

over a bolus of food, in much the same way as that in which a snake appears to creep forward over a rabbit when swallowing it.

The obstructing action of the powerful and tonically contracted crico-pharyngeus muscle was pointed out, and the function of the muscle was described as one related to the necessity for prevention of air entrance into the oesophagus during inspiration, in order to ensure its passage into the lungs. This function was said to be most important in those animals with a narrow laryngeal aperture and in those which close the glottis when the thorax needs to be fixed during independent use of the fore limbs.

The function of the cartilages of Santorini was given as that of suspension of the oesophagus, in such a way that when the larynx is closed for deglutition the oesophagus is opened in a funnel-like manner.

The absence in man of longitudinal muscle fibres in the posterior part of the pharynx at its lower end was compared with the condition in various animals.

The role of the posterior palatine folds was spoken of in relation to olfaction and deglutition, especially with regard to direction of food into the mouth of the oesophagus; and it was pointed out that keen-scented animals have strong folds in close relation to the larynx, and that most herbivorous species have a complete girdle called the arcus palato-pharyngeus, made up of these palatine folds united posteriorly.

It was shown how descent of the larynx in the neck of man for various reasons has led to fanning out of the inferior constrictor muscle.

The reasons why pharyngeal diverticula do not occur in various types of animals was compared with the condition of man, in whom the predisposing factors were given as these. First, descent of the larynx and fanning out of the inferior constrictor muscle, associated with absence of longitudinal fibres in the lower pharynx posteriorly, so that during swallowing upward pull of various muscles and downward pull of the oesophagus cause stretching in the position where a diverticulum arises. Secondly, lack of relaxation of the crico-pharyngeus muscle because of delayed passage of an excessively large bolus. Thirdly, absence of directing posterior palatine folds because of the degeneration of the olfactory sense and the lack of necessity for combined respiration and deglutition. And lastly, attachment of the oesophagus in part to the cricoid cartilage, and not entirely to the cartilages of Santorini, with the result that funnel-like opening is not efficient.

[The paper will be reported in full in the *Journal of Laryngology and Otology*.]

## Memoranda:

### MEDICAL, SURGICAL, OBSTETRICAL.

#### ACUTE APPENDICITIS IN AN OCTOGENARIAN.

Cases of appendicitis in patients over 80 years of age must be rare.

Mrs. P., aged 86, suffered from acute abdominal pain late one afternoon. Dr. Owen Foulkes Evans was called in and suspected acute appendicitis; the temperature was slightly elevated. Next day she was worse, and I saw her in consultation and found great abdominal tenderness in the right iliac fossa, and rigidity; the temperature was 100° F. It was now definitely a case of rapid acute appendicitis. She was operated upon twenty-two hours from the commencement of the symptoms, and we found, immediately under the parietal peritoneum, a large, green, distended appendix showing a pale area at one spot; the appendix was evidently on the point of bursting. On removal it was found to be full of stinking material, and the whole was gangrenous. There was some turbid material in the pelvis. She made an uninterrupted recovery. The wound was not drained.

Liverpool.

W. THELWALL THOMAS.

#### RECTAL INJECTION OF TARTAR EMETIC FOR BILHARZIASIS.

SINCE reading, at the time, the article by H. F. Wilson of Livingstonia, Nyasaland, published in the *BRITISH MEDICAL JOURNAL* of January 28th, 1922 (p. 137), giving the results of his treatment of bilharziasis by rectal injections of tartar emetic, I have, since that date, and in consequence of reading that article, used exclusively that treatment.

I commenced, as he did, with graduated doses, but ultimately came to the conclusion that a single dose, large enough to destroy the parasite, was the only rational treatment for this disease.

I have given as much as 19 grains in one dose, without unpleasant effect. But this was not given as a first dose; neither was it given to a case of bilharziasis. I have not given a larger dose than this, because 19 grains is so much in excess of the minimum dose universally lethal to the parasite that to experiment with larger doses seemed useless. The last case I treated, a native boy of about 17, had but one injection, of under 6 grains. After this injection the ova disappeared.

I dissolved the weighed dose of tartar emetic in four ounces of warm water, and injected with a four-ounce all-metal ear syringe, over whose metal nozzle had been drawn the soft rubber conical end-piece shown in Down Brothers' catalogue, as No. 1683, on p. 389. With vaseline applied to the anal canal, the insertion of this soft rubber end-piece is easy. I think half an hour in the recumbent position, after the injection, is sufficient, and have been indifferent as to whether the bowel was emptied previously or not.

The simplicity, safety, convenience, and efficiency of the rectal administration of tartar emetic appear to make its intravenous injection in bilharziasis no longer a justifiable treatment; and they further appear to open up new possibilities in the direction of eliminating human schistosomiasis from any district. Whether the routine injections towards that end should be given every seventy days, or at some other interval, will have to be decided by further experiment.

London.

J. BARCROFT ANDERSON, M.D., D.P.H.

#### TORSION OF A LARGE DERMOID OVARIAN TUMOUR.

THERE were some circumstances in the following unusual case of a dermoid ovarian tumour which are of interest.

A single woman, aged 39, a cook, was exceptionally uncommunicative towards her mother and sisters, and never discussed her health with them. She resolutely avoided medical advice.

When first seen, at 9 p.m. on June 19th, the abdomen was enormously distended, and she was acutely ill. She said that for the last ten years she had noted a fullness and swelling of the abdomen which had gradually increased, but although she had lost weight recently she had carried on her work and even cycled up to seven days before.

On June 10th, preparatory to a day's excursion in a car, she said she had laced her corsets extra tightly, and that she had been jolted about because she had been seated on the floor of the car on the return journey. She felt very ill that evening and suffered thereafter from severe vomiting, and diarrhoea, coupled with rapidly increasing abdominal distension. It seemed almost incredible that the abdominal wall could stand the tension existing; the temperature was 102° F., and the pulse rapid. She was immediately transferred to Cirencester Hospital, where she was operated on at 11 p.m.

The tumour was exposed through a left paramedian incision, and was found to be markedly adherent to the parietal peritoneum. The wall of the tumour was a quarter of an inch thick, and densely adherent to it were most of the coils of the small intestine and great omentum. An incision released approximately 4 quarts of yellow pultaceous fluid. The tumour arose from the left ovary and had undergone torsion; it was removed. The patient stood the operation well but died four days later.

The tumour was exceptionally big, weighing, after the loss of the 4 quarts of fluid, 18 lb., which makes the total weight approximately 25 lb. It was multilocular and contained masses of yellow pultaceous material mixed with hairs, together with portions of bone, cartilage, and fibrous tissue.

The remarkable feature of the case was the small interference this huge tumour had produced and the way in which the patient had even cycled until seven days before the operation.

The rapidity of the final enlargement was another astonishing feature, and the provisional diagnosis when she was first seen, of an ovarian tumour with torsion of the pedicle causing oedema of the tumour, seems to be the best explanation of the chain of events.

J. S. ROBINSON, M.B.Dub., F.R.C.S.Ed.,  
Honorary Assistant Surgeon, Cheltenham  
General Hospital.

J. H. GROVE-WHITE, M.D.Dub.,  
Physician, Cirencester Hospital.

## Reports of Societies.

### OSTEOPATHY, CHIROPRACTIC, AND MEDICINE.

At a crowded meeting of the Medical Society of London on October 12th, Sir HOLBURN J. WARING was inducted in the chair of the society by his predecessor, Dr. E. M. CALLENDER, and delivered his presidential address, taking for his subject "Osteopathy, chiropractic, and medicine." The address is printed in full at page 679. After a vote of thanks had been accorded, discussion was called for.

Sir STCLAIR THOMSON said that it was rather depressing to national pride to think that all these things seemed to arrive in England when they were dying out in their own country. It reminded him of what the Germans used to say, that Oxford was a place where German philosophy went when it died. These various cures led sometimes to confusing results, and he recalled a remark by Henry James, who, talking of the mind cure and the faith cure, explained that the difference between the two was that the mind cure required no faith, and the faith cure required no mind. The speaker told the story of a lady of the manor, a "Christian Scientist," who, meeting a little girl whose mother was ill, told her to tell her mother that she was not ill, but only thought she was. A few days later the lady met the child again, and the child, on being asked how her mother was, replied, "Please, ma'am, she thinks she's dead!" The president had suggested some methods of combating quackery, but the speaker feared that for his own part he was getting somewhat cynical. He called to mind the remark of Carlyle about the inhabitants of these islands; also a remark of Bishop Creighton, quoted by one speaker at the recent Church Congress, that although it might be true that the tiger and the ape in man had died, there was plenty of evidence that the donkey still survived. He had often wondered why these things were so popular in America and in this country, and apparently had no vogue in France or Italy, but in those Continental lands there were healing shrines and doubtless other forms of supposed cure which could claim remarkable results in functional disorders.

Dr. DES VOEUX reminded the meeting that quacks had existed throughout the history of medicine. They would continue to exist, and he thought that as long as the medical profession could not cure all ailments quacks ought to exist. If they did any good they were a benefit to the public, and if they did any harm they were a benefit to the profession! When "bonesetters" first came in they "wiped the eyes" of many elect surgeons, and most medical men had experience of cases in which these persons had got rid of aches and pains and had cured people of their disabilities when the doctors had been unsuccessful. From what he had heard from his own patients the same thing was true of osteopaths: by their manipulations they sometimes broke down adhesions about the spine, and thus gave relief to reflex pains elsewhere. It would be most unwise for the profession to do anything to discourage this sort of irregular practice. He had known very many cases where such persons had done no good, but he had known very few cases where he could honestly say that they had done a great deal of harm, and at any rate it was a comfort to patients to feel that if the doctors could do nothing for them they could go to somebody else. There were people who had incurable cancers, and discovered some new flicker of hope by this recourse, and he did not think they should be discouraged. What he did dislike was quackery within the profession.

Dr. E. M. CALLENDER did not agree. He had seen many sad cases in high positions in society. He knew of a case in which three children were allowed to die of tuberculous meningitis without any steps being taken to protect them from the disease other than "Christian Science" treatment. He had seen a family of children in a West End square treated by an osteopath for whooping-cough, and allowed to cough and vomit and lie awake at night with nothing done for them except the rubbing of their backs. One lady came to him to be treated for some other condition, and he noticed her cough, which was symptomatic of chronic bronchitis, but she told him that she did not want his treatment for that because she was being treated for it by an osteopath.

Mr. J. E. H. ROBERTS said that a few months ago he saw a case which had an interesting bearing on the discussion. It was that of a man who had had a bullet wound and other injuries in the war, and had suffered for some time from incomplete paraplegia, but recovered completely, and had had no ill effects for four or five years. At the end of that time he began work as a dustman, and on lifting the heavy bins got severe pain in the lumbar region. On x-ray examination it was quite evident from the lateral view that he had a subluxation of the second lumbar vertebra upon the third, the displacement forward being nearly half an inch, and he had bony changes in the articular processes. The bullet, which was lying harmlessly in the muscles, had nothing to do with the pain, but the bone displacement, the result of another injury, gave trouble when the man lifted heavy weights. With that kind of displacement, according to the theory of the osteopath, there should be compression of the nerves coming out from the intervertebral foramen, but the man had no pain at all from those nerves, nor did he develop appendicitis or carcinoma or any other fell disease. The speaker happened to meet an osteopath—a "D.O." of somewhere in America, who had also a British medical qualification—and said to him, "You say you can cure by osteopathy subluxation of the spine. Here is a condition which has been present for five years. Can you reduce it?"—and he showed him the x-ray photograph. "Oh," said the osteopath, "but that is a real subluxation! I should not advise you to touch that." It was very interesting to observe the attitude of the osteopath when confronted with a lesion which was demonstrable on an x-ray plate.

Mr. WARREN LOW could not echo Dr. des Voeux's eulogies, though he agreed that the profession should leave them alone. He did not think that a medical organization ought to take any notice of irregular practitioners, by prosecution or otherwise, but it was very necessary for medical men individually to keep clear of them, and it was a pity that any members of the profession should meet them, even occasionally, in consultation. Sir Holburn Waring's suggestion had been that some department of State should undertake the education of the public so that they might be possessed of sufficient knowledge of themselves to see through the claims of some of these persons. There was one group of cases in which sometimes the osteopath had his greatest successes: persons who had sustained some injury to the back and had complained of pain for a long time afterwards. The course of events depended a good deal upon the class of society to which such people belonged. If they belonged to the leisured class, with no financial interest in the continuance of their disability, they were cured quickly by the osteopath or got well of themselves. But the speaker had had to do with certain cases of men who got more or less of a living out of it, men who were perhaps hurt on the railway five years ago and had had pain ever since, and he had never yet found an osteopath who could cure them.

Dr. E. GRAHAM LITTLE, M.P., said that the question of osteopathy would probably come up in the House of Commons quite soon as a consequence of the meeting held at the House six months ago. That meeting had been called by a number of members who were in favour of osteopathy, and was addressed by a qualified medical man who had forsaken the ordinary practice of medicine for this new cult. All the medical members of Parliament attended the meeting, and after an hour's talk by the visitor each of them was allowed three or four minutes, after which they

of Nottingham (1899). He also wrote a booklet on *Excavations at the Nottingham General Hospital during the Building of the New Wing* (1899). He had to fight for his position, and reached the goal in spite of difficulties. He fought without enmity, and did not cherish any aftermath of bitterness. He was of a kind and generous disposition, as many of his colleagues can testify, to whom he freely gave his time and skill in their sicknesses. To one of these who thanked him for his help he said, "Think of the pleasure I have had in doing it."

After leaving Nottingham Mr. Chicken acted as ship surgeon for a year or more, in the hope of regaining his health. During the war he held the post of surgeon to the Whipps Cross War Hospital, Leytonstone. He also resided at Hemel Hempstead and Chichester. His last home was at Sandgate, Folkestone. He leaves a widow, one son, and two daughters.

#### C. F. SONNTAG, M.D. EDIN.,

Prosector, Zoological Society of London; formerly Hydrologist, Military Orthopaedic Hospital, Shepherd's Bush.

DR. CHARLES FREDERICK SONNTAG, Prosector to the Zoological Society of London, died suddenly on October 10th at his residence in Belsize Park Gardens. He had contracted phthisis while on active service during the war, and his death, at the early age of 37, was attributable to this.

He was a native of Glasgow, and received his medical education at Edinburgh University, where he graduated M.B., Ch.B. in 1910, and proceeded M.D. with honours in 1912. Soon after the outbreak of war he joined the Royal Army Medical Corps and saw active service as regimental medical officer in several units of the Salonika Expeditionary Force. In 1916 he was invalided home, and the end of the war saw him in charge of the hydrotherapy department in the Military Orthopaedic Hospital, Shepherd's Bush. Although in the years after the war he became engrossed in anatomical research, he still continued his interest in hydrotherapy, and for some time acted as honorary secretary of the Balneological Section of the Royal Society of Medicine.

Sonntag even when at school had made a study of zoology and comparative anatomy, and was always insistent on the value of this training in his medical and surgical work. While engaged in his duties at Shepherd's Bush he attracted the notice of Professor F. Wood Jones, who, quick to notice Sonntag's abilities as a comparative anatomist, recommended him for the post of Prosector to the Zoological Society, to which position he was elected by the Council in August, 1919. In spite of his failing health he threw himself into his new work with great ardour and enthusiasm, and the thirty papers on vertebrate anatomy which he contributed to the *Proceedings* of the society in the ensuing six years bear witness to his boundless energy. Much of his work was on the anatomy and physiology of the anthropoid apes, and in addition to several papers on this subject, in 1924 he published a treatise on the morphology and evolution of the apes and man. Besides his work at the Prosectorium he held the post of demonstrator in anatomy at University College.

He will be mourned by a large circle of friends, who looked upon him with that respect which is earned by honest hard work, and will remember him for his ready wit and cheery optimism in the face of much physical suffering. The funeral took place at Fortune Green Cemetery, Hampstead, on October 13th. Among those present were Sir Arthur Keith, Professor Elliot Smith, Professor J. P. Hill, Dr. P. Chalmers Mitchell, and many other scientific friends and colleagues.

G. M. V.

#### THE LATE DR. W. MORRISTON DAVIES.

Dr. J. B. PIKE (Loughborough) writes: With regret I saw in the *JOURNAL* of October 3rd (p. 629) an obituary notice of Dr. Morrison Davies. My chief recollections of him date back about fifty years, when he was the junior partner in the firm of Foster Lucas and Davies. I was house-surgeon at Huntingdon County Hospital, and repeatedly I went with Dr. Davies to give an anaesthetic or to assist at an operation. Dr. Davies was one of Lord

Lister's early pupils, and introduced antiseptic surgery at Huntingdon with its primary technique. I remember one case of breast amputation in which haemorrhage was kept up by the warm carbolic spray and ceased on its discontinuance. My memories of Dr. Davies are all happy ones, recalling to my mind youthful friendship and enthusiasm.

Professor O. KUKULA, director of the first surgical clinic, and Rector Magnificus of the University of Prague, has recently died at the age of 58. He was the author of an important monograph on the pathology and treatment of appendicitis.

## Universities and Colleges.

### UNIVERSITY OF CAMBRIDGE.

THE following candidates have been approved at the examinations indicated:

D.P.H. (BOTH PARTS).—*Old Regulations*: J. R. Hayman, J. A. G. Keddie, W. B. Stott. *New Regulations*: A. N. Fergus, Mary K. Henegan, R. A. Mansell, C. F. Pedley, \*C. J. Stocker, F. C. Tibbs, †M. K. Yus. DIPLOMA IN HYGIENE.—A. R. Hassan, L. Shehata.

\* Distinguished in Part I. † Distinguished in Part II.

### UNIVERSITY OF LONDON.

At the matriculation examination of the University of London, held in September, there were 42 successful candidates in the first division and 411 in the second division; in addition, 57 took the supplementary certificate for Latin.

### UNIVERSITY OF ABERDEEN.

At the opening of the winter session in the Faculty of Medicine of the University of Aberdeen on October 6th the Principal of the University, Sir George Adam Smith, welcomed informally Dr. Alexander Low, the newly appointed professor of anatomy in succession to Professor R. W. Reid, who has retired after thirty-six years' tenure of the chair. Tributes to Professor Reid and Professor Low were paid by Professor J. A. MacWilliam in his opening address to the class in physiology, and by Professor Ashley Mackintosh in opening the class in medicine.

### UNIVERSITY OF ST. ANDREWS.

At the graduation ceremony held at St. Andrews University on October 9th Principal Sir James Irvine inducted Mr. David Dow, M.B., Ch.B., D.P.H., to the chair of anatomy in University College, Dundee. There was a large attendance of students. In welcoming Professor Dow the Principal said he had fitted himself for promotion by a diversity of experience gained in a wider atmosphere than that of the classroom. For ten years he had combined his university studies with the practice of his profession in Fife, and had found time to carry out researches.

### UNIVERSITY OF DUBLIN.

#### SCHOOL OF PHYSIC, TRINITY COLLEGE.

THE following candidates have been approved at the examinations indicated:

FINAL M.B.—*Part I*: \*S. Behr, Wilfreda D. C. T. Pigott, W. F. Lane, R. M. Moore, G. M. Smith, P. M. Garry, T. F. M. Woods, L. R. S. MacFarlane, C. L. Day, N. Burstein, D. M. Carson, G. M. Donald, A. C. C. Charles, J. A. K. Fitzgerald. *In completion*: Kathleen R. Byrne, Evelyn E. Connolly, D. Bléwitt. DIPLOMA IN GYNAECOLOGY AND OBSTETRICS.—J. Rego, Amy B. R. A. Ferriton.

\* Passed on high marks.

### ROYAL COLLEGE OF PHYSICIANS OF LONDON.

#### Streatfeild Research Scholarship.

MR. NORMAN LESLIE CAPENER, F.R.C.S., has been appointed Streatfeild Scholar. The subject of his research will be "The comparative anatomy and function of the prostate gland." The research will be carried out at St. Bartholomew's Hospital and the Zoological Society.

### ROYAL COLLEGE OF SURGEONS OF ENGLAND.

A QUARTERLY Council meeting was held on October 8th, when the President, Sir John Bland-Sutton, Bt., was in the chair. Diplomas of Membership were granted to eight candidates.

#### The Gilbert Blane Medal.

The Sir Gilbert Blane medal was awarded to the following medical officer of the Royal Navy in respect of the Promotion Examination, 1925: Surgeon Lieutenant Commander Lionel Frederick Stragnell, M.B., B.S.

#### Lectures.

The Bradshaw lecture on gas-ro-jejunostomy will be delivered by Mr. James Sherreu on Wednesday, November 11th, at 5 p.m., and the Thomas Vicary lecture on "The mediaeval conception of the anatomy and physiology of the central nervous system" by Professor William Wright on Wednesday, November 18th, at 5 p.m.

## Medical News.

A COURSE of four lectures on general anaesthesia, arranged by the Dental Board of the United Kingdom, will be given during the present winter session. The first lecture, entitled "Respiration in anaesthesia," and the second, on the absorption and elimination of volatile substances in the lungs, will be delivered by Professor Yandell Henderson of Yale University. The third lecture, on the circulatory changes in anaesthesia and the use of oxygen, will be given by Professor Leonard Hill, M.B., F.R.S., and the fourth by Professor Noël Paton, M.D., F.R.S., on the metabolic changes in chloroform poisoning. The lectures will be delivered in London at the Royal Society of Medicine, 1, Wimpole Street, on October 22nd, 23rd, and 30th, 1925, and January 11th, 1926, at 8.30 p.m.; in Manchester, in the Medical School, University Buildings, on October 26th and 27th and November 3rd, 1925, and January 13th, 1926; and in Edinburgh, in the University, on October 29th and 30th and November 5th, 1925, and January 15th, 1926, at 5 p.m. The course is intended primarily for dentists and medical practitioners; tickets of admission are not required.

THE Fellowship of Medicine announces that Dr. Marcus Paterson will give a lecture on the diagnosis of pulmonary tuberculosis on October 19th, at 5.30 p.m., in the lecture hall of the Medical Society of London, 11, Chandos Street, W.1; members of the medical profession will be welcome. The Chelsea Hospital will hold a three weeks' course from November 2nd, consisting of demonstrations, operations, and lectures by members of the staff. Throughout November the London Lock Hospital has arranged a comprehensive course in venereal diseases. The Royal Waterloo Hospital will give a course from November 23rd to December 12th in the study of diseases of children and women from all aspects. From November 3rd to November 28th Dr. Porter Phillips and Dr. Thomas Beaton will give lecture-demonstrations twice weekly on psychological medicine. An evening course for general practitioners has been arranged at the London Temperance Hospital from November 1st to 13th. There will be a course in diseases of the chest, heart, and lungs at the Victoria Park Hospital from November 9th to 21st. Copies of any syllabus and of the general programme may be obtained from the Secretary, 1, Wimpole-street, W.1.

DR. PATRICK WATSON-WILLIAMS will deliver the Semon Lecture in the Robert Barnes Hall of the Royal Society of Medicine on Thursday, November 5th, at 5 p.m.

THE Devon and Exeter Medico-Chirurgical Society will hold its first meeting on Friday, October 23rd. An address will be given by Sir StClair Thomson on the surgical anatomy of the nose and accessory sinuses.

AT the next meeting of the Medical Officers of Schools Association, which will take place at 11, Chandos Street, W.1, on Friday, November 6th, at 4.45 p.m., Dr. A. I. Simey, medical officer to Rugby School, will read a paper on the prophylaxis of common colds.

THE annual dinner of the University of Bristol Association of Alumni (London Branch) will be held at 7.45 p.m. on November 6th at Pagan's Restaurant, Great Portland Street, W. Viscount Haldane will preside and Professor Lloyd Morgan will be the guest of the evening. The charge for the dinner is 9s., exclusive of wine. Further particulars can be obtained from Dr. Elizabeth Casson, Holloway Sanatorium, Virginia Water.

FOLLOWING the opening lecture of the winter session at the Central London Throat, Nose, and Ear Hospital by Dr. William Hill on October 6th, the annual dinner of the medical staff was held at the Trocadero Restaurant the next evening, with Mr. Harold Kisch in the chair. A total of fifty-two were present, and among the guests were the lecturer, Dr. William Hill, Sir StClair Thomson, President of the Royal Society of Medicine, Sir W. Arbuthnot Lane, President of the Fellowship of Medicine, Sir Thomas Horder, Dr. W. H. Kelson, Mr. Herbert Paterson, Mr. Herbert Tilley, Mr. C. J. Badgerow, Mr. T. B. Layton, Dr. Watson-Williams, Dr. J. H. Chaldecott, and the chairman of the committee of management of the hospital.

THE annual dinner of the Manchester Medical School will be held in the Grand Hotel, Manchester, on Thursday, November 19th, with Mr. C. Roberts in the chair.

THE first dinner meeting of the Hunterian Society of London will be held at Simpson's Restaurant, Bird-in-Hand Court, 77, Poultry, Cheap-side, on Monday, October 19th, at 7.30 p.m. After dinner the presidential address, on light, will be given by Dr. F. Howard Humphris.

DR. JEAN CHARCOT, the well known explorer, and Dr. Sébilleau, professor of oto-rhino-laryngology in the Paris Faculty of Medicine, have been nominated Commanders of the Legion of Honour.

THE annual sermon of the Royal College of Physicians of London, recently re-established by the Charity Commissioners under the Sadlier Trust, will be preached at the Church of St. Mary-le-Bow on Monday, October 19th, at 12 o'clock.

THE freedom of the borough of Abergavenny has been conferred upon Dr. William Dyne Steel, who recently retired from the office of medical officer of health for the borough after forty-two years' service. Dr. Steel was formerly President of the South Wales and Monmouthshire Branch of the British Medical Association and Representative and Chairman of the Monmouthshire Division.

DR. J. CROSBIE DIXEY of Barnstaple has accepted the unanimous invitation of the Barnstaple Town Council to become mayor of the borough for the ensuing year.

DR. FRANCIS MARRIOTT of Alfreton has been added to the Commission of the Peace for the county of Derby.

DR. HUBERT V. LEIGH, on the occasion of his leaving Trebarris, has received from his friends and patients an illuminated address, and Mrs. Leigh a silver tea and coffee service.

AT the annual meeting of the Royal Academy of Medicine in Ireland held on October 9th the following officers were elected: *President*: Sir James Craig. *General Secretary*: Dr. T. P. C. Kirkpatrick. *Secretary for Foreign Correspondence*: Dr. L. L. Cassidy. *Presidents of Sections*: (Medicine) Dr. F. C. Purser; (Pathology) Dr. Joseph W. Bigger; (Surgery) Mr. R. C. B. Maunsell; (Anatomy and Physiology) Dr. C. M. West; (Obstetrics) Dr. D. G. Madill; (State Medicine) Dr. V. M. Synge.

A STATUE to Pasteur was unveiled recently at Rio de Janeiro.

AN anonymous donor has given £50,000 to the London Hospital. The gift, which has been made through Viscount Knutsford, the chairman of the hospital, is to be devoted chiefly to research work, and special attention is to be given to rheumatic diseases and troubles arising therefrom.

DR. HARVEY CUSHING, Moseley Professor of Surgery, Harvard University, and surgeon-in-chief at the Peter Bent Brigham Hospital, Boston, Massachusetts, was awarded the Cameron prize of the University of Edinburgh last year. He will deliver three lectures in the University this month, the first on Monday next, on the circulation of the cerebro-spinal fluid; the second on Tuesday, on the pituitary gland; and the third on Thursday, October 22nd, on brain tumours. The lectures will begin at 4 p.m. on each day. Students and graduates in medicine are invited to attend.

THE King has granted to Dr. Percy G. S. Williams, Principal Medical Officer of Health, Cairo City, permission to wear the insignia of the third class of the Order of the Nile, conferred upon him by the King of Egypt in recognition of valuable services rendered.

THE thirty-second congress of the Italian Society of Surgery will be held at Rome from October 25th to 28th, when the following subjects will be discussed: (1) Treatment of Graves's disease (conjoint meeting with the Italian Society of Internal Medicine), introduced by Professor P. Fiori. (2) Intestinal obstruction (exclusive of strangulated hernia), introduced by Professors Oresle Margarucci and Ugo Stoppato.

A STAINED glass window erected to the memory of the late Dr. William Harrap Mason was unveiled recently at St. Peter's Church, Hunslet Moor, Leeds, by the Vicar of Leeds; the subject of the window is "the Beloved Physician."

SIR WILLIAM E. NICHOLLS has given the mansion Ty To Maen at St. Mellons, together with its twenty acres of parklike land, to the Cardiff Royal Infirmary for use as a convalescent home. Ty To Maen was the former residence of Mr. J. C. Gould, shipowner, and is situated in delightful country overlooking the Bristol Channel. It is expected that with but slight alterations the house will provide accommodation for some sixty or sixty-five beds.

THE September issue of *Medical Science: Abstracts and Reviews*, completes Volume XII and is the last of the series, the Medical Research Council having resolved to discontinue its publication.

THE annual report for 1924-25 of the Committee for Scientific and Industrial Research has been issued (H.M. Stationery Office; price 3s.). We hope to deal with this report later, but meanwhile may note that the expenditure amounted to £173,455, and that of this £50,000 was provided by fees for tests and for special investigations for outside firms or by contributions from co-operating bodies, and £30,000 from repayments from the Service departments for work undertaken directly for them.

THE eighth Sicilian Medical Congress, which was to have been held this month, has been postponed until next April.

THE Wellcome Historical Medical Museum will be closed for cleaning and structural alterations from October 19th until November 30th.