

In the United States small, violent, and localized epidemics of cerebrospinal meningitis appear about every seven years. The most recent (1935-7) seems to be on the decline. Some are produced by a single type of meningococcus, others by several types; type I-III (type A in France) is the most frequent during the epidemic periods.

Epidemics of encephalitis, similar to the so-called St. Louis encephalitis, which has been prevalent in the United States, occur in Japan more or less every year in certain prefectures. The virus has been transmitted to monkeys by inoculation of the cerebral matter of dead persons, and then to the mouse, which is the most receptive laboratory animal; it is present in the brain of patients from the fourth to the tenth day of illness, and cannot be shown after the tenth day.

The increased incidence of scarlet fever in Rumania in recent years led to a campaign of inoculation by streptococcal anatoxin in 1934. Four injections were given at intervals of two and three weeks; in Bucarest 25,000 children were inoculated. Those that subsequently contracted scarlet fever were compared in two groups, one of 229 inoculated and the other of 776 non-inoculated children. Among the former there were more mild cases, fewer complications, and fewer cases of ulceronecrotic angina (3.1 instead of 13.8 per cent.) and malignant scarlet fever (0.44 instead of 2.2 per cent.). The total mortality amounted to 0.44 per cent. among inoculated and 7.2 per cent. among non-inoculated children.

Tularemia

Tularemia has made its appearance in Central Europe (Lower Austria, Moravia, and Slovakia) and in Turkey in Europe. The first case in Lower Austria was notified in 1925, and the second in September, 1936, followed by about a hundred cases in the adjoining district on the Moravian frontier. Then the disease appeared in Southern Moravia at the end of October, 1936. Thirty to forty-five days before the first human cases a great mortality was reported among field voles and then among hares. From Moravia the disease spread to the southern part of Slovakia. In all, up to April 15 there were 391 cases in Czechoslovakia, of which 277 occurred in Moravia, 110 in Slovakia, and 4 at Prague (caused by hares coming from infected districts). The forms were glandular and ulceroglandular, and occasionally typhoidal; there were also oculo-glandular forms, with slight ocular lesions. Contact with hares was proved in 90 per cent. of cases; the others were caused by contact with wild rabbits and mice. The place of entry was sometimes a small skin wound, but in other cases the place of the initial lesion seemed to be the mouth or throat, and the illness began with angina accompanied by extensive oedema.

In Turkey the first cases were discovered in June, 1936, among soldiers in the garrison of Luleburgaz in Thrace, and continued to occur up to the end of September. The forms were generally glandular or oculo-glandular (32 per cent.); none were typhoidal. *Bacterium tularense* was isolated from human cases. The infection would appear to come from wild rabbits. It may have been transmitted by insects in some cases, but investigations which were made on this point—possibly too late—were not conclusive.

D. Ciddio (*Policlinico*, Sez. Chir., May 15, 1937, p. 246) in order to determine the results on the kidney of the removal of the aortico-renal ganglion which forms part of the coeliac plexus, carried out the operation on six dogs under morphine and chloroform anaesthesia. He studied successively the functional changes in the corresponding kidney and also the histological lesions. In the first few days after the operation he found that the kidneys showed a considerable vasodilatation followed by vasoconstriction, and finally at the end of two and a half months a return to the normal condition. He comes to the conclusion that this operation might be indicated in suitable cases.

Local News

ENGLAND AND WALES

London Chest Hospital Pathological Laboratories

The report for 1936 of the Pathological Laboratories of the City of London Hospital for Diseases of the Heart and Lungs, Victoria Park—to be known from now on as the London Chest Hospital—contains the usual summary of post-mortem records and of the routine laboratory examinations carried out for the out-patient department and in the in-patients. They totalled no fewer than 10,307. In addition 1,981 examinations were undertaken for various public bodies, consisting mainly of the examination of milk samples, swabs for diphtheria, and histological examinations. The report also contains reprints of four papers published by the staff of the laboratories. Three articles are by Dr. Gloyne. The first describes the morbid histology of pulmonary abscess cavity walls; in one case the cavity was bronchogenic, in the other associated with an interstitial abscess. In the second paper are given the results of an investigation into the relation of congenital heart disease to pulmonary tuberculosis. The 2,735 necropsy records at the hospital between 1889 and 1935 showed twenty-one cases of defects of the heart "which may be presumed to have been congenital." Six of these had tuberculous pulmonary lesions. But such lesions were not present in the six cases of congenital heart disease that were associated with cyanosis. Dr. Gloyne's third paper gives an account of a case of oat-cell carcinoma of the lung occurring in asbestosis. The last paper is by Dr. Shishkin. She concludes from her investigations that there is no evidence that infection of rabbits with virulent bovine tubercle bacilli has any effect on the pH of the blood.

Medical Society of London

The first half of the session 1937-8 of the Medical Society of London will open on Monday, October 11, with the annual general meeting at 8 p.m., followed by Mr. J. E. H. Roberts's presidential address on "Sick Nursing—Past, Present, and Future" at 8.30 p.m. On Monday, October 25, at 8.30 p.m., a discussion on treatment by intravenous infusion will be introduced by Dr. George Graham, Mr. G. Gordon-Taylor, and Dr. H. I. Coombes. A discussion on national physical training will be opened by Sir Joseph Barcroft, F.R.S., Lord Burghley, Dr. Adolphe Abrahams, and Mr. A. E. Porritt, on Monday, November 8, at 8.30 p.m. A clinical meeting will be held on Monday, November 22, at 8 p.m. On Monday, December 13, at 8.30 p.m., Mr. H. W. Rodgers, Dr. G. T. Calthrop, and Dr. S. Cochrane Shanks will introduce a discussion on modern methods of investigating gastric diseases. The Lettsomian Lectures, on a survey of the changes and results of treatment of diabetes in the last fifteen years, will be delivered by Dr. George Graham on February 21 and March 2 and 7, 1938, at 9 p.m. Sir Henry Gauvain will deliver the annual oration on "Planning a Hospital" on Monday, May 9.

Cancer Research in Yorkshire

The annual report for 1936-7 of the Yorkshire Council of the British Empire Cancer Campaign records a benefaction of £25,000, the gift of one of the honorary treasurers, Sir Algernon Firth. The report includes accounts of the progress of cancer research in the Universities of Leeds and Sheffield. In a study of the problem of industrial cancer of the bladder attempts were made to demonstrate the presence of carcinogenic constituents in the urine of workmen employed in the aniline dye industry. Large quantities of urine were extracted and tested for carcino-

genic activity by painting the skin of mice. The results of these tests, however, were completely negative. In the course of experiments on the action of different chemical substances on cancerous growths, with a view to the discovery of some substance specifically destructive to the growth while not unduly toxic to the body, the action of iodine on Rous sarcoma was investigated. The filterable agent was found to be very susceptible to minute quantities of iodine, a dilution of 1 in 5,000 always destroying the power of carcinogenesis when added to a cell-free filtrate. With a concentration of not less than 1 in 750 the filterable agent in sarcomatous cells was killed. The action of iodine thus appeared to be superior to that of potassium permanganate, which had been investigated in the previous year, a concentration of 1 in 200 of this salt being necessary to destroy the filterable active substance. In a further series of experiments, however, the effects of intravenous injection of iodine on fowls bearing Rous sarcomas were disappointing.

SCOTLAND

Mental Hospitals' Pathological Scheme

The annual report for 1936 of the Scottish Mental Hospitals Pathological Board records a marked increase in the amount of material examined. The report refers with regret to the resignation of the Board's pathologist, Dr. J. A. Biggart, who has been appointed to the Chair of Pathology at Queen's University, Belfast. It is stated that Dr. Biggart was responsible both for the organization of the work of the laboratory and for the formation of a valuable collection of photographs, specimens, and slides, in addition to routine examinations and original research. His successor is Dr. A. C. P. Campbell. In order to foster relations between clinical workers and the laboratory the Board has instituted quarterly demonstrations on the pathological aspects of mental disease for the medical officers of contributing hospitals. Although the possibility of some form of itinerant laboratory, or even the eventual provision of several laboratories in the asylums themselves, is envisaged in the future, it is considered that the present laboratory in the Edinburgh Royal Infirmary meets satisfactorily the needs of the moment. Under the existing arrangement it is in close touch with the general pathological laboratories of the University and the Infirmary, and also with other research laboratories, while its contacts with the asylums are not impaired.

Scottish Health Education Campaign

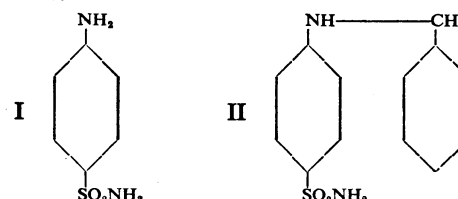
A conference of representatives of Scottish local authorities was held in Edinburgh on July 29 at which Mr. Scrymgeour Wedderburn, Parliamentary Under-Secretary of State, outlined the proposals for a health education campaign in Scotland during the coming autumn and winter. He explained that the Prime Minister was to inaugurate a National Campaign at a conference to be held in London on September 30, and it was hoped that the Scottish local authorities would be prepared to give their full co-operation. The plan of the campaign to be followed in England was to enlist at the outset the public interest in the health services generally, and thereafter to concentrate month by month on giving publicity to the various individual services. It was proposed, however, that the campaign in Scotland should take rather a different line and aim not only at urging the fuller use of the existing services but also at encouraging the maximum development of those services within the framework of existing legislation. During the autumn months full publicity would be given to the Scottish health services, and for this purpose the Department of Health for Scotland was prepared to provide local authorities with publicity material. Following this initial campaign there would be a preparatory stage during the winter and

spring leading up to a further intensive effort in the summer of 1938 associated with the Empire Exhibition in Glasgow. There would be close association with the Physical Training and Keep Fit Movement in Scotland. The campaign would obviously depend very largely for its success upon the efforts of local authorities in carrying out local propaganda work.

Correspondence

Nomenclature of Sulphanilamides

SIR,—In a letter from Dr. Alfred Model (*Journal*, August 7, p. 295) there appears to be some confusion between *p*-aminobenzenesulphonamide and *p*-benzylaminobenzenesulphonamide. The former drug is the amide of sulph-anilic acid (I), and the term "sulfanilamide" has been adopted for it by the Council for New and Non-official Remedies of the American Medical Association. It is distributed in this country under several proprietary names, such as prontosil album (Bayer), sulphonamide-P (Burroughs Wellcome and Co. and British Drug Houses), streptocide (Evans Sons Lescher and Webb). The latter drug, *p*-benzylaminobenzenesulphonamide (II), is distributed in this country only by Pharmaceutical Specialities (May and Baker) Ltd., under the proprietary name of proseptasine.



These two substances differ considerably in chemical, physical, and pharmacological properties (Halpern, B. N., and Mayer, R. L., *Presse méd.*, 1937, **45**, 747; Whitby, L. E. H., *Lancet*, 1937, **1**, 1517), and it is therefore of the greatest importance to avoid confusion between them. Further, it is probable that more members of this group will be introduced into medical practice, so that accuracy in nomenclature is essential. For this reason I suggest that we should follow the example of Dr. A. T. Fuller (*Lancet*, 1937, **1**, 194), and of the Americans, and use the term *sulphanilamide* for any brand of *p*-aminobenzenesulphonamide, and the term *benzylsulphanilamide* for any brand of *p*-benzylaminobenzenesulphonamide, since these names are reasonably convenient and are chemically specific.

The case of agranulocytosis recorded by Dr. Model is, I believe, the first to be associated with benzylsulphanilamide; some half-dozen have been associated with sulphanilamide, and at least one (Borst, J. G. G., *Lancet*, 1937, **1**, 1519) with the original (insoluble) red prontosil.—I am, etc.,

G. DISCOMBE.

St. Bartholomew's Hospital, London, E.C.1.
Aug. 10.

"Home-made" Oxygen Tent

SIR,—It was with great interest that I read in the *Journal* of April 17 (p. 812) a description of the St. George's Hospital oxygen tent. I attach a photograph of an oxygen tent which was constructed by the sailmaker on board and used with great success in H.M.S. *Shropshire* for a case of myocardial degeneration with con-

that Mrs. Ingham had some puerperal infection. He had treated her on January 8 and notified her case to the medical officer of health; her condition had improved, and on January 19 she had been discharged. He was still her medical adviser. Mrs. Heafield's confinement had been normal. He had visited her on January 6 and again on January 7, when he had found that her temperature had risen the night before. This had not been reported to him, and he had become very alarmed. He had begun to suspect puerperal infection, and decided to notify Mrs. Heafield's case as well. He had told the matron this and discussed with her the steps to be taken to stop the spread of infection, saying that other doctors must be told. On January 8 or 9 the hospital temperature charts had shown that two other patients were running temperatures. He had told the matron that this looked "something very bad." He had never thought that Mrs. Heafield contracted her infection from Mrs. Ingham. He admitted in cross-examination that he knew very little about puerperal fever and supposed that he had wasted about a couple of days. These were the first two cases that he had ever had go wrong. He could only suggest one instance of negligence of a nurse during the confinement of these women: she had walked from one to another without washing her hands. After he had notified the cases and spoken to the matron the whole atmosphere of the hospital had changed towards him: he had not received the same courtesy as before. For ten years he had been attending four or five patients a year there, but since the action had begun he had not had any. Three of his patients had asked to be confined in the Ashby hospital under his attendance, but the matron had said that the hospital was full. This might or might not have been correct. He had not interfered with the regular routine of the hospital, and had no idea which ward Mrs. Heafield would go to.

The Judgement

The learned judge reserved his judgement and delivered it in London on July 30. He said that he was satisfied that Mrs. Heafield was not suffering from a cold when she entered the hospital, because if she had been Dr. Hart would have noticed it. It was most unfortunate that the addition, "Appears to have a cold," should have been made to what was supposed to be a record of the case made at the time, and he could not accept the statement of the matron that "it was just to remind me." He also rejected the evidence of the superintendent health visitor, Mrs. Warren, that Mrs. Heafield said she had a cold before she went into hospital. He believed that Mrs. Heafield was perfectly well when she entered the hospital, and the first sign of anything being amiss had been on the evening of January 6, when her temperature had been 101.4° F. Although Dr. Hart had notified the case on January 8, and on that day written a letter to the secretary of the hospital, he had not said a word to Mr. Heafield until on January 18 he had found her flushed and delirious and had suggested a second opinion. His lordship was satisfied that Dr. Hart had been right in diagnosing Mrs. Heafield's case, and also Mrs. Ingham's case, as being due to puerperal fever. Mrs. Heafield had caught the infection from Mrs. Ingham through being placed in the same ward with her without special precaution. There had been at the hospital complete disregard of the statutory regulations, which required cases of puerperal pyrexia to be notified. To say the least, it was regrettable that so little attention seemed to have been paid to the regulations, and it was in Dr. Hart's favour that he had reported his two cases on January 8. The hospital staff had failed in their duty through placing Mrs. Heafield in a ward where there was a gravely suspicious case, and Dr. Hart had failed in his duty by not isolating Mrs. Ingham. Women were encouraged to go to hospitals and nursing homes for their confinements because of the better facilities for cleanliness and safety,

but Mrs. Heafield would have been far safer at home. He awarded her £3,500 general damages and £149 special damages against Dr. Hart and Mr. Crane jointly, but against Mr. Crane in his representative capacity only.

Dr. Hart's defence was undertaken by the London and Counties Medical Protection Society.

Universities and Colleges

UNIVERSITY OF LONDON

Recognition of Teachers

The following have been recognized as teachers of the University in the subjects indicated in parentheses:

London Hospital Medical College.—Mr. D. W. C. Northfield (Surgery).

Guy's Hospital Medical School.—Mr. R. C. Brock (Surgery); Dr. R. W. B. Ellis (Children's Diseases); Dr. C. P. Symonds (Medicine).

St. Mary's Hospital Medical School.—Mr. A. E. Porritt (Surgery).

King's College Hospital Medical School.—Mr. A. W. Kendall (Surgery).

University Readership in Biochemistry

The Senate has resolved to institute a University Readership in Biochemistry tenable at the Lister Institute of Preventive Medicine in accordance with the Regulations on University Titles (*Calendar*, 1936-7, pp. 259-70).

Dixon Fund

Dr. C. S. Hallpike has been granted £15 from the Dixon Fund towards the cost of an automatic knife-grinding machine in connexion with a histological examination of the temporal bone, and Dr. Giulio Stella £30 from the same Fund for the purchase of apparatus and materials to aid an investigation on the respiratory central mechanism, the researches to be carried out at Middlesex Hospital and in the physiology department of University College respectively.

Thomas Smythe Hughes Medical Research Fund and Beaverbrook Fund

The following grants, amounting in all to £200, have been made out of the Thomas Smythe Hughes Medical Research Fund and the Beaverbrook Fund for 1937-8, for research to be carried out at the college or hospital designated:

To Dr. Harold Muir Evans, £50 to be spent on the technical preparation of microscopic specimens to aid a comparative study of the brain of Teleostean fishes, with special reference to their habits and the study of seasonal changes in the pituitary gland of fish (Anatomical Department, University College, and in own laboratory).

To Mr. Roderic Alfred Gregory, M.Sc., £30 for the purchase of materials in connexion with investigations of the metabolism of the isolated mammalian heart, with special reference to carbohydrates, in normal and hyperthyroid animals (Department of Physiology, University College).

To Dr. Richard Wheeler Haines, £30 for the purchase of materials in connexion with a revision of the forearm muscles in a number of primitive animals (Department of Anatomy, St. Thomas's Hospital).

To Mr. John Marshall Ledingham, B.Sc., not exceeding £30 for a dissecting microscope and for the purchase of materials in connexion with an investigation into the mode of initiation and propagation of an impulse set up in a nerve fibre by electrical stimulation (Department of Biophysics, University College).

To Professor Bryan Austin McSwiney, £15 for materials for research on (1) visceral afferent pathways, and (2) reflex mechanism controlling pancreatic secretion (Sherrington School of Physiology, St. Thomas's Hospital).

To Dr. Walter Roworth Spurrell, £20 for the purchase of a microtome for serial sections in connexion with a research on the output of prolactin and oestrin in the normal and pathological cycles of menstruation and pregnancy (Physiology Department, Guy's Hospital Medical School).

To Professor Samson Wright, £25 towards the cost of a Keith Lucas pendulum and accessories for the continuation of research on the action of acetylcholine and related substances and of anticholinesterases on the central nervous system (Middlesex Hospital Medical School).

The Senate has resolved that students who have passed the B.Sc. (Household and Social Science) Examination be exempted from the Second Examination for Medical Degrees, Part 1, and that the Regulations for Internal Students (*Red*

Book, 1936-7, p. 263) be amended accordingly, and that students who have passed the M.B., B.S. Examination be exempted from examination in pathology and bacteriology at the B.D.S. Examination, and that the Regulations for Internal Students (*Red Book*, 1936-7, p. 301) be amended accordingly.

The Ph.D. Degree in Physiology has been awarded to Robert Laing Noble, M.D. (Middlesex Hospital Medical School), and the D.Sc. Degree in Physiology to Mrs. Marion Grace Eggleton, M.R.C.S., L.R.C.P. (University College).

Dr. F. D. Turner has been appointed governor of Colchester Grammar School.

Professor T. B. Johnston, who has held the University Chair of Anatomy tenable at Guy's Hospital Medical School since September, 1919, having been appointed superintendent of Guy's Hospital on the resignation of Mr. H. L. Eason, the Chair has been replaced by a part-time Chair tenable at the School, and Professor Johnston has been appointed thereto as from October 1. Professor Johnston has relinquished the office of Dean.

The Services

DEATHS IN THE SERVICES

Lieut.-Colonel JOSEPH FRANCIS WHELAN, D.S.O., O.B.E., R.A.M.C. (ret.), died at Hove early last month, aged 64. He was born on March 1, 1873, was educated at the Catholic University, Dublin, and graduated as M.B., B.Ch., and B.A.O. in the Royal University of Ireland in 1896. After filling the post of house-physician of the Mater Misericordiae Hospital in Dublin, he went out to South Africa to serve as a civil surgeon in the South African War, in March, 1900, and took a permanent commission as lieutenant in the R.A.M.C. on November 14, 1900. He attained the rank of lieutenant-colonel on June 2, 1918, and retired on March 1, 1928. For some time after his retirement he was employed on the retired list at Warwick. Before he took up the study of medicine he served as an official in the General Post Office, Dublin; and in his youth was a well-known Association football player, playing full back for Leinster in the old Inter-provincial tournaments. He served in the South African War from 1900 to 1902, taking part in operations in Cape Colony, the Orange River Colony, and the Transvaal, and received the Queen's medal with three clasps and the King's medal with two clasps. He also served throughout the war of 1914-18, when he was mentioned in dispatches in the *London Gazette* of March 12, 1918, and received the D.S.O. and the O.B.E. He was a member of the British Medical Association from 1903 to 1924.

Lieut.-Colonel JAMES DUNNE DAY, R.A.M.C. (ret.), died at Isleworth on June 18, aged 82. He was born on December 31, 1854, and was educated at Trinity College, Dublin, where he graduated M.B., B.Ch., B.A.O., in 1878, subsequently taking the F.R.F.P.S. at Glasgow in 1888. Entering the Army as surgeon on March 6, 1880, he became lieutenant-colonel after twenty years' service, and retired on June 19, 1901. He served in the South African War in 1899-1901, when he took part in operations in Cape Colony and in the Orange River Colony, including the actions at Colesberg and Vet River, and he received the Queen's medal with three clasps.

Colonel WILSON RANSON, D.S.O. R.A.M.C. (T.F.) (ret.), died at Hull on July 31, aged 67. He was the son of Mr. Joshua Ranson, and was educated at Bradfield and afterwards at Edinburgh and at St. Thomas's Hospital. He took the Scottish triple qualification in 1894, and the F.R.C.S. Ed. in 1898. After serving as assistant surgeon at the Down County Infirmary at Downpatrick he joined the R.A.M.C. (T.F.), and in 1907 was placed in medical charge of the 15th Regimental District at Beverley. At the outbreak of war in 1914 he went to France, serving successively in command of the 3rd Northumbrian Field Ambulance in the 50th Division, the 47th Casualty Clearing Station in the Fifth Army, and the 30th General Hospital as A.D.M.S. of No. 1 Army Area, and finally as D.D.M.S. of the 4th Corps in the Army of the Rhine. He was twice mentioned in dispatches, in the *London Gazette* of January 1, 1916, and of January 1, 1917. He was twice wounded, and was specially promoted to the rank of colonel in December, 1917, and received the D.S.O. After the war he served as deputy commissioner of medical services at the Ministry of Pensions and as medical superintendent of the Ministry's hospital at Orpington. His chief recreation was hunting; in 1901-2 he was master of the Ashburden Harriers. He married twice and had one son.

Medical News

A notice appears in our advertisement columns this week inviting applications for the Chair of Anatomy in the University of Melbourne at a salary of £1,200 per annum. In another notice applications are invited by the London County Council for a coroner to fill the vacancy created by the death of Dr. Edwin Smith. The salary is £1,700 per annum.

The annual dinner of past and present students of St. Mary's Hospital Medical School will be held at Claridge's Hotel on Saturday, October 2, at 7.30 p.m.

Lord Hartington, in his presidential address at the annual meeting of the Devonshire Royal Hospital, Buxton, referred to a £30,000 scheme on which the committee of management had embarked, and said that these extensions were urgently necessary. The Marchioness of Aberdeen said there was still inadequate public recognition of the fact that rheumatic diseases were curable, although the International League against Rheumatism had collected records of wonderful work in thirty countries.

The sixteenth American Congress of Physical Therapy will be held in Cincinnati, Ohio, from September 20 to 24 at the Netherland Plaza Hotel, under the presidency of Dr. William Bierman of New York. Further information can be obtained from the editorial and executive officers of the Congress, 30, North Michigan Avenue, Chicago.

The thirteenth Medical Congress of the Alps will be held in Salzburg on September 24 and 25, when the chief subject for discussion will be the diagnosis, indications, and treatment of emergencies. Further information can be obtained from Dr. Rudolf v. Rauchenbichler, Schwarzstrasse 12, Salzburg.

The Annual Congress of German Neurologists and Psychiatrists will be held at Munich from September 20 to 22, when the following subjects will be discussed: cerebral tumour, epilepsy, and experiment in psychotherapy. Further information can be obtained from Professor Nitsche, Bezirk Dresden, Pirna.

The Yugoslav Medical Society will hold its annual congress at Novi-Sand from October 3 to 5, when the subjects for discussion will be acute infectious diseases, alcoholism, tuberculosis, and professional problems. Further information can be obtained from the secretary, Seleni Venaz 1 and 2, Belgrade.

An International Congress of Scientific Journalism will be held in Paris from October 7 to 9, under the auspices of the Ministry of Commerce and Industry, the fee being 25 francs. Among the questions set down for consideration are the communication of information to the lay press; the preparation and publication internationally of scientific reviews; and the status of scientific journalists. It is hoped at this congress to formulate proposals to place this branch of journalism on a more satisfactory basis, and to arrange for the popularization of the more important modern discoveries which have general practical implications. All inquiries should be addressed to M. Jules Toutain, the general secretary of this congress, 25, Rue du Four, Paris, VI.

The International Congress of Anaesthetics will be held at the Congress Hotel, Chicago, from October 25 to 28, during the Clinical Congress of Surgery. Further information can be obtained from the general secretary, Dr. F. H. McMechan, 318, Hotel Westlake, Rocky River, Ohio.

The seventh Italian Congress of Forensic Medicine and Insurance will be held at Naples from October 15 to 18, under the presidency of Professor Giuseppe Falco. The subscription is 30 lire. Further information can be obtained from the secretary, Via Luciano Armanni, 3, Santa Patricia, Naples.