

Myomata.—These tumours were present in 22 per cent. of the cases.

Malignant Growths.—As a contribution to fact and without drawing any conclusions, I may record the following cases in which a malignant growth was associated with adenomyoma:

1. Two patients had carcinoma of the cervix.
2. Three patients had adenocarcinoma of the endometrium.
3. One patient had carcinoma of the sigmoid.
4. One patient is reported to have died of carcinoma of the rectum four years after I had performed a hysterectomy for adenomyoma of the uterus.

DISCUSSION.

Professor B. P. WATSON said he did not think many could have had such an extensive experience of adenomyomata of the pelvis as Dr. King, who had brought out very clearly the important clinical features of those cases. What had struck him most as a symptom in such patients was the development of dysmenorrhoea in a woman who had hitherto had painless menstruation, and in whom very little could be found in the pelvis to account for it; in such circumstances the first thing to be thought of was an endometrioma.

Dr. GORDON LUKER (London) said that his experience had been confined to adenomyomata of the uterus until the previous week, when he had a case involving one ovary in a woman of 30 who had complained of dysmenorrhoea and menorrhagia. He had conserved the healthy ovary as he did not recognize the risk of adenomyoma occurring elsewhere.

Dr. R. W. JOHNSTONE (Edinburgh) said that he had had relatively a very small experience compared with Dr. King, having operated only in a few cases of adenomyoma of the uterus, as well as in a number of cases of so-called chocolate cysts of the ovary. He had doubtless overlooked many cases in which there were tiny puckered scars of the pelvic peritoneum which Dr. King regarded as of pathological importance. He agreed with Professor Watson that the most suggestive symptoms were the onset of dysmenorrhoea in later sexual life, combined with menorrhagia, dyspareunia, and in many cases sterility. He would like to ask Dr. King whether he had any idea as to the likelihood of the tiny peritoneal adenomyomata which he had described undergoing spontaneous cure even in the absence of such radical treatment as he was disposed to recommend.

Dr. KING, in his reply, said that he had intentionally kept off the subject of the pathology of these tumours. In spite of the fascination of Sampson's theory, it would not cover all cases. He thought the typical endometrial stroma was quite a late development, and with not much stroma there would be very little menstruation.

Memoranda :

MEDICAL, SURGICAL, OBSTETRICAL.

A MODIFICATION OF THE PEPTONE TREATMENT IN CERTAIN CASES.

For some time I have been treating certain resistant cases of asthma, urticaria, etc., with a new peptone method, which is used after the ordinary peptone method has not succeeded.

It is known that in such the blood becomes inspissated by a poison. This blood is now removed and immediately poured into a 10 per cent. solution of Armour's peptone (No. 2), pure and freshly prepared except for the sodium necessary to make it faintly alkaline. It is well shaken up, about 3 to 4 parts blood to 1 part peptone, allowed to coagulate, and is put into an incubator at 37° C. If blood persists with the serum, it is allowed to remain. In five to six hours, if examined, it will be found that a new substance, anaphylatoxin, has been added to the peptone-serum. This entire mass is now carefully removed, and the lot is made sterile with 0.5 per cent. phenol. It is injected into the vein, beginning with 1/2 c.cm. and going up to 2 to 3 c.cm.

London, W.L.

A. G. AULD, M.D., D.P.H.

THE PHYSIOLOGY OF DEFAECATION.

Dr. STACEY WILSON's memorandum (August 9th, p. 237) on the curative action that the sphincter ani may exert on piles raises the question of the proper technique of defaecation. This process requires more time than we are disposed to give it. At least two minutes must be allowed for the recovery of the slight prolapse of mucous membrane and the proper closing of the anal door. If we do not hurry, the peristaltic downward action of the last inch of rectum will often expel a small residual motion. If we hurry this is not only retained, but tender mucous membrane gets a polishing that it resents.

If patients are advised to pause, to *inhibit* deliberately the sudden voluntary closure of the sphincter for a minute or two, and to cleanse with lint and cold water, great benefit will accrue. It is surprising how seldom cleansing is really necessary if this is done. I have cured my own piles on these lines, and many patients have done the same.

Castle Cary.

DAVID PRICE.

BLOOD GROUPS AMONG SAMOANS.

Of recent years attempts have been made to establish racial affinities by means of characteristic blood groupings. The following observations, unfortunately limited to a small number of persons, are offered as a contribution to this study.

The work was done at the Apia Hospital, Western Samoa, towards the end of 1923, and, after excluding all cases with a known or suspected admixture of European or Chinese blood, there remained 51 cases, presumably pure Samoans, the Samoan being a typical member of the Polynesian race. The first step was to separate the various groups; for this purpose blood was taken from 17 individuals, and the serum from each blood was agglutinated against the cells from the other bloods; also the cells of each blood were agglutinated against the other serums. Samoans and Chinese were included in the 17 individuals, with the result that all the bloods fell into four well marked groups, with one exception, which will be referred to later.

Through the courtesy of Dr. Gilmour, pathologist to the Auckland Hospital, we obtained type serums belonging to Groups 2 and 3 (Moss), and in this way identified our groups. We then tested an additional number of cases, giving us a total of 51 Samoans. The number of cases in each group and the percentages of the total are given in the following table:

Samoans.			
Group.	No. of Cases.		Percentage.
1	...	4	7.9
2	...	19	37.3
3	...	7	13.7
4	...	21	41.1

This may be compared with Moss's original table as quoted by Rendle Short (*New Physiology in Surgical and General Practice*, p. 23):

Group.	Percentage.	
1	...	5
2	...	40
3	...	10
4	...	45

In addition to these Samoan cases we typed the bloods from 12 Chinese coolies, with the following result:

Chinese.			
Group.	No. of Cases.		Percentage.
1	...	1	8.3
2	...	1	8.3
3	...	5	41.6
4	...	5	41.6

The anomalous case already mentioned was a Samoan. The corpuscles from this specimen of blood were not agglutinated by any of the other (16) serums; the serum from this case failed to agglutinate corpuscles from two cases belonging to Group 2, while it agglutinated the corpuscles of cases belonging to Groups 1 and 3. It did not agglutinate corpuscles of Group 4. It would therefore appear to be an anomalous form of Group 4.

J. S. ARMSTRONG, M.B., Ch.B., D.T.M. and H.
FARQUHAR MATHESON, M.B., Ch.B.

The Services.

THE HEALTH OF THE NAVY.

THE report for 1921 of the Director-General of the Medical Department of the Navy is the first issued since that for 1915, the preparation of the statistical reports for the years 1916-20 inclusive having been cancelled by order.¹ Since there are therefore no figures for any of these years available for comparison with the 1921 figures, it has been found necessary for this purpose to make use of the figures for 1909-13. An improvement in the general health of the fleet in 1921 is discernible, as compared with this five years' period, there being a relative decrease of 56.76 per 1,000 in the total number of cases of disease and injury entered on the sick list. For the total force the average per man was 0.53, as compared with 0.64 in 1913, the number of such entries on the different stations being: East Indies 1.22, China 0.91, Mediterranean 0.66, North America and West Indies 0.61, Africa 0.61, Home Station 0.56, Irregular List 0.50, and Atlantic Fleet 0.48. Moreover, the average loss of service for each individual in 1921 compares favourably with the five years' ratio, and also with that for 1913. The ratio of final invaliding out of the service was 23.22 per 1,000, as compared with 15.46 in the five years' period. The death ratio in 1921 was 3.58 per 1,000, as compared with 3.21; of the total number of deaths (397) injury was the cause in 168 and disease in 229.

A statistical account of the various diseases and injuries reported from the different stations is provided. There was an increase of influenza cases of 17.24 per 1,000, as compared with the five years' average, but the disease was of a very mild type, and the death ratio in 1920 was the same as the average. A relative decrease in incidence occurred in pneumococcal infections of the lungs and rheumatic fever, a slight increase in nerve diseases, and a fractional increase in tuberculosis. In the case of venereal diseases there was an increase of 3.37 per 1,000 in the incidence ratio, as compared with the five years' average, the highest case ratio (304.88) being given by the China Station, and the lowest (81.93) by the Home Station.

DEATHS IN THE SERVICES.

Surgeon-General William Richard Browne, C.I.E., Madras Medical Service (ret.), died at La Saldanella, Rougemont, Switzerland, on September 16th, aged 74. He was born on May 23rd, 1850, educated at Queen's College, Belfast, and at the Carmichael School, Dublin, and graduated as M.D. and M.Ch. in the Queen's University, Ireland, in 1871. He entered the I.M.S. as assistant surgeon on April 1st, 1873, and was promoted to surgeon three months later, when the rank of assistant surgeon was abolished. After ten years' service in military duty and as a district surgeon, he was posted to the Madras Medical College in 1883 as professor of pathology and resident surgeon of the college hospital, and spent just twenty years at the college, during which time he held successively several chairs, ending up as principal and professor of medicine. He was promoted to colonel on May 19th, 1903, and reverted to military duty as principal medical officer (what would now be called A.D.M.S.) of the Madras district. Eighteen months later he was selected for the post of surgeon-general, Madras, and head of the Madras Service, on October 11th, 1904, when he succeeded Surgeon-General Sinclair. He retired on April 1st, 1908. He received the C.I.E. on January 1st, 1906, and a good service pension on March 25th, 1907. His only war service was the Rumpa rebellion of 1879-80.

Colonel George Henry Barefoot, C.B., C.M.G., Army Medical Staff (ret.), died suddenly in London, on September 13th, after playing bridge at the East India United Service Club. He was born at Tripasur, South India, on December 29th, 1864, educated at University College, London, and after taking the Scottish triple qualification in 1885 entered the army as surgeon on July 28th, 1886. He was gazetted colonel in the long promotion list of March 1st, 1915, and retired on October 7th, 1919. He served in the Hazara campaign on the North-West frontier of India in 1888, when he was mentioned in dispatches, and received the frontier medal with a clasp. As a lieutenant-colonel he held the posts of senior medical officer at Dinapore in Bengal, and at St. Lucia in the West Indies, and the command of the military hospital at Winchester. During the recent war he served as a D.D.M.S., was thrice mentioned in dispatches—in the *London Gazette* of October 19th, 1914, January 1st, 1916, and January 4th, 1917—and received the C.M.G. in 1915 and the C.B. in 1917.

Lieut.-Colonel John Armstrong, R.A.M.C. (ret.), died at Old Charlton, Kent, on August 31st, aged 69. He received his medical education in the school of the Royal College of Surgeons, Ireland, and took the L.R.C.S.I. in 1875 and the L.K.Q.C.P. in 1876. Entering the army as surgeon on August 5th, 1877, he became lieutenant-colonel after twenty years' service, and retired in July, 1903. He served in the South African war from 1899 to 1902, when he was P.M.O. to the 2nd Division, Natal Field Force, under General Sir Redvers Buller, V.C., and was present at the actions of Vaal Kranz and Pieters Hill, the operations on the Tugela Heights, and in the relief of Ladysmith; he received the Queen's and King's medals, with three and two clasps respectively.

Major Ferdinand Clarence Smith, Madras Medical Service (ret.), died suddenly of heart failure at Watford, Herts., on August 7th, aged 69. He was the son of the Rev. Dr. Francis Smith, M.A., M.D. Cantab., of Parkstone, Dorset, for several years consular

chaplain in Buenos Aires, and a nephew of Deputy Surgeon-General Clarence Cooper, I.M.S., who, at the age of 94, has been for the past year the senior officer on the retired list of the Indian Medical Service. Major Smith was educated at University College, London, and took the M.R.C.S., the L.R.C.P. Lond., and the L.S.A. in 1877, and the F.R.C.S. Eng. and the M.B. and M.S. Durh. in 1893. He entered the I.M.S. as surgeon on March 30th, 1878, became surgeon major after twelve years' service, and retired on July 1st, 1895. While in the I.M.S. he held the important posts of surgeon to the Madras General Hospital and of civil surgeon of Tanjore, and superintendent of the Prince of Wales's medical school at that station. After his retirement he remained in Madras, where he had a large practice, for twenty years, till 1915, when he came to England to offer his services in the war. After serving for two years at base hospitals in France he was appointed, in 1917, surgical specialist to the Indian War Hospital at Karachi, but was invalided in the following year, suffering from rheumatic fever, originally contracted in France, which affected his heart, and from the effects of which he never fully recovered. After eighteen months' severe illness he was able to begin practice at Watford, where he was held in great affection by his numerous patients.

Universities and Colleges.

UNIVERSITY OF LONDON.

UNIVERSITY COLLEGE.

ON Friday, October 3rd, at 5.30 p.m., Professor T. Percy Nunn will lecture on the scientific interpretation of nature. This lecture is introductory to the new course for the M.Sc. on the principles, history, and method of science. Professor Ernest Starling will be in the chair. The lecture is open to the public without fee or ticket.

Obituary.

THE LATE MR. BROMFIELD PATERSON.—We are indebted to Mr. J. G. Turner, F.R.C.S., for the following personal appreciation of Mr. W. B. Paterson, formerly dental surgeon to St. Bartholomew's Hospital, London, of whom an obituary notice was published last week.

The death of William Bromfield Paterson deprives me of one of my dearest friends, and I cannot but believe that many—many others who knew him perhaps better than I did—will be glad to read even a halting tribute such as I may write. The many knew him as an eminent professional man, the few knew him as a happy, sympathetic personality, whose unfailing optimism lightened the darkest cloud. I remember, as but yesterday, the eve of the abortive international dental congress of 1914. It was to be held in London, and all was as near ready as could be, when the war cloud thickened. We consulted, and Willie Paterson's solution of the difficulty was a couple of days' fishing to calm our nerves—and two merrier days I never spent. Paterson showed me all the arts of the Devon fishermen—the Devonshire roll under barbed wire, the Devonshire knot, and the Devonshire crawl to approach your fish. Only one thing failed—we caught no fish. But we were happy, and it was characteristic of the man that all around were cheerful through his splendid belief in "higher things" and in England's worth.

Dr. MICHAEL WILLIAM KELLY, who died on August 24th, aged 45, was the son of the late Mr. Michael Kelly of Wexford, and was educated at the Catholic Medical School in Dublin. In 1904 he received the diplomas of L.R.C.P.I., L.R.C.S.I., and L.M. After filling the posts of house-surgeon to the Mater Misericordiae Hospital, Dublin, and assistant master of the National Maternity Hospital, Dublin, he also held appointments at the Portrane Asylum, Donabate, and the Royal Victoria Hospital, Bournemouth. He was appointed, in 1907, medical officer to the Killanne Dispensary District, Enniscorthy. He took part in the framing of the regulations which established the Irish Board of Health, and was one of the medical representatives on the Board. During the second Dail he was a district court judge, and until some months ago was chairman of the North Wexford Sinn Fein executive. He had been a member of the British Medical Association since commencing practice. He leaves a widow and three children.

Dr. GRALL, the Inspector-General of the French Colonial Health Service, who died recently at Nice, spent most of his life in Guiana, New Caledonia, Indo-China, and, during the war, in the Near East. His numerous publications included studies of leprosy, malaria, and yellow fever; he collaborated also in the production of a treatise on tropical pathology.

¹ Statistical Report of the Health of the Navy for the year 1921. London: H.M. Stationery Office, or to be purchased through any bookseller. 1924. 6s. 6d. net.

OPENING OF THE WINTER SESSION.

LONDON MEDICAL SCHOOLS.

THE following arrangements have been announced in connexion with the opening of the new winter session at the various medical schools in London.

The St. Bartholomew's old students' dinner will be held on Wednesday, October 1st, in the Great Hall of the Hospital at 7 for 7.30 p.m., with Dr. J. H. Drysdale in the chair.

The prizes to students at Charing Cross Hospital Medical School will be distributed on Wednesday, October 1st, at 3.30 p.m., by Sir Humphry Rolleston, Bt., President of the Royal College of Physicians of London. The annual dinner of past and present students will be held on the evening of the same day at Gatti's Restaurant, when the chair will be taken at 7.30 by Mr. Charles Gibbs, senior surgeon to the hospital.

The prizes at St. George's Hospital Medical School will be distributed on Wednesday, October 1st, at 3 p.m., by Sir Isambard Owen, M.D., who will also preside at the annual school dinner at the Hotel Metropole on the same evening.

At the opening of the new session at King's College Hospital Medical School, Denmark Hill, on Wednesday, October 1st, at 2.30 p.m., the introductory address will be delivered by Sir David Ferrier, M.D., F.R.S., Emeritus Professor of Neuro-pathology and Fellow of King's College. The chairman of the hospital, Viscount Hambleden, will preside.

The annual old students' dinner of the London Hospital Medical College will be held on Wednesday, October 1st, at the Trocadero Restaurant, under the chairmanship of Professor William Bulloch, F.R.S.

The annual dinner of past and present students of St. Mary's Hospital Medical School will be held at the Connaught Rooms, Great Queen Street, W.C., on Monday, October 6th, when Dr. E. M. Callender, C.B.E., will take the chair at 7.30 p.m.

The winter session of the Middlesex Hospital Medical School will open on Wednesday, October 1st; Dr. Charles Porter will deliver an introductory address at 3 p.m. at the Queen's Hall on some aspects of preventive medicine, and the prizes will be distributed by Lord Birkenhead. The annual dinner will be held the same evening at 7.30 at the Hotel Cecil, when Mr. G. Gordon-Taylor will preside.

The annual dinner of past and present students of St. Thomas's Hospital will be held on Friday, October 24th, at Prince's Restaurant, Piccadilly, W., under the chairmanship of Dr. Seymour Taylor.

Owing to the sudden death of Dr. Sidney Martin, senior physician to University College Hospital, the dinner of the past and present students which was to have been held at the Hotel Cecil on October 3rd has been postponed to some date to be arranged in December.

At the University of London, University College, on September 29th and 30th from 10 a.m. to 1 p.m., first-year students of the Faculty of Medical Sciences will be received by the Provost, the Dean of the Faculty, and the Subdean. On September 29th, from 2.15 to 4 p.m., students of the Faculty of Medical Sciences other than first-year will be received; on the same day at 3.15 p.m. candidates for the Diploma of Public Health will be received by Professor Kenwood. The new buildings for anatomy, anthropology, embryology, histology, and physiology, provided from the gift of the Rockefeller Foundation, are now completely equipped.

At the Westminster Hospital Medical School the new session will begin on Thursday, October 2nd, and the inaugural address will be delivered in the board room of the hospital at 3 p.m. by Mr. H. J. Waring, on "The medical man of the future."

At the opening of the eighty-third session of the Pharmaceutical Society of Great Britain the President, Mr. F. Pilkington Sargeant, will deliver the inaugural sessional address and present the Pereira medal on Wednesday, October 1st, at 3 p.m.

NEWCASTLE.

In connexion with the opening of the winter session 1924-25 at the University of Durham College of Medicine, Newcastle-upon-Tyne, an introductory address will be given by Sir Thomas J. Horder, Bt., M.D., physician to St. Bartholomew's Hospital, in the Examination Hall of the College, on Monday, October 6th, at 4 p.m.

Medical News.

THE Royal Society of Medicine will hold its first social evening of the session at 1, Wimpole Street, London, W.1, on Thursday, October 16th, at 8.30, when Fellows and guests will be received by the new President, Sir StClair Thomson. At 9.30 p.m. Dr. Grenfell of Labrador will give a brief discourse on "Medicine in a corner of the Empire," with lantern illustrations.

THE annual dinner of the Chelsea Clinical Society will be held at the Café Royal, Regent Street, W., on Tuesday, October 21st, at 7 for 7.30 p.m.

THE second week of the course in general medicine and surgery at the Westminster Hospital begins on Monday next, September 29th; entries can still be accepted. On the 30th a four weeks' course of lecture demonstrations will be started at the Bethlem Royal Hospital. The lectures are given on Tuesdays and Saturdays at 11 a.m. by Dr. Porter Phillips and Dr. Thomas Beaton, and the fee for the course is one guinea. Commencing on October 6th, a course on tropical medicine at the London School of Hygiene and Tropical Medicine comprises a series of eight clinical demonstrations, and extends over four consecutive weeks. A series of four lecture demonstrations on treatment by electro-therapy will be given by Dr. C. B. Heald at the Royal Free Hospital, beginning on October 7th. Syllabuses of all these courses may be obtained from the Secretary of the Fellowship of Medicine, 1, Wimpole Street, W.1.

A COURSE of instruction for health visitors and child welfare workers commences at the Royal Sanitary Institute, Buckingham Palace Road, London, S.W., on September 29th, as a preparation for the health visitors' examination of the institute. The subjects to be dealt with include vital statistics, health legislation, duties of health visitors, antenatal and infant hygiene, house sanitation, and home visiting. In connexion with the course visits will be paid to welfare centres, clinics, and schools for mothers. A course of practical training for meat and food inspectors will be held at the institute from October 3rd onwards.

AT a meeting of the Medical Officers of Schools Association to be held on Wednesday afternoon, October 8th, at 11, Chandos Street, Cavendish Square, W.1, Dr. Robert Hutchison will open a discussion on the relative values of stone-milled and other flours and breads in relation to the nutrition of the growing child. There will be an illustrative exhibit of stone-milled flours, breads, and other wheaten foods, etc. Tea will be served at 4.30, and the discussion will continue from 5 to 7 o'clock.

THE thirteenth annual general meeting of the British Commercial Gas Association will be held at Liverpool on Monday, Tuesday, and Wednesday of next week. The programme includes a lecture by Dr. C. W. Saleeby on "Light and Life," and an address by the Bishop of Liverpool on "The Worker and his Work."

AN epidemic of bacillary dysentery has recently broken out in Pomerania.

THE Ministry of Health announces that the statements in a recent issue of the *Daily Express* as to the stamping out of tuberculosis within the next ten years, and as to the Spahlinger treatment for tuberculosis, are incorrect and unauthorized. The most recent official statements as to the decline in tuberculosis and the Spahlinger treatment are contained in the Annual Report of the Ministry for 1923-24 and the Report of the Chief Medical Officer for 1923.

THE second number of the *Junior Red Cross Journal*, just published by the British Red Cross Society, contains an account of the work and methods of the Junior Red Cross in health education. A description is given of the Star and Garter Home for Disabled Sailors and Soldiers at Richmond and the special work performed by the Red Cross in connexion with the Scout Jamboree at Wembley. The number is well illustrated and should interest, as well as instruct, the children to whom it is addressed.

DR. F. J. WALDO, at the Southwark coroner's court, on September 19th, referred to the new regulation of the London County Council disallowing fees to medical officers of Poor Law institutions for making necropsies. In his other jurisdiction in the City of London he still continues to pay the Poor Law and prison medical officers their statutory fee of 1 guinea for performing a necropsy, and 1 guinea for giving evidence when called upon by himself as City coroner. Dr. Waldo said he had always been in favour of a fee of 2 guineas being paid for a complete *post-mortem* examination performed on a coroner's order, as was the practice in Australia, together with a fee of 1 guinea a day for giving evidence, this being payable to all registered medical practitioners without distinction.

THE sixteenth report of the Norwood Sanatorium for the Treatment of Alcoholism and other Drug Habits (The Mansion, Beckenham Park, Kent) covers the three years 1921, 1922, and 1923. During the first of these years 201 patients were admitted, and during each of the second and third 214 patients. The report includes clinical notes by the medical superintendent, Dr. Francis Hare, and an account of the treatment adopted.

THE Tokyo death rate has increased 100 per cent., as compared with the period before the earthquake last year. This is largely due to the prevalence of infectious diseases, including typhoid fever. It is officially reported, however, that contagious diseases are rare among those living in improvised dwellings owing to the precautionary measures in force. On July 10th a medical examination was made of 22,284 persons out of the 43,774 so accommodated, with the result that no case of infection was detected, there being brought to light only three cases of sunstroke, seventeen of influenza, and sixty-four of intestinal catarrh.

DR. M. JEAN CAMUS, professor of physiology at the Paris Medical School, has been elected a member of the French Academy of Medicine.

THE following congresses of Italian societies have been arranged. The thirteenth Congress of Stomatology will be held at Naples from October 13th to 17th, when the following subjects will be discussed: rearrangement of odontological studies, introduced by Professor A. Beretta of Bologna; pathogenesis of dental caries, introduced by Professor G. Manicardi of Modena; odonto-facial neuralgia, introduced by Dr. G. Grandi of Trieste. The Congress of Pediatrics will be held at Milan from October 22nd to 25th, when C. Pestalozza and C. Doria will introduce the subject of the determination of the food ration in the child; G. Berghinz the subject of diathesis and constitution in infancy; whilst "parascholastic" institutions and their hygienic and social importance will be discussed by M. Raspi. The Congress of Surgery will meet at Milan from October 26th to 28th; a discussion on sympathectomy will be introduced by G. Uffreduzzi, and another on indications for operation in splenomegaly by F. Micheli and Cappelli. The Congress of Internal Medicine will follow the Congress of Surgery at Milan from October 28th to 31st, and deal with the following subjects: suprarenal syndromes, introduced by M. Pende and C. Piazza; and progress in the diagnosis of nephritis, introduced by L. Ferranini; the members will unite with those of the Congress of Surgery in the discussion of operation in splenomegaly. The Italian Society of Urology will hold its annual meeting at Milan on October 23th, when G. Lasio will speak on diverticula of the bladder, and C. Bruni and S. Colombino will discuss fulguration of the vesical mucosa. The twenty-first congress of the Italian Society of Dermatology and Syphiligraphy will be held at Padua in the second fortnight of December, when the subjects to be discussed will be experimental cutaneous cancer, introduced by Professor E. Bizzozzero of Turin, and the cure of syphilis, introduced by Professor L. Tommasi of Florence.

THE eleventh French Congress of Hygiene will be held in Paris from October 20th to 24th, when the following papers will be read: Instruction in hygiene in France, by MM. Dequidt and Rochaux; preliminary report on instruction in hygiene abroad, by M. Léon Bernard; instruction in hygiene in secondary schools, by M. Pacaut and Mlle T. Robert; instruction in hygiene in technical institutes, by M. Fras; experimental hygiene and laboratory research, by M. Dujarric de la Rivière; general hygiene and social hygiene, by M. Briau; cleansing of used water, by M. Dienert; role of sunlight in the growth of the child and the physiological equilibrium of the adult, by M. Armand Delille. Admission to the congress is free. Further information can be obtained from M. Bossus, 142, Boulevard Montparnasse, Paris.

THE third International Congress of Military Medicine and Pharmacy will be held in Paris from April 20th to 25th, 1925. An executive committee has been formed, consisting of Inspector-General Vincent as president, Drs. Achard, Dopfer, Faure, Hartmann, Lejars, Nobécourt, Teissier, and others.

THE tenth French Congress of Legal Medicine will be held at Lille from May 18th to 20th, 1925, under the presidency of Dr. J. Leclercq of Lille, when the following subjects will be discussed: (1) Death from "inhibition," introduced by Dr. Duvoir of Paris; (2) Trauma and malignant growths, introduced by Drs. Cordonnier and Mullen of Lille; (3) The criminality of persons with skull wounds, introduced by Dr. Porot of Algiers.

THE French Society of Ophthalmology, at the invitation of the corresponding Belgian Society, will hold its thirty-eighth congress in Brussels next year, commencing on May 11th.

A BUST of the celebrated sixteenth century physiologist, Santorio Santorio, was recently unveiled at Capodistria at the termination of the Italian Congress of Hydrology.

Letters, Notes, and Answers.

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ALL communications with reference to advertisements as well as orders for copies of the JOURNAL should be addressed to the Financial Secretary and Business Manager, 429, Strand, London, W.C.2. Attention to this request will avoid delay. Communications with reference to editorial business should be addressed to the Editor, BRITISH MEDICAL JOURNAL, 429, Strand, W.C.2.

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

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MEDICAL SECRETARY, *Mediscra Westrand, London.*

The address of the Irish Office of the British Medical Association is 16, 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.

"A. P." (Pretoria) desires to find a paper by Hutchinson which deals with the aspects of colonies of bacilli as seen in microscopic sections. Schubert (*Centralbl. f. Bakt., Originale*, 1920) refers to it, but omits to say where it was published. Efforts to trace the paper in South Africa have proved fruitless. A letter addressed to Dr. Schubert has not been answered.

TREATMENT OF ALOPECIA.

"MEDICO" asks for suggestions for the treatment of a case of alopecia (non-syphilitic) in a patient who so far has resisted the usual washing with Hebra's soap spirit and ordinary hair tonics.

CONSTRUCTION AND EQUIPMENT OF ANTE-NATAL, TUBERCULOSIS, AND OTHER CENTRES.

"SANITAS" would like to know of a book dealing specially with the public health services in relation to ante-natal work, maternity centres, tuberculosis and venereal disease dispensaries, and treating of the size, equipment, etc., of such centres for rural and urban areas, small towns, and large cities.

* * We have made inquiries, but have failed to hear of any work of the kind.

INCOME TAX.

"W. J. D." has a practice in Malaya, but is residing temporarily in this country. He receives monthly remittances of the profits of his practice after payment of the fees of his locumtenent. How should the income be assessed?

* * Our correspondent should consider the facts of the case and decide whether he is in fact still conducting the practice through his locumtenent or whether he has for the time being given up control of the practice. In the former case he would be able to claim the "earned" relief, but might be held liable to account for tax on the net unremitted profits (if any); in the latter case he could return the income as derived from a "foreign possession" liable on the basis of the actual sums remitted. On that footing his liability works out as follows for 1924-25:

Income from practice in Malaya ...	...	£350	
Income from investments in Malaya ...	...	£270	
			£620
Deduct—Personal allowance (married) ...	...	£225	
Children allowance (2) ...	...	£63	
			£288
Income liable to tax ...	...	£342	
Of which £225 is chargeable at 2s. 3d. ...	...	£25 6 3	
£117 4s. 6d. ...	...	£26 6 6	
			£51 12 9

No deductions are due in respect of the purchase of the car in this country or the expense of attending post-graduate classes; such expenditure is in the nature of capital outlay, and in any case is not incurred in the earning of the income now received from Malaya.

"D. G. C." inquires whether he is liable to pay local rates in respect of a house which has been standing empty but for which he has been paying rent.

* * If the house was empty—that is, not containing furniture—there was no beneficial occupation and the rates are not legally enforceable.