

very clearly the outlines of the solid abdominal viscera or of an intra-abdominal tumour. It is a method which may be given more trial in expert hands for cases of difficulty in diagnosis—as, for example, in the differentiation of a distended gall bladder from a right-sided mesenteric cyst. The oxygen gas is absorbed within twenty-four hours. It is well known that laparotomy, with or without subsequent drainage, has been of considerable therapeutic service in the serous variety of tuberculous peritonitis. What is the exact reason for the benefit which follows is still a matter of doubt, but some consider that the introduction of atmospheric oxygen may play a part. If this be so, might not the evacuation of a large proportion of fluid in tuberculous ascites and its replacement by pure warm aseptic oxygen have a similar remedial action?

#### *Nitrogen in the Peritoneal Cavity.*

The formation of adhesions in the peritoneal cavity, either spontaneously or after laparotomy, is a very real matter, and may have serious consequences. Undoubtedly prophylaxis is of the utmost importance. The introduction of a harmless and not quickly absorbed gas into the peritoneal cavity might have a value in lessening the formation of adhesions. After a prolonged operation in which there has been considerable handling or stripping of peritoneum the whole of the incision might be closed except for a small space through which a fine catheter might be passed into the peritoneal cavity. Nitrogen, purified and warmed, may then be slowly introduced until a moderate distension of the cavity has been obtained, when the catheter should be withdrawn and a suture tied to close the abdomen. Very little if any discomfort results therefrom, even when the patient comes out from the effects of the anaesthetic.

## Memoranda:

### MEDICAL, SURGICAL, OBSTETRICAL.

#### ACUTE PHOSPHORUS POISONING.

ACUTE phosphorus poisoning is rather rare nowadays, and the following details of a case which came under my care this year may, therefore, merit recording.

A married woman, aged 37, was admitted to hospital on September 7th with a history of having swallowed a teaspoonful of phosphorus mice paste two days previously. Within a quarter of an hour of taking the paste her stomach had been washed out and sulphur administered. The patient was said to have vomited several times after the washing out of the stomach. On admission to hospital she appeared rather nervous, but answered questions quite sensibly. She said she had no pain anywhere, but had belched wind several times. She asked for food, but was only allowed water to drink since it was thought that milk might aid absorption of the phosphorus. There was no ulceration of the lips, tongue, buccal mucous membrane, or throat. The pulse was 80 and of good volume and tension; there was no hepatic enlargement, jaundice, or abdominal tenderness. Next day her physical and mental condition was apparently better, and she was allowed tea and sugar and a piece of dry toast. There was no sign of enlargement of the liver and no jaundice. The pulse remained the same, and she had no pain or sickness; the food was retained. On September 10th she was drowsy, but not comatose. She resisted strongly attempts at palpation and percussion over the lower right costal margin. Slight jaundice of the skin and conjunctivae now appeared, and the liver could be felt by deep palpation under the right costal margin. Albumin and bile were found in the urine, but no leucine or tyrosine. A few granular and cellular casts with occasional polymorphonuclear leucocytes were seen, and the urea percentage was 2. On the next day the patient was troubled with retching, but did not vomit. The jaundice was more pronounced, especially in the conjunctivae, and the lower edge of the liver was felt easily about an inch below the right costal margin. The patient appeared to be tender over this area and became restless on palpation, though she lay quietly and dozed, except when being examined. The tongue was dry and there was sordes of the mouth, but no petechial haemorrhages of the skin were observed. She became comatose and died on the morning of September 12th.

The necropsy report included the following details. There was marked jaundice of the skin and conjunctivae, some petechial haemorrhages were seen on the surfaces of both lungs, and there were fluid effusions (10 oz. and 8½ oz.) into both pleural cavities. The heart was normal in size, but showed some fatty degeneration of the wall, with well marked petechial haemorrhages in the papillary muscles. The pericardium was normal, but the cellular tissue in front of it showed obvious haemorrhages. Petechiae covered the upper surface of the diaphragm, particularly over the left dome. The liver was enlarged and there was evident fatty degeneration. The right lobe extended to the level of the third

rib above, and below to about an inch below the right costal margin, and 2½ inches below the ensiform cartilage. The abdominal viscera smelt very strongly of garlic. The spleen, which weighed 6½ oz., was deeply congested, but there was no peritonitis. The left kidney weighed 6½ oz., and there were well marked haemorrhages beneath the capsule and into the lower half of each pyramid; the capsule stripped readily. The right kidney weighed 5½ oz., and both organs showed fatty degeneration. There was no inflammation of the outer coats of the stomach. This viscus contained a blackish-brown glairy fluid resembling altered blood, which did not smell of phosphorus. Black specks, looking like altered blood, were studded over the inner coat, but these were not firmly adherent to the stomach wall. Haemorrhages were seen on the surface of the pancreas. The uterus was non-gravid and appeared to have undergone some fatty degeneration. Haemorrhages, each about the size of a split pea, studded the mesentery surface. The bladder was distended, but the urine was not luminous in the dark; no naked-eye pathological changes were found in the brain.

I am greatly obliged to Dr. Charles Gordon Lewis, resident medical officer, London Road Hospital, Newcastle, Staffs, for permission to publish particulars of this case.

C. F. SWINTON, M.B., Ch.B.

Newcastle-under-Lyme, Staffs.

#### ARTHRITIS DUE TO PARATYPHOID B BACILLUS WITHOUT GENERAL SYMPTOMS.

A FEMALE child, aged 14 months, was brought to the out-patient department of the Belfast Hospital for Sick Children, with the following history.

About two weeks earlier the child's mother had noticed a disinclination to move the left leg, and that the knee-joint was swollen. The child had previously been quite healthy, and there was no history of any infectious disease.

On admission the left knee-joint was found to be swollen, and evidently contained a considerable quantity of fluid; it was not acutely inflamed. There were no other abnormal signs on general examination and the temperature was 98.8° F.

On the following day Mr. Hall explored the joint, and a thick glairy exudate was withdrawn. From this fluid, which contained many pus cells, I was able to grow, in pure culture, a Gram-negative, actively motile bacillus. On testing the sugar reactions of this organism I found it to agree exactly with the *Bacillus paratyphosus* B. I then made an agglutinable culture by Dreyer's method, and obtained strong agglutination (up to 1 in 500) with standard *B. paratyphosus* B serum, and no agglutination with *B. paratyphosus* A nor *B. typhosus* serums. The serum of the patient also gave a strongly positive agglutination with standard *B. paratyphosus* B cultures (1 in 500), and no reaction with *B. typhosus* nor *B. paratyphosus* A. There were no general signs of paratyphoid infection. A rash did not appear, nor was the spleen ever palpable, and the stools and urine both failed to show typhoid or paratyphoid organisms on culture.

The girl remained in hospital for eleven days. The temperature was normal throughout her stay, except on two evenings when it rose to 99.6° F.

The patient was taken home, but is now attending the out-patient department, and receiving an autogenous vaccine. There has been a gradual improvement, and at the end of one month's treatment the swelling has subsided and the joint is apparently normal.

I could obtain no history of infection in the family; but several cases of paratyphoid B fever have occurred in the district in which the patient lives.

J. T. LEWIS, B.Sc., M.D., M.R.C.P.Lond.,  
Bacteriologist, Belfast Hospital for Sick Children.

#### SEVERE HAEMORRHAGE FOLLOWING VAGINAL TEAR.

THE following case is sufficiently unusual to merit record. A married woman, aged 28, ceased menstruating about 4 p.m. At midnight, immediately following coitus (the first attempt), she had a severe vaginal haemorrhage, losing about three pints of blood. On my arrival the haemorrhage had ceased, but she was suffering from very severe shock. I found it necessary to give her a subcutaneous infusion of saline, to which she responded well. The following day she was removed to hospital, where a more complete examination was made. A dense central adhesion was found between the anterior and posterior vaginal walls, leaving two small lateral apertures. This was situated about midway between the hymen and the vault of the vagina. A deep tear in the vaginal wall about 1½ inches long extended from the lateral aperture on the right side towards the hymen. The adhesion was broken down and the tear sutured. The patient made a good recovery.

Shanklin, I.W.

J. ALFRED GAYNOR, F.R.C.S.I.

were not infrequent, and gave rise to errors of judgement. Mr. Holman Gregory, for the plaintiff, maintained that it ought to have been realized from the skiagram that something was wrong, and further attempts should have been made to reduce the fracture more perfectly.

#### Verdict and Judgement.

After the judge had summed up, the jury retired for one and a half hours, and returned a verdict that Dr. Alcock had not properly set the bone, and had failed to treat the case properly afterwards. The judge then explained that the verdict was incorrect, and that the jury had to return a verdict that the defendant was guilty of negligence, if he had shown, in their opinion, an improper lack of skill. After a few minutes' absence the jury returned, and the foreman stated that a unanimous verdict had been found for the plaintiff, the damages being assessed at £2,000 for the daughter, and £150 for the mother. Mr. Odgers applied for a stay of execution, which was granted on condition that the costs of the action and £500 were paid into court by the defendant.

## Universities and Colleges.

### UNIVERSITY OF LONDON.

DR. NEVILLE S. FINZI has been recognized as a teacher of radiology at St. Bartholomew's Hospital Medical College.

The examination for the academic diploma in Bacteriology will commence on the first Thursday in July instead of the first Monday; the regulations (Red Book, 1927-28, p. 513) are to be amended accordingly.

Sir Wilmot Herringham, K.C.M.G., M.D., has been elected chairman of the Library Committee.

The following are constituted the Boards of Examiners for the first examination for medical degrees, together with the External Examiners, the chairmen of the respective boards being indicated by an asterisk: *Inorganic Chemistry*: H. J. Evans (University College) and \*C. S. Gibson (Guy's Hospital Medical School). *General Biology*: \*G. P. Mudge (East London College and London School of Medicine for Women) and W. A. Cunningham (St. Bartholomew's Hospital Medical College), or failing him, F. E. Fritch (East London College). *Physics*: W. H. White (St. Mary's Hospital Medical School) and J. E. Calthrop (East London College).

### UNIVERSITY OF DURHAM.

SIR THOMAS OLIVER, M.D., LL.D., F.R.C.P., president of the College of Medicine, Newcastle-upon-Tyne, has been appointed Vice-Chancellor of the University of Durham, in succession to Professor P. J. Heawood.

### UNIVERSITY OF LIVERPOOL.

At a meeting of the University Council, held on November 29th, a bequest was reported, under the will of the late Emeritus Professor W. Thelwall Thomas, F.R.C.S., of £5,000, to endow a Fellowship in surgical pathology.

### UNIVERSITY OF ABERDEEN.

At a special graduation held on November 29th the following diplomas were conferred:

D.P.H.—Catherine H. Baxter, Ethel R. Emslie, Winifred M. Foster, Grace M. Robinson, and Enid Ogilvie.

### UNIVERSITY OF DUBLIN.

#### SCHOOL OF PHYSIC, TRINITY COLLEGE.

The following candidates have been approved at the examination indicated:

FINAL MEDICAL EXAMINATION: *Part II, Medicine (M.B.)*—A. R. Ewart, J. E. Wells, K. Watson, E. M. Gamble, J. R. Hanna, G. H. Henry, J. H. Stephens, L. R. Hrubberg, Wilfreda D. C. T. Piggott, H. S. North, Christina McDonald. *Surgery (B.Ch.)*: \*R. B. Woods, J. K. Harper, G. McDonald, G. M. Smith, Ethel M. Weir, J. H. Stephens, G. H. Henry, A. R. Ewart, I. Isaacson, R. M. Moore, C. E. G. Nunns, I. le Roux, C. P. Wallace. *Midwifery (B.A.O.)*: \*A. A. Morgan, \*H. R. F. Tweedy, R. I. G. Reid, Marie M. E. Lea-Wilson, H. J. Robinson, J. K. Harper, H. E. Knott, F. G. Stewart, C. R. Harris, J. Horwich, R. F. W. K. Allen, W. Crawford, G. W. F. Pratt, D. F. Walsh, A. C. G. Ffolliott, F. O. W. A. Mahon-Daly, J. Sayers, H. S. Smithwick, Nora A. Stack, E. S. Adderley, J. E. Wells, E. C. Hicks, G. Q. Chance.

M.Ch.—B. Gluck.

DIPLOMA IN GYNAECOLOGY AND OBSTETRICS.—Ann Macleod.

\* Passed on high marks.

### ROYAL COLLEGE OF PHYSICIANS OF IRELAND.

At the monthly meeting of the Presidents and Fellows, held on December 2nd, the President duly admitted to the Licences in Medicine and Midwifery of the College the following candidates who had passed the Winter Final Examination under the Conjoint Scheme of the Irish Royal Colleges of Physicians and Surgeons:

W. Bannan, J. J. Benson, J. Chambers, A. Clein, L. S. Clifford, J. P. Egan, F. N. Elcock, J. J. Golding, J. L. Miller, May F. McCarthy, P. L. O'Neill, Sarah M. O'Neill, J. C. Richardson, A. Stein, F. W. Warren.

Dr. R. H. Micks was elected as Deputy for the King's Professor of Materia Medica and Pharmacy to act as Clinical Physician to Sir Patrick Dun's Hospital.

A letter was read from the President of the Royal College of Physicians of London, asking the College to appoint a delegate to the Harvey Tercentenary Celebrations in 1928. In accordance with the unanimous wish of the College, the President (Dr. William Arthur Winter) consented to act.

## Obituary.

DR. WALTER CHARLES ORAM, who died on November 28th, at the age of 52, received his medical education at Trinity College, Dublin, where he graduated M.B., B.Ch., B.A.O., in 1900, and proceeded M.D. five years later. He was a senior moderator and gold medallist of his year. A colleague at the Northern Hospital, Liverpool, writes: Oram came to Liverpool in 1904 after a distinguished career at Trinity College, Dublin. The son of a man distinguished in physical science, he had the same natural bent himself, and at Trinity College he graduated B.A. with honours in experimental physics and chemistry. He used to say that engineering was his first choice, and that he entered medicine determined to study the therapeutical applications of electricity. He devoted his talents to this study from the first and came to Liverpool to take charge of the electrical department of the Skin Hospital. Radiology was then in its beginnings, and with his knowledge of physical science he found in this subject exactly the work for which he was naturally fitted. At first he combined this work with general practice, but after a few years he obtained important hospital appointments and confined his attention entirely to radiology. From this time he did a phenomenal amount of work in the voluntary hospitals to which he was attached; the Northern Hospital and the Stanley Hospital in Liverpool, and the infirmary in Southport owe him a very deep debt of gratitude for years of devoted service. With this hospital work he combined a busy private practice, and there is no doubt in the minds of those who knew him well that he persistently overtaxed a physique which was not naturally very robust. He gave himself few holidays, and those few he often cut short because of some duty which he fancied he was neglecting or not completely fulfilling. I have known him to plan a fortnight away, and then, after a week, to think of some batch of reports or other work waiting to be completed, and to return because of this before the scanty fourteen days were over. This was characteristic of the man, a devotion to his work which did not allow him to spare any pains or energy. At the time of his death his hospital appointments were physician-in-charge of the radiological department of the Northern Hospital, honorary radiologist to the Stanley Hospital, honorary radiologist to St. Paul's Eye Hospital, and radiologist to the Southport Infirmary. This catalogue is an indication of the amount of voluntary work which he contrived to do. In 1912 he was secretary of the Section of Electro-Therapeutics at the Annual Meeting of the British Medical Association in Liverpool. During the war he was on the staff of the 1st Western General Hospital, and for six months was with the 57th General Hospital in France as radiologist. His death at the early age of 52 was due to the overtaxing of his physical powers. His many friends will remember him as a man whose modesty and devotion were the outstanding features of his life; they will not think it unfitting to put on record the fact that he would never have been able to do the great amount of work which he gave to the public service without the expert assistance of an able and devoted wife.

Dr. JOHN PRIOR PURVIS, who died on November 18th, was born in 1841. In 1859 he entered as a student the *Dreadnought* hospital ship, and in the following year joined St. Thomas's Hospital. In 1863 he obtained the diplomas M.R.C.S.Eng. and L.S.A., and was then appointed house-surgeon to the West Herts Infirmary, Hemel Hempstead. In 1867 he joined his father in practice at Greenwich, and two years later was appointed medical officer to the Royal West Kent Dispensary, which subsequently became the Miller General Hospital; on his retirement from this institution in 1925 he was elected an honorary governor. In 1885, in conjunction with Miss Christabel Airy, he established the Greenwich Provident Dispensary, and remained one of its medical officers until his retirement in 1925. In 1870 he had been appointed public vaccinator, and he held this post until his death. He

authorities would be in a position to turn their attention in a greater degree to the slums. Although the powers of local authorities for dealing with slums were wide, it might be possible to introduce a further measure whereby houses in an unsatisfactory area, which might be saved by the expenditure of a little money, would be reconditioned, and only houses which were past redemption would be demolished. Another matter on which the Minister had promised to legislate was in regard to the basis of compensation for insanitary property acquired in connexion with slum schemes, but the time or nature of the legislation could not at present be stated.

**National Health Insurance.**—In an answer given on December 1st to Sir Richard Luce, Mr. Chamberlain said that the recommendations of the Royal Commission on National Health Insurance had been exhaustively discussed with the consultative council of approved societies, and the Government intended to take the first convenient opportunity of introducing an amending Health Insurance Bill embodying most of the recommendations of the Commission. It did not, however, propose to provide in this bill for the abolition of Insurance Committees or for the extension of medical benefit to include a specialist and consultant service by means of a partial pooling of societies' surpluses.

**Small-pox.**—The Minister of Health stated, on December 6th, that the number of cases of small-pox notified in the city of Lincoln during the three months ended November 26th was 33. He was informed that, with a view to preventing overcrowding of the small-pox hospital, a ward block at the isolation hospital, separated from the remainder of the hospital by a fence, was being used for the treatment of small-pox patients.

**Inspection of Offices.**—Dr. Fremantle asked Mr. Chamberlain, on December 1st, whether his suggestion that metropolitan borough councils should carry out a systematic inspection of offices had been adopted; and, if so, whether any resistance to such inspection had been offered on which a test case could be prepared on the powers of local authorities over office sanitation. Mr. Chamberlain said he had not issued any communication to the metropolitan borough councils on the subject. He was informed that systematic inspection was made in a few of the boroughs, and he had not heard of any case of resistance.

**Notification of Tuberculosis.**—In a reply to Dr. Vernon Davies, Sir Kingsley Wood said the Minister of Health was not yet satisfied that the early notification of tuberculosis had been secured in all parts of the country. The Ministry had issued circulars to medical practitioners and to local authorities on the subject, which would be again considered on receipt of the notification returns for the present year.

**Rinderpest and Foot-and-Mouth Disease.**—On November 30th Dr. Vernon Davies called the attention of the Minister of Agriculture to the fact that the United States of America had restricted the import of South American meat from sources infected with foot-and-mouth disease. Dr. Davies asked whether the Minister of Agriculture would discuss the matter with the Minister of Health to ensure that the health of the people of this country was safeguarded. Mr. Guinness replied that the United States Department of Agriculture Order of September 17th, 1926, to which Dr. Davies referred, prohibited the import of fresh or frozen meat from countries where rinderpest or foot-and-mouth disease existed. It appeared to be designed to protect animals, as human beings did not suffer from rinderpest. Practically all meat imported into Great Britain from South America was inspected in the country of origin, and was subject to further inspection on arrival. Dr. Davies asked whether the Ministry of Agriculture thought there was no danger to human beings in admitting to this country meat which might be contaminated with foot-and-mouth disease. Mr. Guinness said that as the practice was to cook meat before eating it he did not think there was much danger. Recorded human cases of foot-and-mouth disease had been traced to milk or to contact with diseased animals. He thought there was no evidence against cooked meat. The Government was negotiating with the South American Governments to induce them to undertake special regulations for preventing the introduction of disease into this country.

**Tuberculosis Officers and Private Fees.**—Sir K. Wood, on December 6th, said that the public health committee of the Devon county council had passed a resolution which in effect stated that they wished to make it clear that the services of tuberculosis officers were absolutely free to all classes of the community, and that in no case could remuneration be made to them in any form. A copy of the resolution had been sent to the officers concerned, but no other steps had been taken to make it public. The Minister was informed that the resolution was passed because it was reported to the committee that one or more of the tuberculosis officers of the county council had received fees or presents from individuals visited by them in their capacity of tuberculosis officers.

#### Notes in Brief.

On December 5th Earl Winterton, replying to a question, said that all cocaine used in India was imported. Its importation was subject to the closest control, but the illicit traffic could not be successfully stopped except with the co-operation of manufacturing countries.

The Geneva Opium Convention of 1925 has been ratified by France and Poland, and for all parts of the British Empire excepting Canada and the Irish Free State.

The Ministry of Health does not feel justified in contemplating the treatment of rheumatism by a general scheme on the lines of that adopted for tuberculosis.

The Minister of Health offers to arrange for any Member of Parliament who wishes to do so to visit the Government lymph establishment.

A report on the provision made in Lambeth Infirmary for isolation and observation purposes is being prepared by a medical officer of the Ministry of Health.

Asked about the statement alleged to have been made at an inquest in Sheffield by a medical practitioner, to the effect that the best thing he could do was to let a man die, as if he had lived his life would only have been a misery, Sir Thomas Inskip, the Solicitor-General, said the inquest had been adjourned for a *post-mortem* examination, and it was impossible for him to answer questions on the case.

Mr. Ormsby Gore states that there is little prospect of an effective reduction in the amount of opium smoked in Malaya so long as unlimited supplies are available in China and continue to be smuggled into the Colony.

The Home Office knows of no case of poisoning due to the use of petrol containing tetra-ethyl of lead.

Mr. Chamberlain sees no reason for instituting an inquiry into the administration of mental hospitals.

The Minister of Health has ordered the publication of reports of the inquiries into the conditions of the production and manufacture of condensed milk in Holland and Denmark, so far as they affect public health.

## Medical News.

IN commemoration of his jubilee as a general practitioner Dr. James Murray of Inverness has been entertained at a complimentary dinner by his colleagues from various parts of Ross-shire and Inverness-shire, who presented him with a silver salver. The chairman, Dr. J. W. Mackenzie (Inverness) said that to Dr. Murray belonged the credit of being the first to introduce antiseptic surgical treatment in the Northern Infirmary, for which he was well qualified by his training under Lister. Dr. Murray, in acknowledging, referred to the fact that he graduated at a time when the immortal discoveries of Pasteur and Lister completely revolutionized the practice of medicine and surgery. It was his good fortune to be closely associated with Lister as a prize-man and as a student.

THE Master and Wardens of the Society of Apothecaries have issued invitations to a dinner at Apothecaries' Hall, Blackfriars, on Tuesday, January 3rd, to meet the Lord Mayor and Sheriffs.

THE Australian and New Zealand Medical Association in England will hold its winter dinner on December 16th, at 8 p.m., at the Trocadero Restaurant, Piccadilly. The High Commissioners of Australia and New Zealand will be the official guests. All medical visitors are invited. Further particulars can be obtained from the honorary secretaries, Drs. E. T. C. Milligan or H. Bedford Russell (86, Harley Street).

MR. ERNEST CLARKE will give the last of the present series of lectures arranged by the Fellowship of Medicine, at the Medical Society of London, 11, Chandos Street, on December 12th, at 5 p.m. His lecture, which is entitled "Practical hints in the correction of errors of accommodation and refraction of the eye," is free to medical practitioners. The special courses arranged by the Fellowship of Medicine for January are: medicine, surgery, and the specialties at the Prince of Wales's General Hospital; cardiology at the National Hospital for Diseases of the Heart (limited to 20, so early application is desirable); diseases of children at the Children's Clinic; and psychological medicine at the Bethlem Royal Hospital. Syllabuses, tickets, and specimen copies of the *Post-Graduate Medical Journal* may be obtained from the Secretary of the Fellowship, 1, Wimpole Street, London, W.1.

A SERIES of lectures and practical courses of instruction for a diploma in psychological medicine will commence at the Maudsley Hospital, Denmark Hill, S.E.5, on January 4th, 1928. Part I of the course will consist of twelve lectures by Dr. F. Golla on the physiology of the nervous system, with demonstrations in physiological psychology; six lectures and demonstrations on the biochemical aspects of mental disorders and laboratory methods, by Mr. S. A. Mann, B.Sc., F.I.C.; eight lectures by Professor G. Elliott Smith, F.R.S., on the anatomy of the nervous system; practical instruction and demonstrations by Mr. Charles Geary; and eight lectures on psychology by Dr. Henry Devine. Part II, commencing in March, will include lectures and demonstrations on psychoneuroses, morbid psychology, the pathology of mental diseases, pathological anatomy, the legal relationship of insanity and treatment, mental deficiency, crime and insanity, therapeutics, clinical psychiatry, neurology, and the abnormalities of the fundus oculi. The fee for the whole course

is £15 15s., and for Part I and II separately £10 10s. each. Inquiries should be addressed to the Director of the Central Pathological Laboratory, Maudsley Hospital, Denmark Hill, S.E.8.

A THREE months' course of lectures and demonstrations on clinical practice and hospital administration for the diploma in public health will be given at the North-Eastern Hospital, St. Ann's Road, Tottenham, by Dr. F. H. Thomson, medical superintendent, on Mondays and Wednesdays, at 4.45 p.m., and alternate Saturdays, at 11 a.m., commencing on January 4th, 1928.

INTERNATIONAL medical courses will be held in Berlin during March and April, the subjects including new aspects and methods of clinical pathology and therapeutics, recent discoveries in connexion with metabolic disorders, obstetrics and gynaecology, and radiology. In addition to this there will be several series of lectures and demonstrations in different medical subjects throughout the winter. The courses are held in German, but some of the professors lecture also in English, French, and Spanish. Further information may be obtained from the secretary, International Medical Continuation Courses, Kaiserin Friedrich-Haus, Luisenplatz 2-4, Berlin, N.W.6.

THE out-patient department of the Princess Louise Kensington Hospital for Children was opened on December 6th. It contains accommodation for orthopaedic, ophthalmic, and oto-rhino-laryngological diagnosis and treatment, and there are also electrical and massage rooms. It is hoped that thirty-six beds will be available for in-patients early in 1928; some of these will be reserved for school children requiring tonsil operations. A good operating theatre, with all the modern surgical appliances, is to be provided. The hospital represents the re-establishment of a small institution in Church Street, Kensington, which was founded in 1840; it is situated in a very congested area in North Kensington. The funds for its establishment have been collected during the last three years by a committee under the presidency of Princess Louise, and the King and Queen have promised to open the hospital formally next May if the cost of £12,000 for the out-patient department and the two first ward blocks has been met by that date. A list of the honorary medical staff appears in the SUPPLEMENT under the heading "Appointments."

A NEW women's hospital, which has been erected by the Wirral Board of Guardians at a cost of £30,000, was opened at Clatterbridge on November 24th; it provides accommodation for 112 beds. The lower floor is occupied by the surgical section and the upper is devoted to medical cases, with special wards for fevers. Provision has been made for private patients.

THE council of Epsom College is about to award a St. Anne's Home Scholarship of £52 a year to the orphan daughter of a medical man who was in independent practice in England or Wales for not less than five years. Candidates must be not less than 7 and not over 12 years of age on May 1st next. Forms of application can be obtained from the secretary at the office of the College, 49, Bedford Square, W.C.1.

MR. P. C. RAIMENT, M.A.Oxon., M.R.C.S., L.R.C.P., has been appointed to the vacant chair of physiology in the State University of Egypt, at Cairo. Mr. Raiment, who took first-class honours in the Natural Science School at Oxford, has been for the last six years university demonstrator in biochemistry at Oxford. He leaves England at the end of this year.

THE Scottish Board of Health have appointed Dr. James L. M. Symms to be a District Medical Officer (Medical Referee) in their department.

THE annual report for the year 1926-27 of Livingstone College, Leyton, shows that nearly 1,000 missionaries have received instruction there since its foundation in 1900. During the year under review 100 students attended, representing twenty-eight missionary societies and seven countries. The instruction given included a full session from October to June, comprising elementary physiology, anatomy, practical medicine, surgery, tropical medicine, and hygiene, a vacation course in July, and three short intensive courses in March, September, and December on the care of health in the tropics. We referred to the Commemoration Day celebrations on June 18th (p. 1133).

THE health conditions at Port-of-Spain, the capital of Trinidad, are summarized for June last by Dr. George H. Masson, medical officer, in his report to the City Council. Of 114 deaths which occurred nearly one-half were in public institutions. Tuberculosis, bronchitis, and enteritis were each responsible for 8 deaths, and deaths were recorded also from pneumonia, malaria, dysentery, and syphilis. Four cases of typhoid fever were notified, and 990 cesspits were oiled and disinfected as a preventive measure. Three railway cars were disinfected for leprosy. The rats destroyed numbered 555;

all were free from plague. Of 2,717 premises inspected for mosquitos most were satisfactory, but in 194 larvae were found. The sanitary administration of Port-of-Spain presents a varied interest.

PROFESSOR CALMETTE, sub-director of the Institut Pasteur, has been elected a member of the Académie des Sciences.

PROFESSOR GOSSET of Paris has been elected president, and Professor Tixier of Lyons vice-president, of the French Congress of Surgery to be held in 1928, when the following subjects will be discussed: (1) spinal anaesthesia, introduced by MM. Forgue of Montpellier and Basset of Paris; (2) remote results of the surgical treatment of duodenal ulcer, introduced by MM. Delore of Lyons and Okinczyk of Paris; (3) remote results of trephining for traumatic lesions, introduced by MM. Maissonnet and Petit Dulaille of Paris.

THE *Gazette des Hôpitaux*, otherwise known as *La Lancette Française*, has recently celebrated its centenary.

THE first International Oto-Rhino-Laryngological Congress will be held in Copenhagen, under the presidency of Professor E. Schmiegelow, from July 29th to August 1st, 1928, the official languages being English, French, and German. The subjects to be dealt with include: the conservative radical operation in chronic middle-ear suppuration; sepsis of pharyngeal origin; surgical diathermy in malignant growths of the upper air passages; and the anatomical structure of the middle ear and its influence on suppurations. Further information may be obtained from the general secretary, Dr. N. Rh. Blegvad, 3, Nytorv, Copenhagen K.

IN 1926 there were 383 women medical practitioners in Vienna as compared with 326 in 1925, which represents an increase of 20 per cent. as compared with an increase of only 2 per cent. in the number of medical men. The total number of medical practitioners in Vienna is 3,688, so that the proportion of women among them is 10 per cent. Last winter session the number of women medical students had risen to 351, or 15 per cent. of the total.

## Letters, Notes, and Answers.

All communications in regard to editorial business should be addressed to **THE EDITOR, British Medical Journal, British Medical Association House, Tavistock Square, W.C.1.**

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, not necessarily for publication.

Authors desiring REPRINTS of their articles published in the BRITISH MEDICAL JOURNAL must communicate with the Financial Secretary and Business Manager, British Medical Association House, Tavistock Square, W.C.1, on receipt of proofs.

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.

THE TELEPHONE NUMBERS of the British Medical Association and the BRITISH MEDICAL JOURNAL are **MUSEUM 9861, 9862, 9863, and 9864** (internal exchange, four lines).

THE TELEGRAPHIC ADDRESSES are:

EDITOR of the BRITISH MEDICAL JOURNAL, *Aitiology Westcent, London.*

FINANCIAL SECRETARY AND BUSINESS MANAGER (Advertisements, etc.), *Articulate Westcent, London.*

MEDICAL SECRETARY, *Medisecra Westcent, 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, Drumsheugh Gardens, Edinburgh (telegrams: *Associate, Edinburgh*; telephone: 24361 Edinburgh).

## QUERIES AND ANSWERS.

"T. W. P." inquires whether tea without the alkaloid is on sale as coffee without caffeine.

### URINE STAINS.

"R. H. W." writes in answer to a question about removal of urine stains from clothes (September 24th, p. 573): I can recommend prolonged soaking of the cloth in cold water. The water should be changed from time to time, and if the stain is old three or four days' soaking may be necessary, but your correspondent will find that the stain can be very much reduced, if not entirely removed.

### WORDS.

DR. ALEX. E. ROCHE (London) writes: Dr. Heywood Smith (BRITISH MEDICAL JOURNAL, December 3rd, p. 1062) says that laparotomy should be laparatomy, as it comes from *λαπάρα* (not *λαπάρον*). On his quite unjustifiable reasoning the alternative, coeliotomy, which he prefers, should be coeliatomy, since it