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AND



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## KEY TO DATES AND PAGES.

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REPORTS OF CONFERENCES

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MEDICAL BILLS IN PARLIAMENT

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# INDEX TO THE EPITOME FOR VOLUME II, 1923.

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was a considerable difference in the technique of irradiation employed by him, which fact may account for our interpretation. We are, however, further investigating the changes that occur within the first few days.

From the seventh day onwards there is apparently no attempt at multiplication by mitosis, and we have no evidence that multiplication in any form takes place. The nucleus, on the other hand, assumes strange forms; there is often an increase in size accompanied by an increase in cytoplasm and sometimes very large forms are seen. The outline is irregular and the nucleolus is often deeply stained. Later mottling or even vacuolation (sometimes the vacuoles are of large dimensions) is seen, followed in some places by a gradual loss of staining power whilst the nuclear form is still maintained. The cytoplasm itself is usually increased in quantity, and occasionally shows vacuolation. The tissues around are heavily infiltrated with small round and plasma cells, as before treatment, and in addition there is usually an increase in the amount of fibrous tissue. These appearances last up to six or eight weeks, towards the end of which time the cells, if they have not already disappeared, become difficult to find owing to their paucity. After this stage it seems that the cells entirely vanish from the tissue, except in a few cases where another process seems to be at work, which for want of a better expression we have termed "embalming." Whereas in the former case the cells seem as if they were dissolved and their remains removed, in the present case they appear to remain collected together in their original alveolar forms. The nuclei are sometimes to be recognized by their spherical outline and staining properties, but generally, and especially in the later observations, no nuclear structure is to be seen, and the islets consist of an unorganized mass, often concentrically laminated. These can only be regarded as remains of new growth because (1) they are bodies entirely foreign to the normal cervix; (2) they can be traced in a series of cases through the various stages from unquestionable carcinoma. In this embalmed state there is an entire absence of round-celled and plasma-celled infiltration around, suggesting that the growth is no longer capable of causing cell reaction, and is dead. The islets are often embedded in a mass of dense fibrous tissue or may have muscle tissue in close proximity, but usually there is an attempt at fibrous tissue encapsulation round them. From their staining properties these masses appear to be heterogeneous, but there is evidence that their outer portions contain myxomatous material.

Judging from the observations in one case which was examined fifteen and forty-nine weeks after irradiation, it would seem that when once the cells have reached this advanced stage these masses appear to be relatively permanent.

#### CONCLUSIONS.

##### *Clinical.*

1. These are in accord with the general experience of others in recent years, that in the majority of cases patients suffering from carcinoma of the cervix cease to have hæmorrhage, vaginal discharge, and ulceration after treatment with radium. Further, that in some of those cases which are inoperable, life is prolonged and the patients are enabled to lead useful existences. It would be premature at the present juncture to talk of cures.

2. That the preliminary application of radium in those cases which are operable causes the disappearance of fungating growths or ulcers, so that the risk of infection and of implanting new growth from the cervix at the time of incising the vagina wall is markedly diminished.

3. There is no doubt that the application of 173.6 mg. of radium element for twenty-four hours is markedly more efficient in bringing about this result than the same amount applied for eight hours, even when the latter is given on as many as three occasions.

4. That since histological evidence of the efficacy of Daels's method of irradiation of the pelvic glands is impracticable its value is still *sub judice*, as it depends upon clinical evidence.

##### *Histological.*

1. That the introduction of 173.6 mg. of radium element into the cervical tissue for twenty-four hours is capable

of causing a complete disappearance of the growth from the cervix within a few weeks, whereas the same application for eight hours produces little or no effect in the quantity or appearance of the growth.

2. That definite series of changes in the carcinoma cells can be demonstrated after irradiation, leading up to the destruction of the cell.

3. That little or no effect has been produced in affected iliac glands when the cervix is irradiated.

4. That as changes in the malignant cells take place before the formation of fibrous tissue, the latter is not the causal agent in the disappearance of growth.

5. That the carcinoma cells are more vulnerable than the uterine musculature, but that in the latter local atrophy and fibrosis take place at a later date.

Our thanks are due to the Medical Research Council and the Radium Committee of St. Bartholomew's Hospital for the facilities given us in carrying out this research; to Dr. Williamson and Dr. Barris for allowing us to irradiate some of their cases and to include them in this series; and to many others for their valuable assistance, but especially to Dr. T. S. P. Strangeways for the whole-hearted manner in which he has given us his assistance and advice.

## Memoranda :

### MEDICAL, SURGICAL, OBSTETRICAL.

#### THE TONGUE SYMPTOM IN ABDOMINAL SEPSIS.

I WOULD like to call attention to a symptom which I have been accustomed to seek in all cases of abdominal disease, and which has not once failed me during many years of practice. I refer to a definite smell in the tongue, which I find present in all cases where pus is present in the peritoneal cavity. I do not refer to the smell of the breath but of the tongue itself. I find the smell varies from the distinct smell of pus to an actual faecal odour, sickening to the observer.

I am unable to find any reference to this symptom in books on surgical diagnosis, but have notes on cases extending as far back as twenty-five years in which I have used this symptom and verified its accuracy by operation. We know how rapid is the absorption from the peritoneum, and it appears to me that the tongue gives the first indication of this absorption. Among many cases of which I have notes I mention only three.

*Case 1.*—A female child had pain in the appendix area, and was sent into a nursing home at once. The temperature was not raised. There was slight rigidity of the abdominal walls. No vomiting. I noted that the tongue smelt very offensively. Operation at once. Perforation of adherent appendix, with offensive fluid in peritoneal cavity.

*Case 2.*—Adult, male. History of two days' illness. Pain not severe. Slight rigidity of abdominal walls. Temperature raised. Tongue smelt faecal. Operation at once. Appendix gangrenous; pus and gas in the peritoneum.

*Case 3.*—Seen in consultation. Adult female. History of obscure pain in left side of pelvis. Definite swelling extending upwards for three inches above iliac crest. Per vaginam tense swelling to left of uterus. The tongue very offensive. Gave advice for immediate operation as I was sure that there was pus in the peritoneal cavity. Operation two hours later. On opening the abdomen in the middle line we found a large collection of pus walled off. The pus had originated in the left broad ligament and ruptured into the peritoneal cavity, becoming walled off by adhesions. Over twenty ounces were evacuated. Recovery was uneventful.

I have tried testing this symptom by getting the patient to gargle and wash out the mouth, but in every case the smell of the tongue remained. In most cases I have noted that the tongue was not covered with fur; usually it is dry and beefy-looking.

I would be very interested to know if others have observed this symptom, which I have learned to rely upon with much confidence.

P. CLENNELL FENWICK, C.M.G., M.D., F.R.C.S. Edin.,  
Consulting Surgeon to Christchurch Hospital, New Zealand.



years later Paul Richer (*Nouv. Icon. de la Salpêtrière*, 1888, p. 213) writes of the facial expression in paralysis agitans, "C'est masque vide, dont la vie semble absente."

The term "facial mask," or mask-like face, applied to paralysis agitans, thus seems not to have been used at all generally until after Charcot's time. It has the advantage of being brief, though not an apt description of the condition.

#### *The Earliest Use of the Term "Parkinson's Mask."*

So far as our investigations go, the first use, in print, of the term "Parkinson's mask" is found in the first edition of Osler's well known *Textbook of Medicine*, 1892. Mr. Powell has searched through all the leading textbooks from 1817 to 1892 and can find no previous use of Parkinson's name in this connexion.

The actual expression which Osler uses is rather curious, "the so-called Parkinson's mask." This was repeated in each succeeding edition down to 1916. To one as familiar with the original works of the past as Osler was the fact that Parkinson had not described the facies of paralysis agitans must have been well known; hence the form of his expression—"the so-called Parkinson's mask." It seems, therefore, probable that about the early nineties the term "Parkinson's mask" had become current amongst certain medical teachers in certain parts of the world, and that Osler first gave it official recognition as a concise\* and convenient label for the student.

It may be said that in using the term "Parkinson's mask," we merely mean the mask-like face seen in Parkinson's disease, and as such the term is quite warranted. When, however, the term "Parkinsonism" is applied, as it frequently is at the present time, to post-encephalitic residua which may consist of nothing but an immobile face with certain mental and moral changes in character, it is historically inaccurate.

In conclusion, I desire to thank Mr. Powell for his valued help, and to take this opportunity of pointing out to my colleagues living in the provinces the many valuable services which the Royal Society of Medicine places so generously at the disposal of those Fellows who are unable to make frequent personal visits to the library.

ARTHUR J. HALL, M.A., M.D., F.R.C.P.,  
Professor of Medicine, University of Sheffield.

#### EPSOM COLLEGE.

THE annual general meeting of the governors of Epsom College was held at the office, 49, Bedford Square, W.C., on June 29th, when the treasurer, Sir HENRY MORRIS, was in the chair.

The names of the successful candidates for foundation scholarships were announced as follows: Thomas M. Newton, Jeffrey O. Timms, James D. Johnston, Irwin J. McGhie, Denis A. Sanford, H. Vincent Adcock. The successful candidate for the ordinary pensionership was Adelaide Lynch.

In submitting the annual report of the Council, the chairman drew attention to the loss the College had sustained by the death of Mr. Clement Locke Smiles, as well as by the retirement from the Council of Mr. Walter Archibald Propert, the grandson of the Founder of the College. The governors were also informed that Mr. W. Douglas Crossley, who entered the College as a master in September, 1888, and was appointed bursar in September, 1890, was about to retire, after a service to the College of practically thirty-five years. The chairman paid a tribute to the zealous and efficient way in which Mr. Crossley had carried out the duties of his office during that long period. The chairman further reported that Mr. Bluett, one of the honorary auditors, had died since the last annual general meeting, and that the Council proposed that Mr. Norman C. King, the registrar of the General

Medical Council, should be appointed an honorary auditor in his place. The chairman also drew attention to two pension funds recently instituted, and mentioned that the Council had decided to propose that, in consequence of the increased cost of living, amendments in the by-laws should be made to permit a somewhat larger income than hitherto held by persons wishing to become candidates for various pensionerships—namely, £100 a year instead of £60. He stated that steps had been taken to begin at once the work of rebuilding the nave of the chapel in harmony with the new chancel, in spite of the fact that the funds in hand were not sufficient for the purpose, and he urged all friends of the College to do their best to secure contributions.

In the report to the governors, the Council expressed its thanks to the various honorary local secretaries, the British Medical Association, and other friends who had assisted the Royal Medical Foundation attached to the College by obtaining donations and subscriptions, as well as to the editors of the *British Medical Journal* and *Lancet* for many services kindly rendered. The Medical Insurance Agency of the British Medical Association had again sent generous contributions, for which the Council was grateful. For many years it had been customary to elect as vice-presidents those who had collected the sum of £1,000, and as the Rev. Walter J. Barton, the late head master, had succeeded in completing this sum, the Council proposed that he should be elected a vice-president of the College.

After the adoption of the annual report and accounts, formal business was transacted, including the re-election of members of the Council and auditors, and the adoption of new by-laws. A cordial vote of thanks to the chairman was proposed by Dr. Raymond Crawford, who drew attention to the valuable services rendered to the College by Sir Henry Morris as treasurer. This resolution was seconded by Mr. Hollis Walker, K.C., and carried with acclamation.

#### BIRTHDAY HONOURS.

THE deferred list of honours granted on the occasion of the King's birthday was issued as a supplement to the *London Gazette* of June 29th. The following are among the names of those upon whom honours have been conferred:

##### *Baronetcy.*

Major-General Sir Anthony A. Bowlby, K.C.B., K.C.M.G., K.C.V.O., F.R.C.S., President of the Royal College of Surgeons of England; Consulting Surgeon to St. Bartholomew's Hospital.

##### *Knighthoods.*

George Francis Blacker, C.B.E., M.D., F.R.C.P., F.R.C.S., Dean of University College Hospital Medical School.

Ewen J. Maclean, M.D., F.R.C.P., F.R.C.S. For services to the Ministry of Health in Wales. Dr. Maclean was formerly chairman of the Representative Body of the British Medical Association, and presided over the Annual Representative Meeting in 1911 and 1912, when held in Birmingham and Liverpool respectively.

##### *C.B.E. (Civil Division).*

Lieut.-Colonel John Southey Bostock, M.B., Ch.B., Director of Medical Services, Ministry of Pensions.

The distinction of C.B.E. (Civil Division) is also conferred upon Mr. Ernest T. Nethercoat, President of the Pharmaceutical Society, in recognition of his services in connexion with the Dangerous Drugs Regulations.

THE second International Congress of Comparative Pathology will be held in Rome from October 7th to 14th. The subscription is 40 lire. Further information can be obtained from Professor Perronetto, 40, Corso Valentino, Turin.

THE thirty-eighth annual meeting of the Caledonian Medical Society will be held on June 29th in the rooms of the Aberdeen Medico-Chirurgical Society. The President, Dr. D. Rorie, D.S.O., took as the subject of his presidential address the career of Dr. George Boswell, who was surgeon to King James VI of Scotland. The meeting was largely attended, and at the dinner the same evening seventy members and guests were present. It was arranged to hold the next annual meeting of the society in Liverpool under the presidency of Dr. David Smart.

\* In Fagge and Pye-Smith's *Textbook of Medicine* (fourth edition, 1877) the words are, "The features are immobile and the face has a remarkable impassive expression, like a mask, as Parkinson described it." The name Parkinson is evidently a "lapsus calami" for Charcot, which occurs in previous editions.

## SIR BENJAMIN SIMPSON, K.C.I.E.,

Surgeon-General, I.M.S. (ret.).

SIR BENJAMIN SIMPSON, K.C.I.E., Bengal Medical Service (retired), died in London on June 27th, at the great age of 92. Since the death of Deputy Surgeon-General Parke, on April 10th, 1920, he had been the senior officer on the retired list of the I.M.S. That somewhat doubtful honour now falls to the lot of Deputy Surgeon-General Clarence Cooper, of the Madras Service, who, though just one month junior to Simpson, was actually eight months older.

Benjamin Simpson was born at Clontarf, Dublin, on March 31st, 1831; he was the son of Robert Simpson, solicitor, and was educated at Trinity College, Dublin, where he graduated M.A.; he took the M.R.C.S. in 1852, and the M.D. St. Andrews in 1853. He joined the I.M.S. as Assistant Surgeon on October 20th, 1853, nearly seventy years ago, reached the administrative grade on March 21st, 1882, became Surgeon-General and head of the service on March 20th, 1885, and retired on March 29th, 1890. Though in India at the time of the Mutiny, he did not see service in that campaign. In 1860 he entered civil employ in Bengal, and in 1863 was posted to the medical charge of the mission sent to Bhutan in that year, subsequently serving in the Bhutan campaign of 1865-66, for which he received the frontier medal with a clasp. In 1867-68 he was on special duty on the North-East Frontier of India, and in the latter year was appointed civil surgeon of Darjiling. In 1871 he was transferred to Patna, and in the same year served on the Cinchona Commission. In 1878 he was appointed to accompany the late Maharaja of Kuch Bihar, father of the present ruler, as his guardian, on the first of his many visits to India. In 1881 he was promoted to act in the administrative grade as Deputy Surgeon-General of the Army in Southern Afghanistan, and in the same year was posted as Principal Medical Officer of the Quetta Division. On March 21st, 1882, he was confirmed in the administrative rank, and appointed Deputy Surgeon-General and Sanitary Commissioner of the Central Provinces; subsequently he acted for some time as Surgeon-General of the Punjab and of Bengal successively. On March 20th, 1885, he succeeded the late Dr. J. M. Cunningham as Surgeon-General and Sanitary Commissioner with the Government of India, the title then held by the head of the Indian Medical Service.

On December 20th, 1885, he was granted a good service pension, and on February 15th, 1887, he was created K.C.I.E., being one of the first batch of knights appointed to the Order of the Indian Empire. In 1859 he married Jane, daughter of Brigadier-General Hugh Sibbald, C.B., by whom he had two sons and one daughter, the latter the wife of Brigadier-General Sir A. G. Balfour.

His two chief pursuits in India were big game shooting and photography, and in both he was very successful, attaining considerable skill in the latter when it was a much more difficult art than it is nowadays. When he was Surgeon-General he had rather the reputation of being more intent on his amusements than on his work. The writer of this note, however, was told by a distinguished officer of the Indian Medical Service, who served as secretary to several Surgeons-General, and later himself became Surgeon-General, that Simpson did more work than any other chief under whom he had served. He was a man of the old Anglo-Indian school, who rose very early and got through a great deal of work before breakfast; he had the faculty of knowing just what work he could safely leave to his assistants and subordinates, and he did not himself do work which it was their duty to do—consequently he was free from the cares of his office at an hour when most men were still hard at work. As Surgeon-General he was a strong man, and he raked out of the hands of the Provincial Governments into those of the Government of India—that is, practically into his own hands—a good deal of patronage. Two instances were that in his tenure of office the Government of India took over from Provincial Governments the right of nominating individual officers for civil employ, and the power of appointment to the professorships in the various medical colleges in India. When the question whether medical officers in civil employ should be eligible for military promotion was considered, the Government decided that they

should, giving as two instances of conspicuous success on the part of officers promoted from civil posts to act as military administrative medical officers Sir Benjamin Simpson and the late Deputy Surgeon-General Sir James Thornton, both of whom were civil surgeons in Bengal before their promotion.

## HUGH CLAYTON FOX, F.R.C.S.I.,

London.

MANY will learn with sorrow and surprise of the death, from angina pectoris, of Mr. Clayton Fox, on June 13th, after scarcely more than one day's illness. He presented the appearance of perfect health and vigour, and those who saw him a day or two before his death would have prophesied for him a prolonged life of activity.

He was born in 1864 at Coddensham in Suffolk, and was educated at Needham Market Grammar School. He studied medicine at the Middlesex and Charing Cross Hospitals and ultimately in Dublin, taking the M.R.S.C.Eng. in 1888, and the F.R.C.S.I. in 1901. After an experience of general practice he studied oto-laryngology at the Central London Throat and Ear Hospital and joined the staff of the Metropolitan Ear, Nose and Throat Hospital. He devoted much time to the work of the throat departments of the Brompton Hospital and the West End Hospital for Nervous Diseases. During the war he acted as assistant and deputy (for Sir James Dundas-Grant) at the King George Hospital, as well as at the Endsleigh and Vincent Square Hospitals for Officers.

The Ministry of Pensions afforded him great scope at the aural clinics at Queen Mary's Hospital, Ducane Road Military Hospital, and for the last few years three aural clinics a week at Hammersmith Broadway. Moreover, he was constantly employed on aural boards. Just before his death he had been appointed aurist and laryngologist to the Marylebone General Dispensary.

He made a masterly translation from the French of Laurens's *Oto-Rhino-Laryngology*, which has been in such demand as to call for two new editions in a comparatively short time. His abstracts from French special journals which appeared in the *Journal of Laryngology* were always accurate and practical. Though of a somewhat reserved disposition he acquired a large number of friends, who became more and more attached to him as they learnt to realize the largeness of his heart.

## Universities and Colleges.

## UNIVERSITY OF OXFORD.

AT a congregation held on June 28th the degree of Bachelor of Medicine was conferred on E. F. Chapman.

The following candidates have been approved at the examinations indicated:

FINAL M.B.—(*Materia Medica and Pharmacology*): G. R. P. Aldred-Brown, E. N. Allott, L. J. Barford, L. W. H. Bertie, R. B. Bourdillon, V. H. Brink, O. S. Broadbent, T. A. J. M. Dodd, L. O. F. Fysh, S. Harris, T. B. Hodgson, A. Kendrew, R. Lewthwaite, P. Morton, E. L. Newell, W. D. B. Read, T. E. Ryves, B. G. Scholesfield, B. W. A. Simmons, B. A. Walsh, A. Q. Wells, Evelyn C. Whitehall-Cooke, D. O. Williams, Rosa S. Wordsworth. (*Pathology*): M. McC. Baird, R. E. D. Cargill, O. W. Carter, T. A. J. M. Dodd, C. L. Elgood, K. J. Franklin, D. B. Gawler, C. A. H. Green, H. E. Harding, J. R. B. Hern, J. A. Macfadyen, V. P. Robinson, J. P. Shaw, I. M. Sidley, H. N. Stokoe, J. G. S. Thomas, B. E. Tompason, G. P. Wright, Mathilde E. F. Burnion, Janet M. Vaughan. (*Forensic Medicine and Public Health*): O. D. Ballinger, D. T. Barnes, E. F. Chapman, A. M. Cooke, R. S. Creed, R. van B. Emmons, J. A. Macfadyen, G. F. L. Mitcheson, B. B. Strauss, T. S. Townsend, H. F. Turney, Cicely D. Williams. (*Medicine, Surgery, Midwifery*): J. W. Alden, P. W. Boobyer, T. A. Brown, A. D. Dyson, R. van B. Emmons, R. V. Fahey, H. O. Hill, J. P. Shaw, A. L. B. Stevens, E. H. Watkins, A. Q. Wells, C. R. Young, W. A. Young, Sibyl E. Eastwood, Cicely D. Williams.

M.CH.—C. H. Carlton.

## UNIVERSITY OF SHEFFIELD.

THE following candidates have been approved at the examinations indicated:

M.D.—R. Platt.

FINAL M.B., CH.B.—O. H. Billington, R. L. Brown, Alice C. Caiger, Ida Coates, H. Cretney, A. S. Drummond, C. S. Dunbar, D. Guest (Second Class Honours), W. H. Harding, Mona B. Hatherley, A. B. Nutt, Muriel E. Powell, J. E. Schofield, Annie D. Sykes.

## UNIVERSITY OF DURHAM.

A CONVOCATION was held in the Castle Hall on June 26th, when a number of honorary degrees were conferred.

As recorded elsewhere, the honorary degree of D.C.L. was conferred upon Sir Anthony Bowlby.

The following medical degrees were also conferred:

M.D.—N. R. Beattie, D. G. P. Bell, O. Collville, S. W. Davidson, C. N. Gover.

M.D. (Practitioners).—W. H. Bennett, Philip Gosse, W. L. Hodge.

M.S.—R. Nicholson.  
M.B., B.S.—R. Armstrong, Helen Austin, Monica F. Bell, W. A. Brown, Katherine M. Cellan-Jones, G. A. Fothergill, Irene B. M. Green, Phillis Hall, R. E. Haswell, Gwendolen M. Hunton, B. R. Isaacs, E. H. Jacques, I. M. McLachlan, J. E. D. Miller, L. Minski, Doris H. Motyer, F. G. Mundell, G. C. Parkin, Georgina L. Phillips, H. N. Popham, G. C. E. Reffell, L. F. Richmond, H. C. Rollin, Evelyn M. Scott, W. F. O. Taylor, A. Todd, Kathleen Shelton, P. J. G. de Vos, H. A. Wallace, and A. J. Watson.  
B.Hy. AND D.P.H.—N. R. Beattie.

Dr. R. A. Bolam was nominated for election by convocation as a member of the Senate for the ensuing period of four years.

## UNIVERSITY OF GLASGOW.

THE following medical degrees were conferred on June 20th:

M.B., Ch.B.—Grace F. Macpherson, Ian Macpherson, Ethel M. Oastler, W. Simpson.

## ROYAL COLLEGE OF SURGEONS IN IRELAND.

As announced last week, the Honorary Fellowship of the College was conferred on June 25th on Sir Harold Stiles, Regius Professor of Clinical Surgery in the University of Edinburgh. In introducing Sir Harold Stiles, the Vice-President of the College, Mr. Charles B. Maunsell, said that he was worthy of the highest honour, as he was one who had worked unceasingly to advance the science and art of surgery. The highest honour which they could bestow was the Honorary Fellowship of their ancient College. On the roll of Honorary Fellows were the names of such world-renowned workers as Erichsen, Hunter, Huxley, Lister, Paget, Pa-teur, and the brothers Mayo, and Sir Harold Stiles was worthy to have his name enrolled amongst such immortals. His first work was a translation of that wonderful textbook of operative surgery which was written by the late Theodore Kocher of Berne. Afterwards he collaborated with the Irish students' old friend and teacher, the late Professor D. J. Cunningham, in the production of his *Textbook of Anatomy*. This work was followed by an original and painstaking study, the results of which were given to the world in Burghard's *System of Operative Surgery* and in the *Encyclopaedia Medica*. From these foundations Sir Harold Stiles built higher and higher, always with the same results—the saving of life, the relief of pain, and the advance of knowledge.

Sir William I. de C. Wheeler, President of the College, then formally admitted Sir Harold as an Honorary Fellow in the words quoted last week (p. 1107).

The Governor-General then, on behalf of the College and country, presented the new Honorary Fellow with the parchment. At the charter day dinner which, as already reported, followed the ceremony, the Governor-General paid a warm tribute to the work which had been done in the world of medical science by Dr. Mayo and his brother, and said that these two men alone had done for surgery in America what had been done nowhere else in the habitable globe. They were proud, too, of their distinguished guest from Edinburgh, a city to which Irishmen owed a great deal, both as regards medicine and surgery. He rejoiced that that great College had once more been able to assemble in jollity and good-fellowship, and was glad to think that their toast would have a speedy re-echo in the speedy prosperity of their beloved country.

The speeches made in connexion with the other toasts were reported last week.

## SOCIETY OF APOTHECARIES OF LONDON.

THE following candidates have passed in the subjects indicated:

SURGERY.—L. P. Garrod, B. Hart, \*L. K. Htoo, \*M. S. Mahmud, B. Teverson.

MEDICINE.—L. P. Garrod, E. W. Hicks, B. Teverson.

FORENSIC MEDICINE.—C. P. Garrod, E. W. Hicks, J. A. H. Sykes, B. Teverson, H. Whitby.

MIDWIFERY.—D. Dimitrijevitch, L. P. Garrod, L. Statnigrosh, B. Teverson.

\* Section II.

The diploma of the Society has been granted to Messrs. L. P. Garrod, B. Hart, E. W. Hicks, and B. Teverson.

## The Services.

## COMMISSIONS IN THE R.A.M.C.

THE War Office announces that an examination for not fewer than twenty commissions in the Royal Army Medical Corps will be held in London on August 1st next, and that those who intend to compete should lodge their applications with the Secretary of the War Office not later than July 20th. The presence of candidates will be required in London from July 30th. A full statement of the duties and emoluments of the service will be furnished to prospective candidates on written application to the Secretary (A.M.D.I), War Office, Whitehall, S.W.1.

## FOREIGN DECORATIONS.

THE following are among the decorations and medals awarded by the Allied Powers to British Forces for distinguished service during the war 1914-19.

## BY THE KING OF THE BELGIANS.

*Croix de Guerre*.—Brevet Colonel John T. Clarke, C.B., C.A.M.C., Major T. Morrison, C.A.M.C., Captain A. F. Menzies, M.C., C.A.M.C.

## BY THE PRESIDENT OF THE FRENCH REPUBLIC.

*Médaille de la Reconnaissance Française (En Argent)*.—Major Robert C. Hallows, D.S.O., R.A.M.C.

*Médaille des Epidémies (En Vermeil)*.—Major Jules Lafleur and Captain Joseph H. A. Paquette, No. 8 Canadian General Hospital, C.A.M.C. (En Argent).—Captains Clermont Bourget and Raoul Brault, No. 8 Canadian General Hospital, C.A.M.C.

## DEATHS IN THE SERVICES.

LIEUT.-COLONEL THOMAS BOYD, R.A.M.C.(ret.), died at Ballina, co. Mayo, on March 31st, aged 71. He was born at Ballina, took the L.R.C.S.I. in 1874, and the L.R.C.P.I. in 1875, entered the army as surgeon on February 4th, 1877, became surgeon lieutenant-colonel after twenty years' service, and retired on February 24th, 1897. After his retirement he was employed for some time in medical charge of the dépôt at Armagh. He served in the Egyptian war of 1882, and was present at the battle of Tel-el-Kebir, receiving the medal with a clasp and the Khedive's bronze star; and in the Sudan in 1884-85, in the Nile expedition, when he was in charge of the field hospital at Absarat, and received a clasp to the Egyptian medal.

## Medical News.

A MEMORIAL tablet to the late Dr. John Roberts Thomson, erected in the hall of the Royal Victoria Hospital, Bournemouth, was unveiled on June 26th. The Mayor of Bournemouth, before drawing aside the flag which covered the tablet, spoke of the devoted and self-sacrificing services which Dr. Roberts Thomson had rendered to the town and in particular to the hospitals. He said that no honorary freeman was regarded by the borough with more affectionate regard and the memory of no freeman was more highly revered. Dr. Roberts Thomson was president of the British Medical Association when it held its Annual Meeting at Bournemouth in 1891, and was chairman of the Central Council of the Association from 1899 to 1901.

THE annual meeting of the Medico-Psychological Association of Great Britain and Ireland will be held in London during the second week of July. Dr. Edwin Goodall, medical superintendent of the Cardiff Mental Hospital, will take the chair for the first time as president, and will give an address on the afternoon of Tuesday, July 10th, on "Considerations, bacteriological, toxicological, and haematological, and others therewith associated, bearing upon the psychoses." On the following day, July 11th, a discussion on the relation of chronic sepsis to the so-called functional mental disorders will be introduced by Dr. Henry A. Cotton, medical director, New Jersey State Hospital; in the afternoon a visit will be paid to the Bethlem Royal Hospital, and the annual dinner will take place in the evening. On the afternoon of July 12th a visit will be paid to the Maudsley Hospital. A number of papers will be read on each day of the meeting, which will close on Friday, July 13th.

A PRESIDENT'S gold chain and badge have been presented to the Royal Society of Tropical Medicine and Hygiene by the retiring president, Sir James Cantlie, who was one of its founders. The chain consists of a number of plaques held together by ornamental links. Each plaque bears, or will bear, the name of a former president. The centre link is formed by the initials of the donor surrounded by a laurel wreath. The badge shows a sketch of a mosquito on a shield, with the motto *Zonae torridae tutamen*. The incoming president, Sir Percy Bassett-Smith, K.C.B., F.R.C.P., F.R.C.S., was formally invested with the chain by the retiring president at the last meeting of the Society. The chain was designed and made by the Goldsmiths and Silversmiths Company, London.

THE issue of the *Journal of Tropical Medicine and Hygiene* for June 1st is devoted to tropical skin diseases. It contains papers from contributors in the Sudan, Siam, Calcutta, and the United States, as well as from workers in this country, and is well illustrated. The plates provided for the paper by Dr. Mendelson on the disease hitherto known as juxta-articular nodules, to which he proposes to apply the term "xanthoma tropicum," show conditions which at first glance suggest to the uninitiated either multiple bony lesions or malignant tumours. The nodules seem, in fact, to be fibromatous without any tendency to malignancy, though they may undergo fatty degeneration, and in old cases some calcification and amyloid change. The cause of the disease

has not yet been ascertained. It was first noted in 1897 in New Guinea, but it has been observed also in Siam, Java, Madagascar, in both French and British Guinea, and in Algeria. Drs. Castellani and Tejera describe a skin disease of which we have not previously heard. It occurs in Venezuela, where it is called "cute" and is said to be fairly common. Bright yellow patches with little or no desquamation appear, sometimes in childhood, and very slowly spread. It is thought to be identical with an infection described by Castellani in Ceylon under the name of *tinea flava*. Spores were observed in scrapings from the yellow patches, but no fungus growth could be obtained from them.

AT the meeting of the Society for the Study of Inebriety to be held at 11, Chandos Street, W.1, on Tuesday, July 10th, at 4 p.m., Professor A. Louise McIlroy will open a discussion on the influence of alcohol and alcoholism upon ante-natal and infant life.

A MEMORIAL to the late Dr. Murdoch Mackenzie was unveiled on June 22nd in the Isle of Lewis Hospital, of which institution he was one of the founders and for twenty-six years its medical superintendent and devoted friend.

THE very fine collection of Hispano-Moresque pottery made by Mr. Francis W. Mark is to be sold at Christie's on July 10th. It contains some rare pharmacy jars of the fifteenth century. Part of the collection was exhibited last summer at the Royal Society of Medicine's social evening.

THE University of London Press announces for early publication an illustrated volume on *The Diseases of the Breast*, by Willmott H. Evans, M.D., F.R.C.S., surgeon to the Royal Free Hospital.

A SECOND (revised and enlarged) edition of Choyce's *System of Surgery*, in three volumes, is announced for early publication by Messrs. Cassell.

## Letters, Notes, and Answers.

ORIGINAL ARTICLES and LETTERS forwarded for publication are understood to be offered to the BRITISH MEDICAL JOURNAL alone unless the contrary be stated.

CORRESPONDENTS who wish notice to be taken of their communications should authenticate them with their names—of course not necessarily for publication.

As, owing to printing difficulties, the JOURNAL must be sent to press earlier than hitherto, it is essential that communications intended for the current issue should be received by the first post on Tuesday, and lengthy documents on Monday.

AUTHORS desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL are requested to communicate with the Office, 429, Strand, W.C.2, on receipt of proof.

IN order to avoid delay, it is particularly requested that ALL letters on the editorial business of the JOURNAL be addressed to the Editor at the Office of the JOURNAL.

THE postal address of the BRITISH MEDICAL ASSOCIATION and BRITISH MEDICAL JOURNAL is 429, Strand, London, W.C.2. The telegraphic addresses are:

1. EDITOR of the BRITISH MEDICAL JOURNAL, *Aitiology, Westrand, London*; telephone, 2630, Gerrard.
2. FINANCIAL SECRETARY AND BUSINESS MANAGER (Advertisements, etc.), *Articulate, Westrand, London*; telephone, 2630, Gerrard.
3. MEDICAL SECRETARY, *Mediscra, Westrand, London*; telephone, 2630, Gerrard. The address of the Irish Office of the British Medical Association is 18, South Frederick Street, Dublin (telegrams: *Bacillus, Dublin*; telephone, 4737, Dublin), and of the Scottish Office, 6, Rutland Square, Edinburgh (telegrams: *Associate, Edinburgh*; telephone, 4361, Central).

### QUERIES AND ANSWERS.

"G. T." inquires if there is any hospital in the British Isles where a native of Sierra Leone, who is an M.A., B.Sc., and M.B., B.S., could obtain a house-surgeon's appointment. Failing such, could the graduate be attached as a pupil to learn the work of house-surgeon and at the same time obtain an insight into hospital administration?

#### UNCERTIFIED MIDWIVES.

"OXON." writes: (1) Is a nurse who holds certificates of proficiency in midwifery, but has not passed the examination of the Central Midwives Board, eligible for registration as a midwife? (2) In the event of her being eligible, am I as a doctor permitted to allow her to conduct cases without my actually being present at the confinement?

\* \* (1) No woman (other than a registered medical practitioner) can act as a midwife in England or Wales unless she holds the Board's certificate. This certificate she can now only obtain by

passing the Board's examination or by being enrolled by virtue of holding the certificate of either the Central Midwives Board for Scotland or the Central Midwives Board for Ireland, obtained as a result of training and examination equivalent to the standard adopted by the Board. (2) If a medical practitioner were to allow an uncertified woman to conduct cases without his actually being present at the confinements, the woman would be liable to be prosecuted and the doctor to be reported to the General Medical Council for "covering" an uncertified woman.

#### INCOME TAX.

"L. B. S." bought a practice as from May 1st, 1921. There appears to be some difficulty in the way of an assessment on the three years' average of his predecessor; "L. B. S." has supplied an account of his cash receipts and expenses to the inspector, who declines to take the receipts on that basis, and claims to add thereto the value of the debts outstanding at the end of the year. He also declines to allow a deduction for removal expenses. The proper basis is of course the average of the three previous years' profits, and if those figures are not available, the profits of the current year are useful only so far as they may serve to indicate what that average probably amounted to, or, if the profits have fallen off, as a basis of adjustment to meet that special case. The inspector's point about the necessity for taking bookings into account during the early years holds good; income tax is payable on profits earned and receivable even though they have not in fact been received. The claim to a deduction for removal expenses cannot be upheld as there is judicial authority against it; the expense is not incurred so much in carrying on the practice as in acquiring it.

"H. E. G." replaced a 10-h.p. S. car by a 10-h.p. F. costing £662/ the cost of a car of similar make and the same horse-power as the S. is estimated at £600. He has claimed to deduct £600—£100 allowed for the old car, net £500. The inspector of taxes says he is not entitled to replacement cost but to depreciation—for example, £220 (cost of old car), less £100—that is, £120 only.

\* \* It is beyond dispute that a professional man is entitled to cost of replacement and not to depreciation—which in the long run would be of greater benefit. In the official evidence given before the Royal Commission on the Income Tax it was stated that the cost of replacement would be measured by the expense necessary to replace a machine, and that where that amount exceeded the original cost no restriction would be enforced, except that where the expenditure was incurred partly for improvement the portion so incurred could not be allowed. Assuming that a 10-h.p. car of similar quality and type to the S would cost £600 when the F. was bought, our correspondent is correct in claiming to deduct £500.

### LETTERS, NOTES, ETC.

MESSRS. BOOTS of Nottingham have issued a list of chemicals of guaranteed purity for use in research. The majority of the substances in the list are manufactured by the firm.

#### CORRECTION.

DR. GORDON NORRIE of Copenhagen calls attention to an error in the annotation on the prevention of ophthalmia neonatorum in Denmark published in the JOURNAL of June 23rd. In the fourth line from the end (p. 1062) is a quotation which should read as follows: "it is impossible by prophylaxis to prevent the infection taking place after birth"—that is, in the days after the birth.

#### VACANCIES.

NOTIFICATIONS of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 31, 34, and 35 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 32 and 33.

A short summary of vacant posts notified in the advertisement columns appears in the Supplement at page 13.

### SCALE OF CHARGES FOR ADVERTISEMENTS IN THE BRITISH MEDICAL JOURNAL.

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An average line contains six words.

All remittances by Post Office Orders must be made payable to the British Medical Association at the General Post Office, London. No responsibility will be accepted for any such remittance not so safeguarded. Advertisements should be delivered, addressed to the Manager, 429, Strand, London, W.C.2, not later than the first post on Tuesday morning preceding publication, and, if not paid for at the time, should be accompanied by a reference.

NOTE.—It is against the rules of the Post Office to receive *postes restantes* letters addressed either in initials or numbers.