

At a meeting of the Edinburgh University Court on November 17th, Principal Sir William Turner in the chair, the Senatus reported that William Russell, M.D., F.R.C.P.E., had presented his commission as Moncrieff Arnott Professor of Clinical Medicine, and that he had been duly admitted a member of the Senatus Academicus. It was reported that the Senatus had elected Professor Harvey Littlejohn, M.D., as one of its assessors on the University Court, in succession to Sir Thomas R. Fraser. The Court resolved to record in its minutes its sense of the valuable services rendered to the University Court by Sir Thomas Fraser during his tenure of office extending over a period of fully ten years.

Dr. Carnegie Dickson was appointed Lecturer on Applied Bacteriology. On the recommendation of the Senatus, recognition was granted to the following extra-academical teachers, whose courses of instruction shall qualify for graduation in Medicine: F. Stanley Kipping, Ph.D., D.Sc., University College, Nottingham (Chemistry); Miss Jessie E. Minor, Huguenot College, Wellington, South Africa (Chemistry). Committees were appointed to report as to several additional examinerships about to fall vacant, including Veterinary Hygiene, Medical Physics, Clinical Surgery, and Practical Surgery.

It was also agreed to grant the use of rooms in the University in connexion with the Congress of the Royal Institute of Public Health, to be held in July next.

SOCIETY OF APOTHECARIES OF LONDON.

THE following candidates have been approved in the subjects indicated:

SURGERY.—*H. V. Capon, *W. R. Sadler, †H. C. Wright.
MEDICINE.—*G. F. Malden, *B. C. Piercy, *D. Schonken,
*W. Smith.
FORENSIC MEDICINE.—C. Bluett, A. K. S. Wyborn.
MIDWIFERY.—E. M. D. N. Baker, L. Baumgarten, C. Bluett, B. C. Piercy, D. Schonken, J. D. Schonken.

* Section I.

† Section II.

The diploma of the Society has been granted to Messrs. W. R. Sadler and H. C. Wright.

Obituary.

MATHIEU JABOULAY, M.D.,

PROFESSOR OF CLINICAL SURGERY, UNIVERSITY OF LYONS.

AMONG the victims of the railway accident at Melun on November 4th was Professor Jaboulay, the distinguished surgeon of Lyons, whose remains were not found till November 8th. He was born at Saint-Genis-Laval, near Lyons, in 1860, and studied medicine at the Lyons Faculty. He was appointed demonstrator of anatomy and head of the anatomical department in 1886, almost immediately after taking his doctor's degree. In 1888 he won the title of *professeur agrégé*, receiving a very high compliment from Professor Farabeuf on the occasion. After serving as assistant under Poncet, he was in 1892 appointed surgeon to the hospitals, and in 1902 succeeded Ollier in the Chair of Clinical Surgery. He was a singularly rapid and skilful operator, and his teaching brought crowds of students to his lectures. He was a man of great originality of mind, and among the subjects to which he devoted special attention were operative procedures for the relief of gastric crises, the treatment of exophthalmic goitre by section of the sympathetic nerve, incontinence of urine, exothyropexy, trophic disturbances of the lower limbs, vascular anastomosis, and perforating lesions. Of his works may be mentioned a treatise on the surgery of the nerve centres, the viscera, and the limbs; lectures on clinical surgery, a monograph on hernia, and a number of memoirs on different subjects. He invented an anastomotic button intended to take the place of sutures in gastro-intestinal operations and to ensure greater rapidity in the completion of operations. He was the first in France to perform choledochotomy. In recent years he gave much time to researches on cancer, which he believed to be of parasitic origin. In spite of a somewhat distant and retiring disposition due to modesty, he was among the French surgeons best known in foreign countries. The coldest of men in appearance, he was in

reality most affectionate, and to intimate friends most open, fascinating, and generous. He was a man of rare disinterestedness, and was held in the highest respect by his colleagues. His loss is greatly felt, not only by his own school of Lyons, but by the whole of France. His funeral took place at Lyons on November 13th. The obsequies were held in the chapel of the Hôtel-Dieu. The municipal council has decided to give his name to one of the streets of the city.

JAMES ACWORTH ANGUS, M.R.C.S., L.S.A.,

NEWCASTLE.

THE death of Dr. James Acworth Angus, on October 18th, removed one of the older medical practitioners in Newcastle-upon-Tyne.

Descended from an old yeoman family, he was born in 1836 at Gateshead, and received his medical education at the Newcastle School of Medicine; he took the diploma of M.R.C.S.Eng. in 1857, and after an experience of country work settled in general practice in Newcastle-upon-Tyne. In addition to carrying on an extensive practice he had held the posts of Medical Superintendent of the Newcastle-upon-Tyne Hospital for Incurables, and of Honorary Surgeon to the Hospital for Diseases of Skin. His contributions to medical literature included "The Treatment of Spina Bifida" (BRITISH MEDICAL JOURNAL, 1875), and "Haemorrhage in Abortion" (*ibid.*, 1879).

On the formation of the Newcastle Rifle Volunteers he was appointed its first Surgeon, and had for his commanding officer another medical man—the late Sir John Fife.

Dr. Angus was a man of fine physique, fond of outdoor sports, and was much respected by his medical brethren. He was a Conservative in politics, but took no part in public affairs. He died of a syncopal attack in his 78th year, and his remains were cremated at Darlington, the ashes being subsequently interred at Elswick, in the presence of a large gathering of relations, old patients, and many of the medical profession.

He was twice married, and is survived by his second wife, three sons and a daughter. One son, Mr. H. Brunton Angus, is joint Professor of Surgery to the University of Durham.

CHARLES MCBURNEY, M.D.,

EMERITUS PROFESSOR OF SURGERY, COLUMBIA UNIVERSITY, NEW YORK

DR. MCBURNEY, whose death was mentioned in the JOURNAL of November 22nd, had just returned from a shooting expedition; his death was due to heart disease. He was one of the foremost surgeons in the United States, and was called in as a consultant when President McKinley was shot in 1901. He was born at Roxbury, Massachusetts, in 1845, and after leaving school entered at Harvard, where he took the degree of B.A. in 1866, proceeding to that of M.A. in 1869. On leaving Harvard he studied medicine at the College of Physicians and Surgeons, Columbia University, New York, where he took the degree of M.D. in 1870. He then held the post of interne at Bellevue Hospital for a year and a half, after which he continued his studies in London, Vienna, Berlin, and Paris. In 1873 he was appointed demonstrator of anatomy at the College of Physicians and Surgeons in New York; in 1882 he became lecturer on operative surgery, and in 1889 was elected to the chair of surgery and became head of the department. Increasing practice made such demands on his time that in 1902 he resigned the chair of surgery, though he continued to teach clinical surgery till 1907, when he was made Emeritus Professor. He was on the staff of several of the hospitals of New York, but his principal work was done at the Roosevelt Hospital, where in 1888 he was placed in full charge of the surgical service.

His contributions to the literature of surgery were numerous and valuable. Among the principal are an essay on "The Technic of Aseptic Surgery" in Gould and Warren's *International Textbook of Surgery* (1900), and a paper written in conjunction with Dr. Allen Starr, entitled, "A Contribution to Cerebral Surgery," which appeared in the *American Journal of the Medical Sciences*, April, 1893. The paper in which he described what is now universally known as McBurney's point was entitled "Experience with Operative Interference in Cases of

Disease of the Vermiform Appendix," and was read before the New York Surgical Society on November 13th, 1889. It was his work in connexion with appendicitis which made him best known, but he had many other titles to fame. He was one of the first to adopt aseptic measures, and the technique which he devised for this purpose at the Roosevelt Hospital is said to afford a model not yet superseded. He invented a number of procedures and instruments which have been widely adopted by surgeons. He was a man of great breadth and originality of mind, and as a teacher was before all simple and practical. He had the power of inspiring confidence both in his students and his patients. He was an Honorary Fellow of the Royal College of Surgeons of Edinburgh and the College of Physicians of Philadelphia, a member of the Surgical Society of Paris, the Roman Medical Society, the Medical and Surgical Society of Constantinople, the New York Academy of Medicine, the New York State Medical Association, the New York County Medical Society, the New York Surgical Society, the Medical and Surgical Society, and the Practitioners' Society.

For several years before his death Dr. McBurney had retired from practice.

DR. WILLIAM RUSHTON SHORIT, died suddenly at Ealing on November 9th. He was educated at St. George's Hospital and at Durham University, where he graduated M.B. in 1887, B.S. in 1888, and M.D. in 1893. He took the diploma of M.R.C.S. and L.R.C.P. Lond. in 1890. After qualifying he served for some time as assistant medical officer of the Durham County Asylum. He then went to South Africa, where he was in practice at Johannesburg. During the South African war he served as a civil surgeon in the Natal Field Force from 1889 to 1901, and was present at the relief of Ladysmith. While in South Africa his health suffered, and he never entirely recovered. He acted for some time as surgeon on the Holt Line of steamers, and also practised at Dartford, but he completely broke down in health several years ago, and had since been living in retirement.

THE profession in Australia, particularly in Victoria, has recently lost one of its finest and most respected members by the death of Dr. FREDERICK JOHN CLENDINNEN; it took place in the Harold Fink Hospital, Park Lane, on November 6th. He was born in Melbourne in 1860, and received his early education at the Scottish College, where he was captain of the school during his last year. His medical training was obtained in London, and he afterwards studied in Edinburgh and Brussels. He returned to Melbourne, and soon developed a very extensive practice in that city. The study of *x* rays attracted him whilst this subject was in its infancy, and eventually all his time and thoughts were given to a study of the subject, not only from the clinical but the theoretical and mechanical side. Only a few weeks before his death he was engaged with the makers of *x*-ray apparatus in perfecting some ideas he had. Like most of the pioneers of this work, he suffered severely from *x*-ray burns, which assumed a malignant type necessitating amputation of three fingers. Still he worked on, and early this year visited England as a member of the International Congress, where his papers on radiology and colour photography were highly appreciated. As soon as the Congress was over he had to enter the above institution, where he was operated upon by Mr. Douglas Shields. He rallied somewhat, but his previous sufferings told against him and he died after twelve weeks. He was first Honorary Skiagraphist to the Melbourne Hospital, a post which he still held at the time of his death. His wife—formerly a Miss Welshman—was visiting London with him, and has since returned to her four children who mourn his loss. His eldest son, Dr. J. Clendinnen, will continue his father's work. His untimely death will be a great loss to the profession and citizens of Melbourne.

DEPUTY SURGEON GENERAL JOHN SCARFIELD COMYN died lately at Southsea. He took the diploma of L.R.S.C.I. in 1857, and subsequently that of F.R.C.S.I. He graduated M.B. Dublin in 1874, and entered the Army Medical Department as assistant surgeon on January 22nd, 1858. He

became surgeon in 1870, surgeon-major in 1873, and was specially promoted to brigade surgeon for services in the Egyptian war of 1882, retiring with a step of honorary rank from January 15th, 1883. His only war service was the Egyptian expedition of 1882, when he obtained the medal, with the Khedive's bronze star, as well as special promotion.

LIEUTENANT-COLONEL WILLIAM HENRY GREGG, Bengal Medical Service (retired), died in London on November 6th. He was born on January 30th, 1845, and was educated at Trinity College, Dublin, where he graduated M.B. and M.Ch. in 1869. He took the Sanitary Science Certificate at Cambridge in 1886, and the M.R.C.P. London in 1887. He entered the Indian Medical Service as assistant surgeon on October 1st, 1869, and became surgeon on July 1st, 1873, surgeon-major on October 1st, 1881, and brigade-surgeon-lieutenant-colonel on June 20th, 1894, retiring on December 4th, 1899. He served on the North-East Frontier of India, in the Lushai expedition of 1871-72, and received the medal for that campaign, with a clasp. On his return from service he was posted to civil employ in Bengal, where he was successively civil surgeon of Dinajpur, 1873-6; of Hughli, and lecturer in botany in Hughli College from 1877 to 1886; protector of emigrants, 1886-8; sanitary commissioner of Bengal, 1889-95; and civil surgeon of Bardwan, 1896-9. He was the author of *A Text-book of Botany* for Indian schools, published by Messrs. Thacker, Spink and Co., Calcutta, in 1883.

DEATHS IN THE PROFESSION ABROAD.—Among the members of the medical profession in foreign countries who have recently died are: Dr. J. M. Aguilar, professor of gynaecology in the Medical Faculty of Granada; Dr. Gustav Bouisson, professor in the medical school of Marseilles; Dr. Joseph Grynfeltt, professor of clinical obstetrics in the medical faculty of Montpellier; Dr. Joseph Giustaneani, director of the Sanitary Service of Corsica; Dr. Emmerich Reczdey, head of the second surgical clinic of the University of Budapest; Dr. O. von Schwartz, lecturer on mental diseases in the University of Budapest, first president of the National Sanitary Council, and vice-president of the Medico-Legal Senate, aged 60; and Dr. Richard H. Trautmann, representative in the Hamburg Hygienic State Institute, who had made a reputation by bacteriological researches in the province of acute and infectious diseases and methods of disinfection, milk sterilization, etc.

Medico-Legal.

DEATH CERTIFICATES AND UNREGISTERED PRACTICE.

AT Watford on November 10th a coroner's inquest was held on the body of a man whose death had been reported to the coroner as being uncertified, and ended in a verdict of death from natural causes. The evidence as recorded in the *Watford News Letter* was to the following effect. The patient fell ill on October 25th, and was attended by Mr. S. I. Lightfoot, who on November 5th asked for a consultation with another medical man, mentioning whom he would like to be summoned. This medical man, on receiving a telephone message, went to the house about midday and found there Mr. Lightfoot, who described the course of the disease and the treatment which had been adopted. The second medical man examined the patient himself, and agreed that it was a case of acute nephritis, and that the treatment that had already been practised was the best that could be adopted. He was summoned again by telephone the same evening, and he again found Mr. Lightfoot there, but the patient was moribund, and nothing more could be done. Subsequently, on being asked to give a death certificate, he visited the registrar and explained that he was unable to do so, partly because he did not think he had seen enough of the patient, partly because of the regulations of the General Medical Council. He was, however, satisfied that the patient had been properly treated, and that the cause of death was acute nephritis.

Before calling on any witnesses to give evidence the coroner, addressing the jury, mentioned that they were probably aware that Mr. Lightfoot was a medical man whose name had been removed from the *Register* by the General Medical Council for reasons known to the jury. At the end of the case the coroner added that he did not wish it to be thought that he was at all antagonistic to Mr. Lightfoot, but he was bound to point out that in the case of his attending a patient and death occurring, no medical certificate could be given, and an inquest would have to be held.

FEEES FOR MEDICAL WITNESSES AT INQUESTS.

A CASE has recently been brought to our notice which shows that some doubt exists as to the right of a medical man to claim fees and expenses for attendance at an inquest. In June last an inquest was held at Streatham touching the death of a nine days' old child. The death had resulted from an accident received at birth for which no one was to blame. The doctor who had been in attendance having left for his holidays received a blank certificate which he filled in, attributing death to "injury at birth." He was subsequently subpoenaed to attend the inquest. At the inquest, according to a report in the *South London Press* of June 20th, the deputy coroner "asked the doctor why, when he knew the death was due to some violence, he granted a death certificate and failed to inform the coroner." The doctor replied that except in the case of death in a lunatic asylum, prison, or inebriates' home, a doctor could give a death certificate, whether the death was the result of violence or a natural death. He said it was the registrar's duty to inform the coroner, not the doctor's, although in practice doctors did almost always inform coroners as a matter of courtesy. The deputy coroner then said: "I disagree. You grant a death certificate which no registrar in the kingdom could possibly have accepted, and any death not due to natural causes you must report to the coroner." The doctor here concerned has informed us that the coroner refused to pay his travelling expenses, alleging that he had no power to do so, and that the doctor had put himself in a false position by his own action. The doctor accordingly issued a writ, with the result that the full amount was paid into court. We do not agree with the coroner's assertion that it was the duty of the doctor to inform the coroner. It would be instructive to see the section of the Act of Parliament which imposes any such duty. That he was admittedly wrong in withholding payment of expenses is apparent from the fact that they were paid when pressure was brought to bear. Although the Coroners Act provides for the payment of the modest fee of one guinea to the medical witness, statutory regulations are in force which provide for the payment of travelling expenses.

Medical News.

THE Home Secretary has appointed Mr. W. P. G. Graham, M.B., M.R.C.S., and Mr. G. F. Rogers, M.A., M.D., to be Inspectors of Vivisection under the Cruelty to Animals Act, 1876.

THE Government of the Gold Coast has voted a sum of £250 to the fund raised by Mr. Austen Chamberlain for the extension and development of the London School of Tropical Medicine.

A PROPOSAL has been made to the municipal council of Paris to call a street by the name of the late Dr. Lucas-Championnière. The proposal has been favourably reported on to the Administration.

AT a special convocation held on November 5th the University of Toronto conferred the honorary degree of Doctor of Laws on Sir Rickman Godlee, President of the Royal College of Surgeons of England.

THE following gentlemen have lately become vice-presidents of the Research Defence Society: Sir Hugh Bell, Sir John Brunner, the Dean of Ely, Lord Harlech, Sir John Prescott Hewett, Sir William Mather, Mr. H. S. Wellcome, and Mr. H. G. Wells.

ON the occasion of the visit of M. Poincaré, the President of the French Republic, to Madrid, he sent the insignia of the "Palmas Académiques" to Dr. George V. Perez of Orotava, who has not infrequently made original contributions to our columns.

THE death is announced, at the age of 68, of Dr. Clement Godson, who was at one time assistant obstetric physician to St. Bartholomew's Hospital and physician to the Samaritan Free Hospital. We propose to publish an account of his career in an early issue.

AT the meeting of the Royal Society on Friday next Sir Francis Darwin will read two papers, the one on a method of studying transpiration, and the other on the effect of light on the transpiration of leaves. Mr. J. H. Mummery will read a paper on the process of calcification in enamel and dentine.

AS announced in the advertisement columns, an examination for not fewer than twelve commissions in the Indian Medical Service will be held in London on January 26th and the five following days. Forms of application and further particulars can be obtained from the Military Secretary, India Office, London, S.W.

THE meeting of the school medical service group of the Society of Medical Officers of Health will be held on Saturday, December 6th, at 2 p.m., at the Royal Sanitary Institute, 90, Buckingham Palace Road, London, S.W., and not at 1, Upper Montague Street, Russell Square, as previously announced. All officers in the school medical

service are invited to attend this meeting. Further particulars can be obtained from the honorary secretary, Dr. Armlay Ashkenny, Medical Department, Education Office, Council House, Birmingham.

AN Intercolonial Conference and Exhibition on National Health, to which the Council of the British Medical Association at its last meeting nominated Mr. Donville to be its delegate, will be held in London in May, 1914 (18th to 21st) under the auspices of the Victoria League. The object of the gathering is to effect an interchange of knowledge between the different sections of the empire on the important question of housing, including town planning, model dwellings and workmen's houses, and the care of child-life, including infancy and health, the school child, and the child as wage-earner. The conference will be opened by Earl Grey.

IN commemoration of the fact that Sir Henry Roscoe attained the age of 80 last January, 140 students of chemistry at Owens College, Manchester, during the time when he held the chair there, subscribed the cost of a bust for presentation to the Chemical Society of London. At the meeting of the Society on November 20th an address was presented to Sir Henry Roscoe, in the name of the donors, by Sir Edward Thorpe, who said that among the old pupils at Manchester were men now of great eminence, occupying responsible positions in the United States, Germany, Russia, and Japan, as well as in Great Britain and in British Dominions beyond the sea. The ceremony was attended by a large gathering, those present including Sir Thomas Barlow, President of the Royal College of Physicians of London, and Sir J. Rose Bradford, M.D., one of the secretaries of the Royal Society.

A NUMBER of members of the medical profession enjoyed the hospitality of the Western Pharmacists' Association (of London) on the occasion of the twenty-fourth annual dinner held at Frascati's Restaurant in Oxford Street on November 26th. Brief and excellent speeches, a delightful musical programme, and a well-served dinner combined to make the evening pass very agreeably. To the toast of "The Medical Profession" Sir Thomas Boor Crosby and Sir Alfred Pearce Gould replied. Sir Thomas Crosby charmed the guests with his reminiscences of medicine as it was fifty and more years ago, and an allusion to his occupancy of the onerous position of Lord Mayor of London when an octogenarian drew sympathetic applause. Sir Alfred Pearce Gould discussed the difference between a profession and a trade, and said that for the same reason that medicine was a profession—that the due performance of duties must be largely a matter of personal honour—pharmacy might also be described as a profession. Sir Alfred also spoke with satisfaction of the separation of dispensing from prescribing under the Insurance Act. Dr. S. H. Browning proposed "The Western Pharmacists' Association," and the President, Mr. John D. Marshall, replied. Mr. F. H. Crossley Holland proposed "The Visitors," and Mr. R. H. Jocelyn Swan, F.R.C.S., responded.

DEALING with the movement in favour of open-air schools, Sir George Newman, in the third Chadwick Lecture on November 18th, said that its real triumph had not been that it had covered the country with open-air schools, but that it had taught some new applications of educational systems. The effect of the movement on school building had been remarkable, for the whole type of the construction of buildings for educational purposes was now being reconsidered. The origin of the movement he ascribed to the work of the Children's Country Holiday Fund, which had proved immensely beneficial to debilitated children. The next step was the establishment in country places of schools for town children, as at Moberley for Manchester children. Then came the holding of classes in playgrounds, public parks, and other like places, and finally in succession the open-air day school, the open-air residential school, and more recently the sanatorium school. In open-air schools the weight of individual children increased on an average by 2½ lb. each month—a greater increase than that shown by children for whom school meals were provided; the average annual increase in chest measurement was approximately 2 in.; the children gave satisfactory responses when various muscle tests were applied, and showed a larger proportion of haemoglobin than children educated indoors, as well as improved carriage; they also figured well when their mentality was tested by time reaction tests and by others dealing with the acuteness of sense organs. Finally, there was a lesser prevalence of zymotic diseases among children attending open-air schools, and a child who had had the benefit of being taught for a time at an open-air school was more regular in its attendance than formerly.