

the end of the humerus in its normal position as regards the forearm bones, flexion and extension being impressed on the joint to see that everything is free. Before reduction is accomplished a slight use of the knife or scissors on the lateral tissues may be requisite. When it is accomplished, the olecranon fragment is turned down into position and secured there by a wire or plate; if by the former a drill-hole has been made in it before section of the bone. Several sutures are used in the lateral expansions of the triceps tendon, the skin edges iodined and coapted.

In four days a single passive motion of flexion and extension is made and again at the end of the week; a splint is necessary only if there be much pain after the operation.

The result in the case mentioned, that of a healthy middle-aged woman admitted under my care at the Melbourne Hospital, though not perfect was excellent. The disability beforehand was very great and no traction had any effect upon the position of the bones. It was only at operation that one could realize what a solid mass preventing replacement the new tissue provided. The maxim learnt was that traction could only do harm and had no chance of consummating reduction.

### NAPHTHALENE FOR THE DESTRUCTION OF MOSQUITOS IN COVERED CISTERNS AND WELLS.

BY A. W. BACOT, F.E.S.,  
ENTOMOLOGIST TO THE LISTER INSTITUTE.

WHILE the following experiments are admittedly of a slight and tentative character, the results appear of sufficient general interest and importance to warrant their publication, in the hope that workers abroad, where experiments on a practical scale are possible, may be induced to try naphthalene as a deterrent to the breeding of mosquitos. For any exposed water surface oil as at present used would certainly be more effective, but in such windless situations as wells and covered cisterns naphthalene has an obvious advantage owing to its slow evaporation and the fact that the vapour is fatal to the adults, which are apt to seek cover in such situations.

Flake naphthalene sprinkled on the water surface as used in these experiments imparts a slight flavour to the water; but if no contact takes place, and it is suspended above the water surface, this defect is obviated. Lack of opportunity to continue the experiments has prevented my thoroughly testing its effectiveness as a larvicide when used under these conditions, but I am of opinion that further experiments would yield a satisfactory method for its application.

The experiments with the adult insects, while they certainly point to the prevention of any breeding in closed cisterns, also afford hope that such species as *Stegomyia fasciata* might be prevented from taking up their quarters in the quiet nooks and corners within doors that they are stated to seek out for tenancy.

#### Experiments with Adult *Culex pipiens*.

Method.—Half-pint waxed-card cream jars of 330 c.cm. capacity were prepared by placing discs of wet blotting paper at the bottom; on this the flake naphthalene was scattered; the mosquitos were introduced and the jars, covered with mosquito netting, placed on the laboratory bench. The temperature during the trials was about 63° to 66° F.

No. 1.—Ten adult *Culex pipiens* put into each of two jars prepared as above; in one 1 gram of naphthalene was scattered (1 in 330).

#### Control:

1½ hrs. ...	...	...	...	All living.
9 hrs. ...	...	...	...	All living.
20 hrs. ...	...	...	...	All living.
68 hrs. ...	...	...	...	2 dead.

#### Test Jar:

1½ hrs. ...	...	...	...	8 dead or stupefied.
5 hrs. ...	...	...	...	9 "
20 hrs. ...	...	...	...	All dead or stupefied.

No. 2.—In the second test difficulty was experienced in getting equal numbers into each jar, and tests were made with 0.5 gram, 0.2 gram, 0.1 gram.

	Control.	Using 0.5 gram = 1 in 660.	Using 0.2 gram = 1 in 1,650.	Using 0.1 gram = 1 in 3,300.
2 hrs. ...	All living	3 down; 4 living	All living	All living
3 hrs. ...	All living	4 down; 3 living	All living	1 dead
17 hrs. ...	All living	All dead	All dead or dying	All dead or dying
42 hrs. ...	All living	—	—	—
66 hrs. ...	1 dead; 6 living	—	—	—

#### No. 3.

	Control.	Using 0.05 gram = 1 in 6,600.	Using 0.02 gram = 1 in 16,500.	Using 0.01 gram = 1 in 33,000.
18 hrs. ...	All living	All dead	All down; 3 capable of feeble movement	1 dead; 3 down, but capable of feeble movement
43 hrs. ...	All living	—	—	—
63 hrs. ...	All living	—	—	—

#### Experiments with Larvae.

Method.—Into each of two square-bottomed troughs, having a surface area of 72½ in. (462 cm.), 4 litres of strained rain water was poured.

1. 100 active larvae (86 in penultimate and 14 in final larval instar) were then added.

On the surface of one 1 gram of flake naphthalene was added (1 in 462 surface area). Both troughs were covered with mosquito netting stretching over a wooden frame that raised the walls of the receptacles to 6 in. above the water surface. Both troughs were then placed on the laboratory bench close to the window. Temperature from 65° to 67° F. Within twenty-four hours all the larvae were dead in the trough which had the naphthalene scattered in it. Result, all killed. None were dead in the control trough, and the larvae developed satisfactorily.

2. The experiment was repeated with 90 small and 10 large larvae in each jar, only 0.5 gram of naphthalene being used—1 in 924 surface area. Temperature 60° F. After twenty-four hours only a few of the large larvae remained active. After twenty-seven hours all were dead in the test trough. Result, all killed. The larvae in the control were all living and most of them developed to the pupa stage.

3. The experiment was again repeated with 16 large and 84 small larvae in each trough, only 0.2 gram of naphthalene being used—1 in 310 surface area. Temperature 60° to 65° F. After twenty hours a large number had ceased to move in the test trough, but a few survived after seventy-two hours, when the naphthalene had all evaporated. Result, all the small and some of the large larvae killed—10 or 12 per cent. survived.

Pure naphthalene can be obtained from wholesale chemists for 3d. per lb. for quantities of 14 lb. or over. In bulk it may be obtained direct from the gas companies.

### Memoranda: MEDICAL, SURGICAL, OBSTETRICAL.

#### THE ETIOLOGY OF TYPHUS FEVER.

(Preliminary Note.)

We wish briefly to record the results of our examination of the blood and urine in 25 cases of typhus fever during a recent outbreak in Belfast, as well as of the cerebro-spinal fluid.

The urines, many of which were catheter specimens collected by a special method to exclude air contamination, were examined when fresh, and also after incubation for twelve hours. In all of them we found before the crisis a minute organism which we believe has not yet been described. It was also found in the lysed deposit of the fresh blood taken by venupuncture before the crisis, in the cerebro-spinal fluid, and again in the fresh urine of five bonnet monkeys in whom after the lapse of a well-marked incubation period we had induced a continued fever by inoculation of human typhus blood collected before the crisis. It disappeared from the urine of the injected monkeys after their fever had subsided.

The organism in question appears to be pleomorphic, being cocco-bacillary in form, and we shall in future refer to it as a cocco-bacillus. In fresh specimens it varies between 0.25 μ and 0.6 μ in its greatest diameter, and in its smaller forms passes through carefully tested Berkefeld filters. It is both Gram-positive and Gram-negative in the

same preparations. The smallest forms are almost impossible to recognize with the ordinary  $1/12$  oil immersion lens, but are well seen with a 1.5 mm. apochromatic.

We also find in the fresh blood and urine of both man and monkeys when infected, as well as in their incubated blood and urine, an exactly similar, though much larger, pleomorphic organism, which is also cocco-bacillary. This grows well on the ordinary laboratory media, and appears, in its different phases, to be identical with the large coccal and bacillary organisms individually and independently described by Dubieff and Bruhl, by Wilson of Belfast (who recognized their secondary importance), by Fuerth, by Müller, by Marcus Rabenowitsch, by Predtjetschensky, and by Plotz. On injection of these organisms into monkeys we could produce no fever or other pathogenic effects.

We wish to express our cordial thanks to Sir Thomas Stafford, Bart., who as Medical Commissioner of the Local Government Board in Dublin kindly invited our investigations, and put us into touch with Dr. O'Brien, Local Government Inspector in Belfast. To the latter and to Dr. G. Robb, Medical Superintendent of the Fever Hospital at Purdysburn, as well as to Dr. W. J. Wilson, Queen's University, and to Professor Symmers, Professor of Pathology, we wish to express our gratitude for their generous help and advice. Full details of the morphology, cultural characteristics, serological, inoculation, and sugar reactions of the cocco-bacillus, which is the subject of this note, will be published shortly.

E. C. HORT.  
W. W. INGRAM.

The Lister Institute  
(The Constance Trotter Researches).

#### ANTE-PARTUM HAEMORRHAGE.

Mrs. F., aged 29, 4-para, a thin, anaemic woman, seven months pregnant, had been working rather hard cleaning and lifting during April 11th. She suddenly felt "something snap," and found she had a severe loss. She sent for the midwife, who immediately sent for me. I arrived about 10 p.m., to find the woman in bed fairly comfortable. She had had rather severe haemorrhage, and liquor amnii also had escaped. Everything appeared normal; the vertex was felt, the os was the size of a shilling, and there was no sign of placenta. I enjoined rest and watching. On visiting her next morning, I found she had just had another flooding. She was now obviously in labour, but pains were very weak and there was a loss with each; the os was the size of a florin.

As waiting appeared risky, I decided to deliver at once. My neighbour, Dr. Galletly of Northwold, gave an anaesthetic. I had no difficulty in dilating the os with my fingers, and turning was quite easy. There was smart haemorrhage after the child was born, and I therefore proceeded to remove the placenta. This was nearly torn through at the upper part, leaving a piece attached to the fundus. This was peeled off with some difficulty and the whole removed. The uterus contracted well, and the woman made an excellent recovery, considering the severe flooding she had had, only requiring quinine for the headache usual in such cases.

It was a matter for congratulation that the membranes ruptured when haemorrhage took place, otherwise the case might have had a very different aspect and termination.

E. G. ARCHER, M.R.C.S., L.S.A.

Feltwell, Brandon, Norfolk.

#### CONGENITAL SYPHILIS TREATED BY NEO-SALVARSAN.

THE patient was a child, aged 13 years, one of a family of four children. The father had had syphilis. The mother had had no miscarriages; all the other children were healthy. The patient at the age of 7 years lost her sight owing to interstitial keratitis. She was treated at a hospital, and recovered after six months. She is now able to see very well. Both legs became ulcerated at this time, and the condition grew much worse until eight months ago, when both tibiae were exposed and eroded. The patient was treated from that date with mercury and potassium iodide and by fomentations locally. The con-

dition improved. On May 1st she was given an injection of neo-salvarsan and two more were given within a fortnight. On June 23rd both legs had almost completely healed, and the child's health was much improved.

Gravesend.

F. M. HUGHES, M.R.C.S., L.R.C.P.

## British Medical Association.

#### CLINICAL AND SCIENTIFIC PROCEEDINGS.

##### NORTH LANCASHIRE AND SOUTH WESTMORLAND BRANCH.

At the annual meeting of the Branch, held at Lancaster, on June 24th, Mr. A. S. BARLING, the new President, opened a discussion on operations for the cure of hernia. He said that from the very birth of surgery these operations had been performed, but for present purposes it was only necessary to go back to the time of Zutzer, who in 1838 introduced a plug of the scrotum into the canal. In 1861 John Wood, of King's College, brought to notice a new method. He reduced the hernia, and then by means of a wire applied in a particular way, hauled up the sac into the canal and fixed it there. This was the first operation to give anything like a good result, and was the means of many cures. It held its place for many years as the standard treatment. So far surgeons had acted on the principle that a plug should be formed in the canal. Wood (of Shrewsbury) made one of the first steps in the right direction. He invaginated the unopened sac within the abdomen and fixed it there. This was just prior to the great revolution in surgery. Down to this time operators were crippled by their fear of wounding the peritoneum. These fears were shortly to be banished, and in 1871 Lister excised the sac, refreshed the edges of the wound, and closed it with catgut stitches. This was often erroneously referred to as Banks's operation. The work of Czerny, Risel, Annandale, Ball, and McBurney was reviewed, and then the more modern operations of Macewen, Barker, Bassini, Halstead, Kocher, and O'Hara were taken in detail and their merits contrasted. The recent advocacy of the use of silver filigree was criticized, and it was pointed out that it had been used by Phelps so long ago as 1895. The speaker concluded by saying that several of the later operations were quite satisfactory, but expressed his own preference for those in which the sac is severed above its neck and the stump fixed well away from the internal ring. That which he usually adopted was Bassini's with the addition of O'Hara's stitch.

*Exhibits.*—Dr. COUPLAND gave a very interesting demonstration from slides, specimens, and dissections. He began by demonstrating the atrio-ventricular band of His in the heart of a calf, and explained its importance in heart-block, mentioning that recent work had shown the presence of nerve fibrils, so that its real function was still in dispute. His next subject was an exhibit of specimens, photographs, etc., of the *Simulium* fly, which it had been suggested was connected with the occurrence of pellagra. Specimens of *Simulium venustum*, kindly sent by Professor Howard (U.S.A.), were among those shown. A mounted slide of the biting field fly, *Stomoxys calcitrans*, drew attention to the more recent opinion that it is really the carrier of the pellagra infection. Chromatolysin in cells of the spinal cord was illustrated from a fatal case of pellagra, and the Golgi method of displacing nerve structure was shown in the brain of a kitten. A racy discourse followed on the subject of fleas, attention being drawn to the plague flea, and the position of hairs on the leg, which character differentiates the human flea from all others. Some remarks on two slides illustrating *Spirochaeta pallida* were followed by specimens of the beetle *Xestobium tessalatum*, responsible for serious damage to the timber in the Westminster Hall. Members regretted that such an interesting amount of material had to be disposed of in something like fifteen minutes. Dr. ALEXANDER, the PRESIDENT, the TREASURER, and the HONORARY SECRETARY showed cases, specimens, and radiograms.

this all-important subject. It might be well if our research scholars had their attention directed to the subject, and gave us the result of their experiments and observations on themselves, for, unless under lock and key, no patient can be trusted when food is the subject of study.—I am, etc.,

Denholm, Hawick, June 24th.

JOHN HADDON, M.D.

#### THE RESPONSIBILITY OF THE SUICIDE.

SIR,—What on earth is one to do with an antagonist like Dr. Leitch? He first paralyses me with an extravagant compliment and then dances round me, brandishing his sporran, or whatever may be the Scottish equivalent of a shillelagh, and invites me to come on. As Dr. Johnson says, Such treatment I did not expect, for I never had a complimentary antagonist before; and, as Mrs. Malaprop says, I am perfectly putrified. Sir, I admit everything. I admit that Dr. Leitch's expectation that I should sooner or later refer to the case of Captain Oates makes that case inapplicable to my argument. I admit that suicide is not suicide if you call it giving life and not taking it. I might have referred to the case of Curtius, but that Dr. Leitch has no doubt expected the reference and so deprived the example of its force. I am powerless, and have no alternative but to yield myself, rescue or no rescue. It is another Bannockburn. *Vae victo!*—I am, etc.,

Parkstone, June 29th.

CHAS. A. MERCIER.

## Universities and Colleges.

### UNIVERSITY OF OXFORD.

#### Degrees.

THE following degrees have been conferred:

D.M.—H. H. Carleton.

B.M. AND B.CH.—E. W. N. Hophouse.

#### Examinations.

The following candidates have been approved at the examinations indicated:

FIRST M.B. (*Organic Chemistry*).—J. P. B. Harold, P. S. Houghton, J. E. B. Morton, M. E. Shaw, G. K. Stone, W. F. Skaita. (*Human Anatomy and Human Physiology*).—C. W. W. Armstrong, G. Cranston, J. L. Dunstan, C. K. J. Hamilton, J. F. Haines, R. M. Humphries, R. W. Lush, B. G. von B. Mellé, D. H. Skinner, A. E. Thomas, K. F. D. Waters, C. D. Wood.

SECOND M.B. (*Materia Medica and Pharmacology*).—H. E. A. Boldero, C. J. A. Buckell, R. W. J. A. Cushing, S. C. Dyke, H. S. Jeffries, C. P. Nells, C. P. Symonds. (*Pathology*).—A. C. Ballance, H. E. A. Bamber, J. D. Balt, H. E. A. Boldero, L. S. Brown, C. J. A. Buckell, C. H. Carlton, F. B. Chavasse, G. Cranston, A. W. Dennis, S. C. Dyke, K. M. Dyott, O. H. Gotch, C. H. L. Harper, O. G. Parry-Jones, O. B. Pratt, G. P. Selby, S. W. F. Underhill, H. St. H. Vertue, A. L. Watts, H. A. B. Whitelocke.

SECOND M.B. (*Forensic Medicine and Public Health*).—C. H. Carlton, V. T. Ellwood, F. C. Gladstone, C. H. L. Harper, C. W. B. Littlejohn, G. A. Maling, E. E. Mather, O. G. Parry-Jones, M. O. Raven, G. S. Robison, G. P. Selby.

SECOND M.B. (*Medicine, Surgery, and Midwifery*).—J. C. Davies, C. Dean, A. W. Dennis, C. W. B. Littlejohn, E. E. Mather, H. M. Pope, M. O. Raven, G. P. Selby, A. B. Thompson.

D.P.H. (*Part II*).—F. S. Carson, G. M. Cogwell, H. B. Gibbins, W. H. Hewlett, J. Inkster, C. F. B. Kebbell, F. G. H. Martin, L. M. Mayers, R. S. Miller, H. W. Parnis, W. R. S. Roberts, A. H. Savage. (*Part II*).—N. A. Coward, H. B. Gibbins, W. Gilmour, J. Inkster, F. J. H. Martin, J. Powell, E. L. N. Rhodes, W. R. S. Roberts, A. H. Savage.

### UNIVERSITY OF CAMBRIDGE.

THE following candidates have been approved at the examinations indicated:

THIRD M.B. (*Part II: Medicine, Pathology, and Pharmacology*).—S. G. Askey, D. C. G. Ballingall, H. A. Bell, W. G. Bigger, P. R. Boswell, E. C. Bradford, H. P. Dawson, E. L. Dobson, A. T. Edwards, W. B. Gordon, H. Hartridge, F. G. Lescher, R. W. Meller, A. B. Pavey-Smith, D. V. Pickering, S. G. Platts, L. C. Rivett, L. E. S. Sharp, A. C. S. Smith, P. Stocks, C. R. A. Thacker.

### UNIVERSITY OF LONDON.

#### LONDON (ROYAL FREE HOSPITAL) SCHOOL OF MEDICINE FOR WOMEN.

SIR WILMOT HERRINGHAM, Vice-Chancellor of the University of London, distributed the prizes on Monday, June 29th. Mrs. Garrett-Anderson, President of the School, presided.

Mr. Acland, Chairman of Council, in opening the proceedings, said that the school had sustained a severe loss through the death of Miss Cox, who had been Dean for ten years; but that her place had been filled by one well worthy to succeed her. It was perhaps only natural that the Council should consider itself the body which kept the school going; and if there was one member of that body who worked harder than the others

it was Miss Brooks, and he was glad to have the opportunity of thanking her for her devotion to the school. The past year had been very successful, and the future looked equally promising. The school at the present moment was developing very fast. A new department for pharmacology was about to be opened; and the school intended to become the largest school of medicine in the University of London.

Sir Wilmot Herringham, in a short address, said that nowadays one heard a great deal about the advance of medicine, but the most remarkable change he had noticed during the course of nearly forty years' practice was the change in the position of the doctors themselves. Not only was the social position of the ordinary medical practitioner greatly improved, but there had been an immense accession of the influence of medicine in the State. No other profession exercised such an immense legitimate influence in legislation as the medical profession. Besides the change in social position, there was a large increase in the number of public employments open to medical men. No one could foretell what would be the outcome of the Insurance Act, but one result of it had been to make doctors, in a certain sense, public officials. There were already a vast number of posts under Government, and there would probably be more, and this fact alone would effect a change in the position of the private practitioner. The increase of specialization had dislocated medicine still further; and it was becoming, particularly in London, as necessary to organize private practice as that in the hospitals. For instance, the present system of nursing institutions was a disgrace to London, and he hoped the time would come when there would be homes where private patients would receive the same amount of care and attention that hospital patients did now. The practice of medicine was very difficult, not so much on the intellectual as on what might be called the emotional side. The successful doctor needed great powers of criticism and great powers of faith, and it was extremely difficult to combine the two. He had to act continually as a sort of magic man in order that his patient might trust him so as to reap the benefit that accrued from faith; and the hardest part of a doctor's work was to make others trust him when he distrusted himself.

#### UNIVERSITY COLLEGE.

The Committee will shortly proceed to appoint a lecturer and demonstrator in anatomy at a salary of £350. Applications must reach the Secretary of University College on or before July 11th.

### UNIVERSITY OF DURHAM.

#### Degrees.

THE following were among the degrees conferred at a convocation on June 23rd:

M.D.—J. K. J. Haworth, Eva Lumb, R. S. Renton.

M.D. (*for Practitioners of Fifteen Years' Standing*).—W. O. Beddard, W. H. Date, J. Flynn, A. J. Hesterlow, W. M. M. Jackson, J. R. McFerran, E. Maynard, J. J. S. Pillay.

M.S.—J. J. Brown, J. C. Young.

M.B.—C. Armstrong, I. G. Cummings, H. H. Elliot, C. N. Gover, F. W. Harlow, M. H. de J. Harper, C. Jacobs, H. V. Leigh, F. Metcalfe, E. K. Ryan, H. J. Shanley, K. I. S. Smith, J. C. Spence.

B.S.—C. Armstrong, I. G. Cummings, H. H. Elliot, I. D. Evans, C. N. Gover, F. W. Harlow, M. H. de J. Harper, C. Jacobs, H. V. Leigh, F. Metcalfe, H. J. Shanley, K. I. S. Smith, J. C. Spence.

B.Hy.—A. H. Wear, S. Worthington.

The following candidates have been approved at the examinations indicated:

SECOND M.B. (*Anatomy and Physiology*).—\*W. A. Hewitson, +H. M. Leete, P. V. Anderson, W. Duncan, E. C. Dunlop, M. J. Erdberg, C. G. Irwin, M. C. Joynt, Freda Newman, G. F. Philip, H. I. Sterne Howitt.

THIRD M.B. (*All Subjects*).—†H. Evers, †J. A. Charles, †A. E. Raine, J. F. C. Braine, J. Brunwell, H. C. Broadhurst, G. A. Clark, H. G. B. Dove, J. Horsley, H. G. Sparrow. (*Materia Medica, Pharmacology and Pharmacy, Public Health, Medical Jurisprudence*).—Mary R. Campbell, R. A. Hooper, N. A. Martin, C. D. Newman, W. O. F. Sinclair, A. C. Taylor, R. Welch. (*Pathology and Elementary Bacteriology*).—L. B. Frere, H. K. Graham-Hodgson, J. D. Johnson, D. O. Richards, A. Smirthwaite.

FIRST M.B. (*All Subjects*).—\*W. E. M. Wardill, M. W. A. Sandoe, H. Toma. (*Chemistry and Physics*).—J. N. Alexander, A. Angus, D. G. P. Bell, E. F. H. Bell, J. A. G. Brewis, E. D. Charles, H. C. Clifford-Smith, W. A. Freedman, G. A. M. Hall, A. T. Harrison, Mary K. Henegeen, R. A. Hickley, G. E. Hyden, W. A. Jaques, R. T. E. Naismith, C. B. Phillips, G. Reed, F. W. Sopwith, L. W. Studdy. (*Elementary Anatomy and Biology*).—E. G. Anderson, I. Girgis, S. E. Goulstone, H. Kamel, R. G. Melrose, G. G. Robertson, T. W. Robertson, G. H. Shanley, A. W. Wilkinson.

\* First-class honours.

+ Second-class honours.

### UNIVERSITY OF EDINBURGH.

THE following candidates have been approved at the examinations indicated:

FINAL M.B., CH.B.—R. H. Alexander, C. Atkinson, Mary A. H. Baird, R. G. Bannerman, Rachel M. Barclay, \*R. C. L. Batchelor, H. W. Bell, J. G. Bell, J. W. Bennett, S. E. Bethell, J. Biggam, H. B. Binks, W. Bird, E. J. Blair, A. B. Brook, H. P. Caithness, A. Cameron, R. E. Cameron, H. E. Collier, A. N. Craig, J. W. Darling, T. M. Davie, W. M. Dickson, C. L. Doid, C. E. Dukes, G. K. Edwards, J. D. Evans, F. B. Eykyn, S. Fenwick, T. C. Findlater, E. Fowler, H. R. Friedrichs, T. A. Fuller, R. E. Gibson, D. J. Glen, A. S. Glynn, H. P. T. Haddow, A. R. Hamilton, N. E. M. H. Hay, J. J. Healy, G. F. P. Heathcote.

Gertrude Herzfeld, J. Hogarth, K. Husain, Florence E. Inglis, B. O. Jarrette, C. P. M. Joubert, P. W. J. Keet, C. G. Lambie, S. J. A. Laubscher, L. Levy, \*P. MacCallum, T. M'Fetridge, R. M. Mackay, E. F. W. Mackenzie, E. L. Mackenzie, J. J. R. Mackenzie, I. K. F. MacLeod, Jean M. M'Inn, F. G. Macnaughton, E. Mansfield, V. H. Mason, D. J. Max, B. Mendelsohn, G. Millar, R. W. Miller, E. M. Molesworth, G. T. Mowat, R. M'I. Muir, W. Murdoch, J. C. Neil, H. S. Palmer, C. C. Philip, G. S. Pirie, R. Power, \*J. M. Pringle, M. Rezakhan, H. A. Rippiner, R. L. Ritchie, H. C. Robins, C. Sand, H. K. Shaw, B. Shires, H. J. Simson, H. C. Sinderson, T. W. Smart, A. H. D. Smith, D. M. Smith, A. S. Taylor, J. S. Taylor, \*A. B. Theron, A. R. Thomson, R. O. C. Thomson, R. Thorp, F. E. Tilleyard, P. Toit, Janet P. Walton, C. H. Wan, H. D. Welply, H. P. W. White, G. S. Williamson, D. G. Wishart, E. W. N. Wooler, P. C. V. Woudberg, B. E. Wright, G. D. Yates, J. B. Young.

\* Passed with distinction.

### UNIVERSITY OF GLASGOW.

#### SUMMER GRADUATION.

THE summer graduation ceremony took place on June 22nd in the Bute Hall. Principal Sir Donald MacAlister presided, and this being his first appearance at a graduation ceremony since his recent severe illness, he received a very cordial greeting. The proceedings were of the usual noisy kind, and after the degrees had been conferred in dumbshow, the Principal handed his remarks on the benefactions during the past year to the Press. Among the notable gifts mentioned were the bequest of £5,000 from the late Mr. Weir of Kildonan for the purpose of providing an additional assistant to the Professor of *Materia Medica*; the bequest of £25,000 by the late Dr. Gavin P. Tennant for the Faculty of Medicine; and the appropriation by the Carnegie Trust of £45,000 for buildings for the accommodation of zoology and arts.

#### COMMEMORATION.

On June 23rd the University of Glasgow commemorated its pious founders and its benefactors. The opening religious service was followed by a commemoration address on Lord Lister, delivered by Sir Hector C. Cameron. This was followed by an expression of thanks to the Orator by the Chancellor (Lord Rosebery); then came the graduation ceremony, and finally, a banquet in the evening.

### UNIVERSITY OF ST. ANDREWS.

THE following candidates have been approved in the subjects indicated:

**FIRST M.B., CH.B. (Botany).**—D. R. Cameron, R. T. Cameron, J. C. Coutts, J. Farquharson, J. Ferguson, Miss J. H. Hodge, J. C. McGregor, N. MacVicar, A. H. Nearne, J. K. T. Mills, L. G. Morrison, Miss J. M. Orkney, W. G. Robertson, G. R. Ross, J. Shirlaw, J. N. D. Smith, W. Thomson.

**SECOND M.B., CH.B. (Physiology).**—Annie R. Campbell, F. J. Charlton, Mary J. S. Cuthbert, Kathleen I. David, J. Irvine, J. Kinnear, Mokham C. Madhok, Puthoor V. Paul, Margaret W. Shirlaw, G. Verghese. (*Anatomy*).—Sheila Bridgeford, Kathleen I. David, Mary M. Ferguson, D. Fisher, J. Irvine, J. Kinnear, Allister M. MacGillivray, Puthoor V. Paul, Margaret W. Shirlaw, W. P. Starforth, G. Verghese.

**THIRD M.B., CH.B. (Materia Medica).**—Pam N. Bhandari, F. Braid, T. P. Buist, N. B. B. Fleming, Elsie L. Kyle, Flora M. MacDonald, M. MacGillivray, Mokham C. Madhok, J. L. Paton, Alice Rattray, D. Roger, A. A. B. Scott, J. M. Stalker. (*Medical Jurisprudence and Public Health*).—Margaret A. Alexander, Agnes W. Andrew, Mohan L. Berry, D. Dempster, T. Esterman, Margaret Fairlie, Louise E. Fraser, G. M. Grant, W. S. King, C. B. MacDonald, C. W. Morrison, D. H. Murray, Alistair G. Stevenson, J. H. Taube. (*Pathology*).—F. Braid, T. P. Buist, A. C. Cassej, T. Esterman, N. B. B. Fleming, Elsie L. Kyle, C. B. MacDonald, M. MacGillivray, Jeannette M. Mansie, J. L. Paton, D. Roger, A. A. B. Scott, J. M. Stalker, W. M. D. S. Stretell.

**FINAL.**—P. E. B. Barrow, R. H. B. Barrow, J. R. Caldwell, Mabel G. Cowper, A. C. Craighead, Mary L. David, S. W. Rintoul, D. H. Scott, J. Taylor, R. A. Quinn.

**D.P.H. (Part I).**—G. N. Anderson, J. C. Robertson. (*Part II*).—G. M. MacGillivray, D. T. Munro, D. J. Peebles.

## Obituary.

### ALDERMAN SIR HENRY WM. NEWTON, NEWCASTLE-UPON-TYNE.

AFTER an illness of brief duration, although to all who were in the habit of casually meeting him it was apparent that he was the subject of an increasing anaemia, Sir Henry Newton succumbed on June 21st to an attack of bronchitis, during which he was attended by Sir Thomas Oliver and Professor Beattie. Although Sir Henry had reached his seventy-second year, his physique and energy until within the last few months were those of a man many years his junior. He was less known in the field of medicine proper than in that of public health, especially from the municipal and administrative points of view. The son of a Newcastle surgeon, Sir Henry Newton was closely identified with all the recent progressive movements of his native city. He received his medical education in the College of Medicine in Newcastle, and qualified in 1863.

At a comparatively early age he evinced a taste and ability for municipal work. Devoting his life to public service, he never forgot that foremost above all things he was a member of the medical profession, and that its claims had the prior call upon his attention. A strong man in the public sense of the term, an admirable debater, and gifted with oratorical powers of no mean order, Sir Henry rapidly rose in the town council of which he had become a member in 1866. In 1877-8 he filled the office of sheriff, and in 1883 he was elected mayor. His year of office as chief magistrate was remarkable, for in August, 1884, the Prince and Princess of Wales visited Newcastle-upon-Tyne to open the Northumberland Docks, to open Jesmond Dene to the public, and to open also the free library of which Sir Henry Newton was chairman. Many of us remember all of these functions were performed in a most successful manner, and in the following year he became an alderman. In 1901-2—the coronation year of the late King Edward—Sir Henry again occupied the civic chair.

In recognition of his services in connexion with the Public Libraries Committee Sir Henry was presented with his portrait in oils. To everything which made for improving the health and social position of the masses he gave his adherence and assistance. For more than thirty years he was Chairman of the Town Moor and Parks Committee; he was since its opening chairman of the Laing Art Gallery and chairman also of the School of Domestic Economy, but the one position which he occupied with greatest distinction, and in which the value of his work will be seen and felt for many years to come, was that of chairman of the Sanitary Committee. In conjunction with Dr. Henry E. Armstrong, late Medical Officer of Health for the city, much pioneer work in public health work was done. For his services Sir Henry received the freedom of the city in 1906, and in 1909 the honour of knighthood from King Edward.

By his death the Corporation of Newcastle-upon-Tyne has lost its oldest member. Sir Henry may not always have seen eye to eye with his colleagues in the Council, but it could never be said of him that he played for popularity.

Suitable magisterial reference to the death of the late alderman was made by Sir George Hare Philipson, Chairman of the Bench.

The funeral was attended by the Lord Mayor of Newcastle and by the city aldermen and councillors, by representatives of the various public bodies with which Sir Henry had been identified, and by large numbers of the public.

To Lady Newton, his second wife, and to the sons and daughters of both families, much sympathy has been expressed in various ways.

### THE LATE DR. NEIL OF THE WARNEFORD.

DR. CHAS. A. MERCIER writes: Permit me to lay upon the grave of my friend Dr. Neil a wreath of respect and affection. He belonged to a nation among which I am privileged to count many intimate friends, and he had a full measure of the quality—humour, which we southrons pretend they do not possess, besides others that we cannot pretend to deny to them—thoroughness, sound sense, business ability, and professional skill. I have sent many patients to his care, have often visited them at the Warneford, and can speak from personal knowledge of his unwearied kindness to them, often reciprocated by suspicion and abuse, and of the constant solicitude with which he worked and hoped, even in very unpromising cases. His crowning merit was that he never attempted to divert the purpose of the founder of the Warneford, to afford treatment and care on the most moderate terms—in a large proportion of his cases on charitable terms—to patients of the educated classes. He never angled for patients who could pay high fees, nor did he attempt to substitute an impressive but uncomfortable magnificence for the solid homeliness and comfort of the Warneford. When we think of the number of patients that came under his care, of the atmosphere of tranquillity and goodwill that he maintained around him, and of the help that so many found in reliance on his strong character and sound judgement, we can form some estimate of the good that can be done in a quiet and unobtrusive life. He found his appropriate field of activity; he laboured in it

with unremitting diligence; he won the respect and regard of all around him; his life, if it was unambitious, was useful, fruitful, and happy. Who could wish more to be said of himself?

## Medico-Legal.

### ALTERATION OF AGREEMENTS.

#### ABSENCE OF DUE NOTICE.

THE action by Dr. Salter against the London Insurance Committee, which was decided in his favour, as was fully reported last week, page 1437, was carried out on his behalf by the Medical Defence Union. Messrs. Hempsons, the solicitors to the Union, received an intimation from the London Insurance Committee, asking them not to proceed upon the rule by issuing a writ, and stating that the Committee accepted the position, and would restore Dr. Salter's name to the panel at once. Application was accordingly made to the Divisional Court on July 1st for an order for costs as against the Committee, and this was granted. Counsel for the Committee stated that he was instructed to say that the Committee was very glad to reinstate Dr. Salter, but, as an important question of principle was involved, the Committee desired to have it settled by the Court.

### PROCEEDINGS UNDER THE APOTHECARIES ACT, 1815.

At the Bow County Court on June 29th the Society of Apothecaries recovered a penalty of £20 against John Charles Purdie, described as a medical herbalist, of 28, Roscoe Street, Canning Town, for a breach of the Apothecaries Act, 1815, in that he had acted and practised as an apothecary or medical practitioner in attending and medically treating the infant daughter of Arthur Thompson, of 21, Scott Street, Canning Town, whose death in January last was the subject of an inquest conducted by the local coroner. It appeared from the evidence that the child had become ill on Tuesday, January 27th, and was taken by her mother to the defendant's shop, who examined her and said that she was suffering from pneumonia. He further gave the mother medicine for the child and oil to rub her chest with. He was again summoned by the mother to see the child on the same afternoon, and then administered further medicine, also using the stethoscope and taking the child's temperature with a clinical thermometer. The defendant attended the child further on the Wednesday, Thursday, and Friday, on the evening of which day the child died. The defendant was paid the sum of 2s. in respect of his medicine and attendance. It appeared from the medical evidence given at the inquest that the child actually died of meningitis. At the hearing of the case the defendant's counsel endeavoured to argue that he was protected by a statute of Henry VIII, sometimes called the Herbalists Act. The county court judge held that the statute was inapplicable, and that there had been a clear breach of Section 20 of the Apothecaries Act, 1815, and he consequently gave judgement for the Society, with costs on the higher scale.

### ALLEGED PERSONATION.

AT the Hampshire Assizes, before Mr. Justice Kennedy, a man aged 60, charged under the name of Hugh Munro McLeod Mackenzie, was convicted on a charge of feloniously, knowingly, and unlawfully giving a false death certificate. The case involved a charge of personation, and evidence was brought to show that the accused was not Hugh Munro McLeod Mackenzie whose name appeared on the *Medical Register*, and that this gentleman resided in South Africa. The accused had obtained the insertion of his name on the panel for Southampton. The prisoner, who was undefended, stated in his own defence that he was named Mackenzie, and a medical practitioner; he did not know Dr. Mackenzie, now in South Africa. The judge said that, judging by the photograph produced, it was hardly possible that the prisoner could have changed so much, and the evidence showed that the accused was not the man registered. After the verdict had been returned it was stated that the accused had formerly practised at Portsmouth, and the allegation that he was personating Dr. Mackenzie residing in South Africa had been brought to the notice of the General Medical Council, but as the accused was then extremely ill no proceedings were taken. The prisoner offered to resign from the panel, but the judge stated that his name would be struck off, and that as he was very ill he would be kept in prison for a month.

### DAMAGES AGAINST AN EXTRACTOR OF TEETH.

IN the Rochdale County Court, on June 26th, an action was brought by a young man employed by the corporation against Ada Berry, trading as R. H. Berry, extractor of teeth, for £100 in respect of the alleged negligent extraction of a tooth. The patient was subsequently attended by Dr. Bateman, who, in consequence of recurrent bleeding, advised his admission to the infirmary, where he was treated for a month.

The defendant, who was not legally represented, said, according to the report in the *Manchester Guardian*, that she was taught the business of an extractor of teeth by her brother, who, like herself, was not a qualified dentist. She used a syringe to insert into the gums a preparation she obtained

from a chemist, and said it was not possible to insert too much of the fluid. She also gave a powder for the plaintiff's use, and she admitted that she did not know the contents of the powder.

His Honour, in giving judgement, said there had been neglect in the administration of the drug, and that neglect had caused the plaintiff terrible suffering. He gave judgement for £85 and costs.

## Medical News.

THE Robert Koch Foundation for combating tuberculosis offers a prize for the best research on the value of various kinds of rays (sun, Roentgen, radium, mesothorium) in the diagnosis and treatment of tuberculosis. The essays, which must be in German and typewritten, should be addressed to the Secretary, Herrn Geh. Sanitätsrat Professor Dr. Schwalbe (Berlin-Charlottenburg, Schlüterstr. 53), and should reach him before July 1st, 1915. Each essay should be authenticated by a motto corresponding to one contained in a separate envelope enclosing the author's name. The prize is of the value of £150. The successful essay will be included among the publications of the foundation, but the author will be allowed to publish a short abstract in the *Deutsche medizinische Wochenschrift*.

THE Cremation Society of England, in conjunction with the Blackpool and Fylde Cremation Society and the Manchester Crematorium, Ltd., is organizing an exhibit at the Health Exhibition to be held in connexion with the Congress of the Royal Sanitary Institute at Blackpool (July 4th to 11th). Photographs and plans of the various crematoriums and photographs showing the retentive nature of earth burial will be on view, together with a specimen of cremated ash. There will also be exhibited a working model of the Golder's Green apparatus, by which is demonstrated how cremation is effected by the agency of superheated air only in a retort quite separate from the actual furnace. Mr. G. A. Noble, Secretary, will represent the Cremation Society as delegate at the Congress, and will be in personal attendance at the exhibition to give information. Dr. P. J. R. Bucknill, of Blackpool, will read a paper on cremation, illustrated by diagrams and lantern slides.

THE Council of the Nightingale Fund proposes to offer every year to nurses who have obtained a certificate after three years' training in some recognized school a limited number of scholarships entitling the holders to a year's training at the Household and Social Science Department of King's College for Women in the University of London. The new buildings of this department, now in course of erection on Campden Hill, will contain laboratories in close proximity to the experimental kitchen and laundry, which form a portion of the hostel where the practical arts are taught. Every endeavour will be made to keep in view the object of the course, namely, to equip trained nurses to undertake the responsible administrative and social appointments they are likely to be called on to fill. The value of the scholarships will be adjusted to meet the tuition fees, to provide maintenance during the year, and to compensate in some degree for the salary the year's training will oblige the scholar to forego. The scheme is experimental, and its continuance must depend upon its success.

ON June 23rd Dr. Stovin, until lately Medical Officer of Health, Ilford, was entertained at supper by the members of the Ilford Medical Society. Dr. Ernest Watts, president, who was in the chair, spoke of the cordial relations which had always existed between the M.O.H. and the general practitioners in the district, and of their great appreciation of Dr. Stovin's services to the district. Dr. Carrell, speaking as the member of the society who had longest been in practice in Ilford, said that though differences of opinion had arisen, they had never disturbed the friendly relations between the profession and Dr. Stovin. The president then, on behalf of the society, presented Dr. Stovin with a silver salver, bearing a suitable inscription, and the signatures of thirty-six of his professional brethren in the district. Dr. Stovin, who on rising was warmly cheered, said that he felt deeply this fresh expression of the constant kindness and help he had received from all members of the society. He concluded by proposing the toast of the Ilford Medical Society, which was acknowledged by Dr. Drought. The company separated after the toast of the president had been received with enthusiasm.

THE usual monthly meeting of the Executive Committee of the Medical Sickness, Annuity, and Life Assurance Friendly Society was held at 429, Strand, on June 19th, when Dr. J. Brindley-James was in the chair. The claim account presented showed an improvement over that of

last year, and the proposals received in the first five months of this year constituted a record in the society's experience. The new combined sickness and endowment table with reduced premiums for the first five years has also proved popular with younger members of the profession. The votes for Epsom College were dealt with at this meeting, there being two candidates for Foundation Scholarships who are the sons of deceased members. The widow of a late member was also applying for a pensionership. The society subscribes £105 per annum to the College, and the votes are all used for the dependants of deceased members. During the past few years the sons of several members have been admitted to Epsom College as foundation scholars. Prospectus and all information can be obtained from Mr. Bertram Sutton, Secretary, Medical Sicknes and Accident Society, 33, Chancery Lane, London, W.C.

NEARLY every one who is accustomed to pass the greater part of the day away from home, particularly those whose occupations oblige them to spend much of that time going from place to place, has experienced the discomfort of defective or inadequate lavatory accommodation in public places. This want is not peculiar to any one town or district, but is felt in almost every crowded city, both at home and abroad. The New York Bureau of Public Health and Hygiene, realizing the importance of their cleanliness and good management not only for comfort, but also for health, has caused an inspection to be made of the public lavatories in every quarter of that city. The results of this investigation have been published by the Superintendent of the Bureau, Dr. Donald B. Armstrong, in a pamphlet called, *Comfort Stations in New York City*. The inspectors have evidently carried out their task with commendable thoroughness; and the defects in the New York public lavatory system are indicated with no sparing hand. The pamphlet is illustrated with diagrams and photographs, and contains suggestions which might be adopted with equal advantage on either side of the Atlantic.

THE January and February number of *Tumori*, published in Rome, leads off with an article by Izar and Patanè recording a series of complicated experiments devised to free the antigen, used in the meiostagmic reaction for malignant tumours, from all those substances, soluble in ether and methylic alcohol, which do not enter specifically into play in meiostagmic reactions. A second paper deals with synthetic antigens composed of fatty acids and protein substances. Then follows a long paper on a case of tumour of the hypophysis, with comments, sections, and a full bibliography. The next important communication is probably that of Bilancioni and Cipollone on endotheliomata; it contains a detailed account of 14 cases, drawings, and an extensive bibliography. Of the 14 cases, most occurred in young subjects of 8 to 25 years, and were situated for the most part in the nose; the tumours could be separated into two main groups, according to the predominance or otherwise of the fibrous tissue contained therein; a marked feature in all these tumours was the presence of migratory cells. The form of the actual cells of the tumour varied according to their point of origin, whether from the blood vessels or from the neoplastic parenchyma. It is considered that the latter cases mostly arise directly from the endothelial membrane of the blood vessels or lymphatics. From the clinical point of view these tumours are benign, of slow growth, for the most part single and with non-ulcerated surfaces, do not give rise to metastatic growths, and are chiefly of importance from the mechanical effects they may produce.

IN an interesting report on sleeping sickness in Northern Rhodesia to December, 1913, Dr. May, the principal medical officer, shows the extent to which the disease has been met with. *Glossina morsitans* transmitting human trypanosomiasis has been met with outside the confines of the present closed area, for example, by Dr. Ellacombe in the Serenje district to the east of Lake Bangweolo (September, 1912), by Dr. Kinghorn in the Mpika district (May, 1913), by Dr. Ward in the Ndola district (1912-13), and by Dr. MacKnight in the Luana Valley (September, 1913). In April, 1912, the Luangwa Sleeping Sickness Commission moved from Nawalia in the Luangwa Valley to Ngoa (Mpika district) on the Congo-Zambesi watershed with the object of determining what influence climatic conditions have on the transmission of the parasite by *G. morsitans*. Attempts to transmit the human trypanosome by means of *G. morsitans* at laboratory temperature on the Congo-Zambesi plateau during the cold season were invariably unsuccessful, in spite of the fact that 680 flies were used. The developmental cycle of *T. rhodesiense* in *G. morsitans* was found to be influenced in a marked degree by the temperature; high temperatures (75° to 85° F.) favoured

the development of the parasite, whilst low temperatures (60° to 70° F.) were unfavourable; the first portion of the developmental cycle could proceed at lower temperatures, but for its completion the higher temperatures were essential apparently. The relative humidity of the atmosphere had no influence on the development of the trypanosome in *G. morsitans*. The object with which this Commission was formed, namely, to establish the responsibility of *G. morsitans* as the carrier of human trypanosomiasis, having therefore been accomplished, the work of the Commission came to an end at Ngoa in August, 1912. Very great credit is due to Dr. Kinghorn and his co-workers, Drs. W. Yorke, A. F. Wallace, and Mr. Ll. Lloyd, for the rapidity and thoroughness with which this work was accomplished.

ONE effect of grafting of an ovary in woman appears to be swelling of the parts around the graft associated with pains, which last for three or four days. At the end of a few weeks the graft is, it appears, completely absorbed, and it seems that cessation of the catamenia is always associated with the shrinking of the graft. In a joint communication, Tuffier, Gery, and Vignes (*Annales de gynéc. et d'obstet.*, February 1914, p. 97) report the appearances in a graft in the body of a woman who, when 41 years of age, underwent subtotal hysterectomy for an enormous soft fibroid. Tuffier grafted one of the ovaries on to the subcutaneous cellular tissue. The usual phenomena, it is implied, occurred. The woman died two years and eight months later, and the graft appeared like a little white lozenge, half an inch in diameter, homogeneous, very hard, and firmly adherent to the surrounding connective tissue. Sections examined under the microscope presented all the appearances of complete sclerotic involution. Authorities do not seem to be agreed as to the merits and effects of grafting an ovary when unavoidably removed from its anatomical attachments in the course of an operation. Tuffier and Vignes published in the same number of the *Annales* an earlier report, which shows that absorption of the graft with cessation of ovarian functions is by no means constant; in one patient a graft was made when subtotal hysterectomy was performed, and a cystic tumour of the graft, as big as a hen's egg, was enucleated from the parietes three years later. The removal of both a woman's ovaries must never be reckoned a trifle, but it is not clear that grafting can neutralize the possible evils of a sudden premature and artificial menopause and that it may not be the cause of special evils as yet unrecognized.

A DINNER of the National Medical Union took place on Saturday, June 27th, at the Café Monico, London. Dr. Greenyer, of Brighton, presided, and about eighty members and guests (including ladies) were present. The toast of "The National Medical Union" was proposed by Dr. Playfair, of Edinburgh, who said that there ought to be no difficulty in obtaining the three or four thousand members necessary to place the union on a sound financial basis. The toast was acknowledged by Drs. Porter, Brassey Brierley, Greenyer, and Carswell. Dr. Porter, who represented the Edinburgh Medical Guild, one of the bodies affiliated to the National Medical Union, spoke earnestly on the subject of the liberty of the medical profession. Dr. Brassey Brierley gave an account of the origin of the National Medical Union, and said that it was necessary to uphold the dignity and honour of the profession by means of a body which was not a trade union. Dr. Greenyer made an amusing speech on the writing on the wall which occurs at feasts. Dr. Carswell congratulated the union on having as guests representatives of other organizations; and the toast of "The Guests" was acknowledged by Dr. F. J. Smith, who dealt with the deleterious effect on the teaching of medical students likely to follow from the present panel system under the Insurance Act. He protested against the apathy shown by the College of Physicians while the Act was being introduced, and expressed a hope that the two Colleges would be roused to display a more decent activity in the future. He felt that a deluge was coming; but he feared that neither of the Colleges, nor even the British Medical Association, was likely to put up an effective umbrella against it. Mr. Adolphe Smith described how he had survived many hundreds of interviews with medical practitioners (panel and non-panel) while in search of information on the working of the Insurance Act for the columns of the *Lancet*. The speeches were alternated with musical contributions by Mrs. Edwin Smith (violin), Miss Metcalf, Dr. Parrott, and Dr. Lavies, and with a sketch by Mr. Chas. Pond. Members of the Guild present in London had, we understand, spent the day in discussion, but no statement of policy was, so far as we are aware, put out for information.

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**SUPPLEMENT**

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PROCEEDINGS OF COUNCIL

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