

ASSOCIATION INTELLIGENCE.

BATH AND BRISTOL BRANCH.

THE second meeting of the Branch this season was held at the York House, Bath, on Thursday evening, December 12th; R. W. COE, Esq., President, in the chair. There were also present forty-one members and six visitors.

The minutes of the last meeting were read and confirmed.

New Members.—A ballot was taken for the following gentlemen, who were duly elected members of the Association and of this Branch; viz., G. F. Atchley, M.B., Cotham; T. Cole, M.B., Bath; Mr. T. H. Davies, Bristol; Mr. G. Gardiner, Bristol; Dr. Siddall, Bristol; Mr. E. Willoughby, Redland; and Mr. Wine, Bedminster. The following gentlemen were proposed and seconded, and will be balloted for at the next meeting: Mr. J. Terry, Bailbrook; Dr. Bennett, Kilmersdon; Mr. C. P. Coombs, M.B., Castle Cary; H. F. Parsons, M.B., Beckington; Mr. Smart, Bedminster; and Mr. Wine, Bristol.

Papers.—The following papers were then read.

1. The Treatment of Wounds after Surgical Operations. By W. Mitchell Clarke, Esq. This paper attracted much discussion, in which Messrs. Stockwell, Leonard, and Freeman, took part.

2. On Umbilical Hernia. By Crosby Leonard, Esq.

3. A Case of Abscess of the Brain. By J. K. Spender, M.B.

4. Penetrating Wound of Pelvis opening into Bladder. By E. Crossman, Esq.

5. On Coroners' Duties and How Performed. By J. Parsons, Esq.

REPORTS OF SOCIETIES.

ROYAL MEDICAL AND CHIRURGICAL SOCIETY.

TUESDAY, DECEMBER 10TH, 1867.

SAMUEL SOLLY, Esq., F.R.S., President, in the Chair.

ON CERTAIN POINTS IN THE ANATOMY AND PATHOLOGY OF BRIGHT'S DISEASE OF THE KIDNEY; AND ON THE INFLUENCE OF THE MINUTE BLOODVESSELS UPON THE CIRCULATION.

BY GEORGE JOHNSON, M.D.

It is now generally admitted that cases of chronic Bright's disease may be arranged in two distinct classes:—1. Cases in which the kidney is large, pale, and smooth on the surface; 2. Cases in which the kidney is small, red, and granular. In the forty-second volume of the *Medico-Chirurgical Transactions*, the author pointed out the chief features by which the two classes of cases may be distinguished. There is some difference of opinion with regard to the anatomy and pathology of the various forms of Bright's disease. Some pathologists maintain that the small granular kidney is the result of an intertubular deposit. The author maintained that there is no proof of such deposit; while the red colour and the vascularity of these kidneys seen in an advanced stage afford proof that no such deposit exists. All the essential changes in this disease are intratubular. In the 33rd volume of the *Transactions*, the author first noted the fact, that in all the forms of chronic Bright's disease the muscular walls of the minute renal arteries are hypertrophied. He then supposed that this was the result of an effort to propel the blood onwards. It is now generally admitted that the minute arteries act as stop-cocks; that they regulate the blood-supply, but they have no propelling power. The explanation of the hypertrophy of the small renal arteries which is most in accordance with the facts is that, in proportion to the destruction of the renal gland-cells, there is less demand for blood to be acted upon by the gland; the renal arteries consequently contract upon their contents so as to maintain the balance between the blood-supply and the diminished secretory action of the kidney. This continued overaction of the small arteries in antagonism to the heart results in hypertrophy of their muscular walls. In the advanced stages of some forms of chronic Bright's disease, the walls of the arteries, as well as those of the Malpighian capillaries, assume a white and wax-like appearance—a result probably of infiltration of albuminous or fibrinous materials into the tissues. This appearance of degeneration is secondary, and not essential. It has long been known that the left ventricle of the heart is hypertrophied in nearly all cases of chronic Bright's disease. This is believed to result from the resistance offered by the small arteries throughout the body to the passage of blood contaminated with urinary excreta. The muscular walls of the arteries have been found hypertrophied in the brain, in the pia mater,

and in the intestines of those who have died of chronic Bright's disease, and it is probable that this anatomical evidence of arterial resistance to the circulation in these cases will soon be much increased. Reference was then made to the experiments of Hales upon animals recently killed, as well as to those of Blake upon living animals, to prove the influence of the minute arteries upon the circulation. The sudden arrest of the circulation through the lungs by the admission of atmospheric air into the veins, and the impediment to the pulmonary circulation in cholera, were both referred to the same cause—namely, contraction of the small arteries upon their contents. Again, some of the phenomena of apnoea admitted of complete explanation only by reference to the contraction of the small arteries. A dog was killed by a ligature on the trachea. The chest being opened immediately, the right heart was distended, the left nearly empty. The lungs were pale, nearly bloodless, and extremely collapsed. The minute pulmonary arteries must have arrested the mass of the blood before it reached the capillaries. A comparison of the phenomena of apnoea with those of renal disease appears to warrant the conclusion that an impeded circulation, the result of arterial contraction, may occur under two different conditions. 1. When the respiratory changes in the lungs are impeded, or when the secretory action of a gland, such as the kidney, is impaired, the minute arteries of the lung or of the kidney, in obedience probably to a stimulus conveyed to them through the nerves from the capillaries, restrict and retard the blood-stream. The anæmia of the pulmonary capillaries in cases of acute apnoea, and the overgrowth of the muscular walls of the renal arteries in cases of chronic Bright's disease, are results of one and the same physiological principle. 2. The minute arteries in any part of the body may be excited to contract by their contents becoming abnormal, and therefore more or less noxious to the tissues. We have an illustration of this in the resistance which the systemic arteries offer to the passage of macerated black blood, and of blood contaminated with urinary excreta. We have another illustration of it, when certain foreign materials are either accidentally, in man, or designedly in animals, introduced into the veins, and then arrest the flow of blood through the lungs. The late Dr. Alison and many other pathologists have taught that the minute blood-vessels have the power to antagonise the heart and to check the circulation. This power of resistance has been almost universally believed to reside in the capillaries, which have no contractile power; while the stop-cock action of the small arteries, with their contractile muscular walls, has been almost ignored by pathologists. One of the main objects of this communication was to direct attention to this action of the small arteries in various pathological states of the system, and to adduce anatomical as well as physiological evidence of its reality and its powerful influence.

Dr. PAVY said that the gist of Dr. Johnson's paper seemed to be to assign to the minute arteries that which had been assigned to the capillaries. The author of the paper had referred to air in the blood, and had ascribed death in this condition to arrest of the pulmonary circulation. But did this stoppage arise from obstruction of the flow of blood through the small arteries, or through the capillaries? Dr. Pavy thought the latter was the manner in which death was produced. Again, Dr. Johnson had spoken of the circulation through the lungs, produced by tying the trachea; but what proof was there here that the blood was arrested in the small arteries rather than in the capillaries? The only instance in which he could recognise obstruction in the small arteries was in Dr. Sanderson's experiments with woorara. He (Dr. Pavy) had found that black blood flowed through the capillaries when death was produced in other ways than by woorara—*e.g.*, by pithing; for in such cases he had found that chemical substances passed onwards into the veins.

Dr. DICKINSON said that there were two points in which he could not agree with Dr. Johnson. The author did not allow, as he (Dr. Dickinson) understood, that the intertubular connective tissue of the kidney was liable to disease; whereas there was reason to believe that it was very liable to disease, and that the granular kidney arose from changes in this tissue. Dr. Johnson said that the small granular kidney could not depend on intertubular deposit, because of its vascularity. But this deposit, though destroying other portions of the organ, did not destroy the small arteries. Dr. Johnson believed the deposit in the tubules to consist of epithelium; but Dr. Dickinson held that it was formed of broken down fibrin. He could produce a similar material by the decay of fibrin under water. Contrary to what Dr. Johnson had said, the obstruction to the circulation was found by experiment greater in the small than in the large kidney of Bright's disease.

Dr. BURDON SANDERSON would refer to some facts which had a bearing on Dr. Johnson's views as to the power of the small arteries to modify the circulation by their contraction. He alluded to the experiments of Ludwig on the action of certain sensory nerves in modifying

OBITUARY.

CHARLES G. B. DAUBENY, M.D., F.R.S.

DR. DAUBENY, a name familiar to Oxford men, died on Thursday week at the Botanical Gardens, Oxford. He was a younger son of the Rev. James Daubeney, Rector of Stratton, and was born in 1795. He was educated at Magdalen College, Oxford, where he took his B.A. degree in 1814, when he was second-class in classics. In 1815 he gained the Chancellor's Prize essay, *In illâ Philosophiæ Parte quæ Moralis dicitur tractandâ, quænam sit præcipue Aristotelica Disciplina Virtus?* In due course he obtained a lay fellowship at Magdalen, and applied himself to the study of medicine, and for several years practised his profession. In 1822 he was elected to the Professorship of Chemistry. In 1829 he relinquished the practice of his profession, and devoted himself to the study of the physical sciences, particularly to chemistry and botany. In 1834 he was elected to the Professorship of Botany. He was also curator of the Botanical Gardens at Oxford. Dr. Daubeney took an active part in the proceedings of several Congresses held for the promotion of physical science, and was a voluminous writer on scientific subjects. Among his numerous works may be mentioned a *Description of Active and Extinct Volcanoes*, a second edition of which was published in 1818, *An Introduction to the Atomic Theory*, and *Lectures on Roman Agriculture*. Dr. Daubeney took a very active interest in the extension of the advantages of university education more widely to the medical profession; and one of his latest works was an elaborate paper contributed early in the year to the BRITISH MEDICAL JOURNAL on this subject.

MEDICAL NEWS.

ROYAL COLLEGE OF PHYSICIANS OF LONDON.—At a general meeting of the Fellows, held on Wednesday, December 18th, the following gentlemen, having undergone the necessary examination, and satisfied the College of their proficiency in the science and practice of medicine, surgery, and midwifery, were duly admitted to practise physic as Licentiates of the College:—

Codrington, John Frederick, Metropolitan Free Hospital	Norton, Edward, Tamworth
Hawthorn, Fred. John, Poplar Hospital	Parsons, Frederick Wm., Islip, Oxon
Jackman, Thomas S. H., Leintwardine	Ralfe, Charles Henry, Doncaster
Lawrence, H., Cape of Good Hope	Saundry, James Baynard, Guy's Hospital
Locking, Benjamin, Kirk Ella, Hull	Wallace, Frederick, Hackney Road

UNIVERSITY OF LONDON.—The following candidates passed the recent M.D. Examination, 1867.

Ardidge, J. T., B.A., King's College. (Obtained marks qualifying for Gold Medal.)
Bushell, S. W., Guy's Hospital. (Obtained marks qualifying for Gold Medal.)
Carnley, Henry, Hull and East Riding
Edwards, Thomas Marsden, Andersonian Institution
Fotherby, Henry Isaac, Guy's Hospital
Gooding, Ralph, B.A., King's College
Graham, George Wallington, St. Thomas's Hospital
Hughes, John Pearson, University College
Kelly, Charles (Gold Medal), King's College
March, Henry Colley, St. Thomas's Hospital
Nunneley, F. B., University College. (Obtained marks qualifying for Gold Medal.)
Phillips, John Jones, Guy's Hospital
Savage, George Henry, Guy's Hospital
Shaw, T. C., B.A., King's College. (Obtained marks qualifying for Gold Medal.)
Stokoe, Paul Henry, B.A., Guy's Hospital
Williams, J., University College. (Obtained marks qualifying for Gold Medal.)

APOTHECARIES' HALL.—Names of gentlemen who passed their examination in the science and practice of medicine, and received certificates to practise, on Thursday, December 12th, 1867.

Brunton, William, Watlingtonbury, Maidstone
Goodfellow, William Richard, Turner's Road, Limehouse
Lee, Timothy Wood, Thame, Oxon

BIRTHS.

BODINGTON. On December 11th, at Sutton Coldfield, the wife of G. F. Bodington, M.R.C.P., of a daughter.
MACNAMARA. On December 8th, at Dublin, the wife of Rawdon Macnamara, L.K.Q.C.P., of a daughter.
WINTERBOTHAM. On December 16th, at Bridgewater, the wife of W. L. Winterbotham, M.B., of a daughter.

DEATHS.

BODINGTON. On December 11th, at Sutton Coldfield, Caroline Mary, wife of George Fowler Bodington, M.R.C.P.
WARD. On December 16th, aged 29, Henry Augustus, eldest son of John Ward, Esq., Surgeon, Penistone, Yorkshire.

UNIVERSITY OF CAMBRIDGE: NATURAL SCIENCE.—Mr. N. Moore, who was second in the examination for the Downing Scholarship for Natural Science, held in June last, has been made Librarian Scholar of St. Catherine's College. The value of the Scholarship is about £30 *per annum*, and is tenable for twelve years. The subject in which Mr. Moore shewed greatest proficiency in the examination, was Comparative Anatomy and Physiology.

BEQUESTS.—Miss Tattingham of Harley Street, recently deceased, has bequeathed £500 each to the following medical charities:—the Middlesex Hospital, the Royal Medical Benevolent College, the Convalescent Institution, the Asylum for Idiots; and £300 to the Royal Orthopaedic Hospital. The bequests of this lady to other institutions, not medical, range from sums of £5000 to £200 each, representing in the whole the large sum of £26,000.

SUDDEN DEATHS.—In 1865 no less than 3,173 persons—1,879 males, and 1,294 females—died suddenly in England and Wales from unascertained causes. The number of these deaths in London was, remarks the *Times*, 82 (45 males and 37 females); in the south-eastern district, 194 (111 males and 83 females); in the south midland district, 168 (92 males and 76 females); in the eastern district, 229 (124 males and 105 females); in the south-western district, 344 (215 males and 129 females); in the west midland district, 453 (265 males and 188 females); in the north midland district, 162 (95 males and 67 females); in the north-western district, 963 (566 males and 397 females); in the Yorkshire district, 189 (122 males and 67 females); in the northern district, 109 (62 males and 47 females); and in Monmouthshire and Wales, 280 (182 males and 98 females).

THE STRAND UNION AND DR. ROGERS.—Dr. Rogers, the medical officer of the Strand Union, was suspended by the guardians for having been more zealous on behalf of his patients than subservient to the board. That this despotic act on the part of the guardians has not met with the approval of their constituents, is shown by the following resolution, which was passed unanimously by the vestry of St. Ann's, Soho, with the Rector in the chair:—"That this vestry, having heard with surprise and regret that the guardians of the Strand Union have suspended Dr. Rogers from the performance of his duty as medical officer of the workhouse, upon charges which do not imply any neglect of the sick, but some supposed disrespect of, and antagonism to, them, causes which the vestry considers very inadequate for so grave a proceeding, and having had the opportunity of knowing, during many years, the zeal and assiduity with which Dr. Rogers has performed his duty for the benefit of the sick and suffering, trusts that your Honourable Board will immediately restore him to that position which he has so long, faithfully, honestly, and usefully occupied." It was also decided that a copy of the resolution should be sent to the President of the Poor-law Board.—*Pall Mall Gazette*.

BIRTHS, MARRIAGES, AND DEATHS IN INDIA.—The European births, marriages, and deaths of our Indian dependencies, as duly recorded in the usual column of the Presidency journals, are capable of specific deductions, affording, in some degree, a test of the growing importance of the resident families of Anglo-Indians in India. The births, marriages, and deaths which are announced in the *Englishman* and other journals published at Calcutta are as numerous as those of any London newspaper, the *Times* alone excepted. Collecting the lists, and computing the obituaries, etc., for one year, we find that there were announced 1,309 births, 407 marriages, and 745 deaths among resident families at the Presidencies, towns, and stations in India during the year. We subjoin an analysis of these announcements:—The births in January (1866), as advertised, were 155; or rather more than 38 weekly; February, 167, or 41 weekly; March, 101, or 27 weekly; April, 64, or 16 weekly; May, 75; June, 72; July, 88; August, 103; September, 112; October, 147; November, 110; December, 115. Thus the births reached their maximum in January, February, and March, and their minimum in April, May, June, and July. The marriages were in January, 20; February, 52; March, 50; April, 33; May, 29; June, 24; July, 24; August, 43; September, 28; October, 30; November, 36; December, 38. Thus the marriages were most numerous in India in the months of February, March, August, October, and November. The deaths were in January, 75; February, 50; March, 52; April, 42; May, 65; June, 55; July, 82; August, 65; September, 65; October, 66; November, 65; December, 63; thus being most numerous in the months of January, May, July, August, September, October, November, and December. The minimum was in February, March, April, and June. The above statistics show a much higher record of obituaries, etc., in British India than could be presented by any of the other colonies, whether the West Indies, Australia, or Canada, and is in some respects an index to the growth of the European population in India.—*Public Opinion*.

OPERATION DAYS AT THE HOSPITALS.

MONDAY Metropolitan Free, 2 P.M.—St. Mark's, 9 A.M. and 1.30 P.M.—Royal London Ophthalmic, 11 A.M.

TUESDAY Guy's, 1.30 P.M.—Westminster, 2 P.M.—Royal London Ophthalmic, 11 A.M.

WEDNESDAY St. Mary's, 1.15 P.M.—Middlesex, 1 P.M.—University College, 2 P.M.—London, 2 P.M.—Royal London Ophthalmic, 11 A.M.—St. Bartholomew's, 1.30 P.M.—St. Thomas's, 1.30 P.M.—Samaritan Free Hospital for Women and Children, 2.30 P.M.

THURSDAY St. George's, 1 P.M.—Central London Ophthalmic, 1 P.M.—Great Northern, 2 P.M.—Royal Orthopaedic, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Hospital for Diseases of the Throat, 2 P.M.

FRIDAY Westminster Ophthalmic, 1.30 P.M.—Royal London Ophthalmic, 11 A.M.

SATURDAY St. Thomas's, 9.30 A.M.—St. Bartholomew's, 1.30 P.M.—King's College, 1.30 P.M.—Charing Cross, 2 P.M.—Lock (Clinical Demonstrations and Operations), 1 P.M.—Royal Free, 1.30 P.M.—Royal London Ophthalmic, 11 A.M.

NOTICES TO CORRESPONDENTS.

All Letters and Communications for the JOURNAL, to be addressed to the EDITOR, 37, Great Queen Street, Lincoln's Inn Fields, W.C.

CORRESPONDENTS not answered are requested to look to the Notices to Correspondents of the following week.

Communications as to the transmission of the JOURNAL should be sent to MR. RICHARDS, 37, Great Queen Street, W.C.

TO PURCHASERS.—To insure attention, it is requested that all orders sent to the Office for extra copies of the JOURNAL, be accompanied with stamps for the amount.

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

NEMO.—The communication was duly received, and shall be used as soon as opportunity permits.

A. C. J. should consult a respectable surgeon, in order to learn how to put the knee-bone back into its original position, where it turns inwards, amounting almost to knock-knee.

DR. SIMPSON (Manchester).—The person whose letters are forwarded is lately dead, and was the subject of an inquest.

WE are indebted to correspondents for the following periodicals, containing news reports and other matters of medical interest:—The Tavistock Gazette, Dec. 17th; The Sussex Agricultural Express, December 10th; The Dublin General Advertiser, December 7th; The Manchester City News, December 14th; The Eastern Morning News, November 22nd and December 11th; The Yorkshire Post and Leeds Intelligencer, December 13th; The Dundalk Democrat and People's Journal, December 7th; The Guernsey Star, December 3rd and 5th; The Harrogate Herald and Weekly List of Visitors, December 18th.

NEW MEMBERS.

DR. SAMELSON (Manchester); MR. MICHELL (London); DR. JOHN MURRAY (London); DR. LIETCH (Kewick); DR. GREENHALGH (London); DR. EASTLAKE (London); DR. HENRY BENNET (Mentone); DR. G. C. DALE (London); DR. HENRY F. A. GOODRIDGE (Bath); DR. J. W. J. SMITH (Aberdeen).—The names of the new members sent shall be forwarded for election, and the JOURNALS will be furnished from the present date. We may take this opportunity of reminding our readers that this is the best time for introducing new members, as the subscription dates from the commencement of the year. As this JOURNAL now confessedly occupies the front rank amongst medical periodicals, and is admittedly at least equal in scientific and literary value and interest with any of its weekly contemporaries, there seems every reason to believe that a large accession of members may be expected by making extensively known at this season the fact that the annual subscription—including the professional advantages of membership of the Association and possession of the JOURNAL free by post—is only one guinea annually; that is, *one-third less than the subscription to the other journals of like repute*. At the stage of prosperity which has now been reached, any further considerable accession of members will not only bring the JOURNAL far into the van of medical periodical literature, and so give to it an unquestionable preeminence in circulation and influence, such as the organ of our greatest professional Association ought to possess, but it will place in the hands of the Association that which has always been an object of desire—surplus funds; which may be used for the advancement of medical science and the protection of professional interests throughout the country. We hope that we may be permitted to appeal to our members individually to aid us in this matter, and to remind them that each one who proposes a new member, renders a service to the Association; while, by widening the bonds of union and strengthening an organisation which aims at the elevation of the whole body medical and the support of its best scientific and social interests, he is doing well for the profession at large.

NOTICE TO ADVERTISERS.—Advertisements should be forwarded direct to the Printing-Office, 37, Great Queen Street, W.C., addressed to Mr. Richards, not later than *Thursday*, twelve o'clock.

OBSTETRIC MEMORANDA.

SIR,—I am very pleased with the letter of Dr. Rooke, under the heading of Obstetric Memoranda, in the JOURNAL of the 14th instant. His remarks are so very complete, that they do not admit of addition; and I will simply observe that, holding the same views as himself, I have for years adopted a similar practice. Instead, however, of trusting so much to the nurse, I have commonly seated myself in a position that would be diagonal with the line of the patient's back, then resting my right knee against her sacrum, I have been able to make traction on the abdominal bandage with my left hand, while the right remained free for a vaginal examination, or the support of the perineum.

It has often struck me that the pendulous abdomen, as a cause of prolonged or difficult labour, especially in corpulent women who have borne many children and are passing the middle period of life, has not been sufficiently dwelt on in systematic works on midwifery. I am, etc.,

Bideford, December 1867.

JOHN THOMPSON, M.D., F.R.C.S.

ADDISON'S DISEASE.—A correspondent asks: In what work is to be found the best information about the Bronzed Skin Disease (Morbus Addisonii)?

. Dr. Greenhow's monograph on the subject, published by Churchill and Sons.

LYING-IN HOSPITALS AND DOMICILIARY MATERNITIES.

SIR,—I find an erratum in your valuable JOURNAL of December 14th, on p. 553, in the note on Lying-in Hospitals v. Domiciliary Maternities. In the sixth line from below it should be 2 (died) instead of 3, which makes a difference in the mortality. Excuse my drawing your attention to this. I am, etc.,

Great Russell Street, December 1867.

F. OPPERT.

MR. MITCHELL.—The operation for popliteal aneurism was first done by John Hunter in 1785; and the preparation was deposited, a few years since, in the Museum of the College of Surgeons. Consult Mr. Olley's *Life of Hunter*.

COMMUNICATIONS, LETTERS, ETC., have been received from:—

Dr. J. Tunstall, Bath; Mr. F. Workman, Reading (with enclosure); Mr. Crosby Leonard, Bristol (with enclosure); Dr. Munroe, Hull; Dr. Newman, Stamford; Dr. Melson, Birmingham; Dr. Eade, Norwich; Mr. H. Kettle, Wexford; Dr. Corbett; Dr. Humphry, Cambridge; Dr. Reith, Aberdeen; Mr. John F. Williams (with enclosure); Mr. W. Square; Mr. A. B. Steele, Liverpool; Dr. Cookworthy, Plymouth; Dr. Radcliffe; Dr. William Ogle, Derby; Dr. Sieveking; Dr. Waters, Liverpool; Dr. Sharpey; Dr. E. Carver; Mr. J. B. Bradbury; Dr. Samelson, Manchester; Dr. T. J. Walker, Peterborough; Dr. Tindal Robertson, Nottingham; Mr. Michell; Mr. J. I. Mackenzie, Sidmouth (with enclosure); Mr. T. W. Crosse, Norwich; Mr. Fairlie Clarke; Dr. Lietch, Kewick; Mr. J. Windsor, Manchester; Mr. J. Dix, Hull; Dr. Swayne, Clifton; Mr. Jardine Murray, Brighton; Dr. Thorburn, Manchester; Dr. Paget, Cambridge; Dr. S. Gordon, Dublin; Mr. J. G. Symons (with enclosure); Mr. W. D. Wilkes, Salisbury; Dr. D. Hooper; Mr. Turner, Manchester; Mr. Holmes Cootie; Mr. Napper, Cranley; Mr. Thompson Dickson; Dr. Cruise; Dr. Greenhow (with enclosure); Dr. Heslop, Birmingham; Mr. T. P. Teale, jun.; Dr. Heywood Smith (with enclosure); Mr. R. S. Fowler, Bath (with enclosure); Mr. J. Sampson Gamgee, Birmingham (with enclosure); Mr. Jonathan Hutchinson (with enclosure); Mr. J. Kent Spender, Bath (with enclosure); Mr. J. Ward, Penistone; Mr. J. Vose Solomon, Birmingham (with enclosure); Dr. Thompson, Bideford; The Secretary of Apothecaries' Hall (with enclosure); Dr. Foster; Mr. T. M. Stone; The Registrar-General of Ireland; Dr. John Murray (with enclosure); The Registrar-General of England; Dr. Braxton Hicks (with enclosure); Dr. C. Taylor, Nottingham (with enclosure); Dr. Radclyffe Hall, Torquay; Dr. Chadwick, Leeds; Dr. Parkes, Southampton; Dr. Symonds, Clifton; Dr. Macnamara, Dublin; Dr. H. Charlton Bastian (with enclosure); Dr. Lory Marsh, Nottingham; A. C. J.; Dr. J. W. F. Smith, Aberdeen; Mr. Ruddock, Bristol; Mr. James Paget (with enclosure); Mr. Twentymann; Dr. Joseph Bullar, Southampton; Mr. Charles P. Phillips, Secretary to the Lunacy Commissioners (with enclosure); Dr. John Popham, Cork; Dr. J. Waring-Curran, Bexhill; Dr. Whitehead, Manchester; The Secretary of the Consumption Hospital; Dr. Rumsey, Cheltenham; Dr. Fleetwood Churchill (with enclosure); Mr. F. Le Gros Clark (with enclosure); Mr. William Copney (with enclosure); Dr. A. Macalister, Dublin (with enclosure); Mr. Samuel Wood, Shrewsbury (with enclosure); Mr. H. Royes Bell (with enclosure); Mr. Christopher Jeaffreson (with enclosure); Mr. W. Maclean (with enclosure); Mr. W. G. Kemp (with enclosure); Dr. Hill (with enclosure); Dr. Horace Jeaffreson; Mr. Edwin Sanders; The Hon. Sec. of the Royal Medical and Chirurgical Society; Mr. Ewen, Long Sutton; Mr. T. Holmes (with enclosure); Mr. E. Parkes, Liverpool; Dr. J. R. Swanton, Bantry; Dr. Dickinson; Mr. T. H. Graham, Lamberhurst; Dr. H. Bennet, Mentone (with enclosure); Dr. Langdon Down, Redhill (with enclosure); Dr. G. C. Dale; Dr. A. Fleming, Birmingham; Dr. Corry, Belfast; Dr. H. Sandwith (with enclosure); Mr. Bolton, Leicester (with enclosure); Dr. Samelson, Manchester; Dr. W. T. Greene, Moira; Dr. Francis, Northampton; Dr. Goodridge, Bath; Mr. W. M. Clarke, Clifton; Dr. Oppert (with enclosure); Dr. John W. Ogle; Dr. Davey, Northwoods; Dr. T. C. Shaw, Colney Hatch; Dr. Symes Thompson; Mr. D. Everett, Worcester (with enclosure); Dr. Macnamara, Dublin; The Secretary of the Pharmaceutical Society; Mr. T. M. Stone; Dr. J. Wades, Hanley; Dr. H. Simpson, Manchester; Mr. Sleeman, Tavistock; Dr. Rumsey, Cheltenham; Mr. Hodgson, Brighton (with enclosure); Dr. Quinlan, Dublin; Mr. O. Pemberton, Birmingham; Mr. Shaw, Durham; Mr. W. L. Winterbotham, Bridgewater; Dr. Cairdner, Glasgow; Dr. Ransom, Nottingham; Mr. Rhodes, Glossop (with enclosure); and Dr. Banks, Dublin.