

do; it was separated from it by the entire cardiac pause. It was the soft murmur that ran into the rough one, and not the rough one into the soft one; and that makes all the difference." Now, besides that I have great difficulty in conceiving a diastolic murmur that could be separated from its succeeding systolic one by an entire cardiac pause, the words I have italicised are not to be found in the original report of the case. It is true that Dr. Salter calls the one murmur first and the other second; but, as he *nowhere* in the original report states them to be separated by any portion of a cardiac pause, I felt myself quite entitled to reverse his decision and make his first my second, when I found that doing so would explain the case more readily; and this all the more that, with a pulse at 96, it is extremely difficult to make out any difference in the length of the two pauses, especially when both are occupied by murmurs; and a mistake between what is first and what is second is readily made, and is quite excusable.

Again, as to the conduction of murmurs, I have in the course of my experience met with so many exceptions to the ordinary rules that I decline to be bound by them in any exceptional case; especially when, as in Dr. Salter's case, no special means have been adopted carefully to localise their exact position of maximum intensity. I have heard, and that very recently, an aortic systolic murmur of greatest intensity at the left edge of the sternum; and I do know enough about murmurs to make me aware that, without due regard to the position of maximum intensity—sufficient attention to which has not been paid in this case—and without proper attention to their rhythm—that is, to their relation to the different physiological acts which constitute a complete cardiac pulsation, in which I conceive Dr. Salter is in this case completely at fault—no value whatever can be assigned to them.

The one point of importance in this case is to determine what was systole and what diastole. Dr. Salter charges me with being incredulous as to the existence of a diastolic impulse in certain cases; but what I have written bears no such interpretation; I only expressed my incredulity as to the existence of "a diastole with a ventricular impulse, and a systole without one": and both Walshe and Hope, the two authorities quoted by Dr. Salter, support me in this incredulity. Walshe says: "In certain states of disease, the shock (that is the heart's impulse) becomes *double*, the *added* impulse being systolic or diastolic" (3rd ed., p. 32); and Hope tells us that the sinking back of a hypertrophied heart terminates occasionally in a jog or shock, to which he called attention in his first edition under the name of back stroke, but which he subsequently termed a diastolic impulse (3rd ed., p. 67); and that there may be no mistake as to his meaning, he adds (p. 272), "a strong, slowly heaving impulse, then, is the principal sign of simple hypertrophy; and the affection may be known to be greater when the [systolic] impulse is followed by a diastolic impulse". I have inserted the word systolic to make the obvious meaning still more plain. Dr. Salter is the only man, so far as I know, who has attributed the diastolic character to a *single* impulse occurring but once during a cardiac pulsation; and he has done so solely because this single, slow, heaving impulse alternated with the radial pulse—"no one watching it, or feeling it, or listening to it, unchecked by the pulse, would resist the conviction that it was systolic. . . . No case could better illustrate the importance of checking the cardiac movements by the arterial movements". Dr. Salter is aware that the radial pulse is retarded in cases of aortic regurgitation, once in fifteen times, he says; in every case, says Henderson, if properly sought for; and I agree with him: yet in this momentous case, which, if true, would revolutionise our ideas of cardiac physiology, no pains were taken to ascertain whether the radial pulse was retarded or not; no comparison was instituted between the relations of the cardiac pulse to the cardiac impulse on the one hand, and to the radial pulse on the other; but Dr. Salter prefers to consider this single heaving impulse as diastolic *solely* because it alternated with the radial pulse. Dr. Salter believes that the systole of a dilated, hypertrophied heart, more than double the weight of a healthy one, may be imperceptible; and yet that the same heart may, by its diastole, give an impulse so forcible, and in every other respect so undistinguishable from a systolic impulse, that it can only be recognised to be diastolic by its relation to the radial pulse—a relation which even he acknowledges to be occasionally vitiated in cases of disease similar to the one under consideration, yet which in this particular (and most important) case he has taken no pains to ascertain and verify. Is this reasonable? or is it not more consistent with correct ratiocination to conclude that his reasoning—whatever his belief may be—leads to the assumption that a ventricular contraction may be systolic or diastolic according to its relation to the pulse, and that, therefore, on his own showing, his interpretation of the case is absurd?

I am, etc.,
GEORGE W. BALFOUR.

21, Alva Street, Edinburgh, September 8th, 1870.

ASSOCIATION INTELLIGENCE.

EAST YORK AND NORTH LINCOLN BRANCH.

THE half-yearly meeting of the above Branch will be held at the Angel Hotel, Brigg, on Wednesday, September 28th, 1870, at half-past three o'clock precisely: KELBURNE KING, M.D., President, in the Chair.

Members of the profession are invited to attend both the meeting and the dinner. Dinner at 5 o'clock. Tickets, 5s. 6d.

ROBERT H. B. NICHOLSON, *Honorary Secretary*.

SOUTH-EASTERN BRANCH: EAST KENT DISTRICT MEDICAL MEETINGS.

THE September meeting of the members of the above District will be held at the Royal Sea-bathing Infirmary, Margate, on Thursday, September 29th, 1870, at 2 P.M.

Dinner will be provided at the Cliftonville Hotel at a quarter to five punctually. Charge, 5s., exclusive of wine.

CHARLES PARSONS, M.D., *Honorary Secretary*.

2, St. James's Street, Dover, September 20th, 1870.

WEST SOMERSET BRANCH.

THE autumnal meeting of the above Branch will be held at the Royal Clarence Hotel, Bridgwater, on Thursday, October 13th, at 5 P.M.; J. CORNWALL, Esq., of Ashcott, President, will be in the Chair.

Gentlemen intending to be present at the dinner, or to read papers after, are requested to give notice to the Honorary Secretary.

W. M. KELLY, M.D., *Honorary Secretary*.

Taunton, September 13th, 1870.

SOUTH MIDLAND BRANCH.

THE fourteenth autumnal meeting of the above Branch will be held at Stony Stratford, Bucks, on Tuesday, October 18th.

Gentlemen who intend reading papers or cases, are requested to furnish the names or titles, as early as possible, to

J. M. BRYAN, M.D., *Honorary Secretary*.

Northampton, September 20th, 1870.

SOUTH EASTERN BRANCH: WEST KENT DISTRICT MEETINGS.

THE first meeting for 1870-71 was held at Rochester on September 13th; WILLIAM BELL, Esq., in the Chair.

The next Meeting was appointed for Maidstone, on November 8th, with Mr. Matthew Adams for Chairman. Dr. Frederick J. Brown was elected Acting Honorary Secretary until May.

New Member.—James Lodge Wilson, Esq., was elected a Member of the Association and of the Branch, subject to the rule respecting confirmation at the Branch Annual Meeting.

Communications.—1. Dr. WHITE, of Snodland, exhibited a Photograph of a Fetus born without extremities. A discussion took place relative to the circumstance of this being a case of arrest, some maintaining that it was intrauterine amputation.

2. Dr. MONCKTON exhibited specimens from the femur, ilium, and cranium of a case of Mollities Ossium, which had been under the care of Dr. Owens, of East Farleigh. The patient was a female, aged 23, of dissolute life till 19. She then married, and was confined prematurely four times; the children were all dead. The last confinement took place in November 1868, at seven months, with twins. She was then ailing; six weeks afterwards, she fell and fractured the left thigh about two inches below the trochanter. She remained in bed five months, then moved about imperfectly, with crutches and assistance, for two months. After this, she fell again, and broke the other thigh, keeping her bed thenceforth till death in July 1870. As is usual in this disease, the sufferer was a female; but her age was only twenty-three, which is younger than usual. She died apparently of simple exhaustion. All the bones were softened; the femur was cut through easily with a scalpel, which could also be plunged deeply into the vertebrae, ilium, and parietal bones. The clavicle was cut asunder, but less easily. Angular curvature of the spine existed, and the thorax was flattened on each side, the sternal cartilages being carried upwards to a point. The shape of the pelvis was not changed, nor was its diameter intruded on. One humerus broke in the surgeon's hand on the application of a very

slight force. The ilium could be bent like stiff brown cardboard. Where the fracture of the femur had occurred, eighteen months before, a false joint had been formed, wholly by fibrous growth around the bone; the ends of the latter had not even been rounded off, nor any attempt made at a callus or osseous repair. The medullary canal was very large, and the bone-substance thin; the medulla itself was diffident, but reddened only in the neighbourhood of the injury; that within the shaft elsewhere being of natural colour. The cranial bones appeared thickened by a slight loosening of their textures. No scrofulous or syphilitic cicatrices could be found; the teeth were well formed and sound. The muscles, though wasted, were firm and of good colour; and the viscera generally healthy. Constipation had been a great trouble during life, and the whole colon was, after death, found crammed with scybala.

3. Mr. CHURTON, of Erith, read a case of Jaundice arising from anxiety, which was cured by bromide of potassium.

4. Dr. J. BRAXTON HICKS exhibited specimens and detailed cases of Extrauterine Pregnancy and of Ovarian Tumour.

Dinner.—The members and visitors dined at the Bull Hotel.

OBITUARY.

WILLIAM D. CHOWNE, M.D.

Dr. W. D. CHOWNE died on Saturday last at Withern, in Lancashire, at the age of 79. He was for many years connected with the Charing Cross Hospital—we believe nearly from its commencement—holding the posts of Physician and Lecturer on Medicine and on Midwifery. He was also a Fellow of the Royal College of Physicians, a Member of the Royal Medical and Chirurgical Society, a Vice-President of the Epidemiological Society, and a Fellow of the Medical Society of London, in the management of the affairs of which he took an active part, and of which he was President some years ago.

RICHARD WELBANK, Esq.

Mr. RICHARD WELBANK, who had long retired from the active practice of the profession, died on August 21st, at Kilburn, where he had resided for several years. He was born in 1796 in the Tower, where his father, who held an appointment under Government, had a residence in connection with his duties in the Ordnance Office. He received his general education at the Charterhouse, and there acquired the taste for classical reading, which he retained through life. He was articled at the College of Surgeons as a student under his uncle—one of a former class of surgeons who, being members of the College, dispensed their own medicines and surgical appliances, yet excluded themselves from what is now known as general practice, by not attending in cases of midwifery. His professional education was received at St. Bartholomew's Hospital, under the superintendence of Mr. Abernethy.

After acting as dresser under Mr. Abernethy, he became House-Surgeon on the nomination of Mr. Vincent. During the time he held the office, he pointed out, as the result of his reading and observation, that the sloughing phagedæna of the civil hospitals, which prevailed severely in the foul wards among young and otherwise healthy subjects, was the same disease as the hospital gangrene of the military hospitals, attacking the wounds and operations in the soldiers after a battle. He suggested that the treatment which had been found successful in the army should be adopted at home—namely, the complete destruction of the diseased parts by the free application of caustic—the potential rather than the actual cautery; and that nitric acid, from its greater affinity for animal matter, was the best agent. Mr. Vincent at first refused to allow its use; but he was at length induced, in a case which seemed hopeless, to allow the application of an equal part of the acid with water. Happily the sloughing was checked, and the patient recovered. In subsequent cases, the pure acid was used. The application of the pure acid was found to be less painful than when diluted; the disease was cured, and sloughing phagedæna ceased to be a cause of terror in the hospital. Before the introduction of this treatment, Mr. Abernethy had been known, in going round the wards, to clasp his hands

and to mutter, as he passed on to the next bed, "I don't know what to do". Constitutional treatment had failed.

Mr. Welbank entered on a private practice in Chancery Lane, highly respectable in its character, and sufficiently remunerative for the wants of a man who, by natural disposition as well as by choice, was a recluse and a scholar. At that time, public appointments in the profession were neither numerous nor easily obtained; they were confined to the few who possessed either wealth or influence. None were open to Mr. Welbank. Unhappily for his own reputation and advancement, his engagements with his uncle hindered him from accepting an offer by Mr. Abernethy, who, finding that his health began to fail, was desirous of obtaining the services of Mr. Welbank as his general assistant in private practice.

He took an active part in the affairs of the Medical and Chirurgical Society, which then held its meetings in Lincoln's Inn Fields; and he contributed two papers to the *Transactions*: one, a Report of the cases of Sloughing Phagedæna, which had been treated with nitric acid, according to his plan; the other, suggestions for investigating the different forms of Venereal Diseases. Adopting the distinctions by Evans and Carmichael, of simple and phagedænic ulcers, he proposed to restrict the term syphilis to the sore which is invariably followed in its secondary effects by a squamous eruption. This suggestion he afterwards brought under notice in a separate volume. These, and an English edition of Frick's work on the Eye, were the only contributions which he made in his own name to the literature of the profession.

When the Council of the College of Surgeons, in the interest of the medical officers of the large hospitals in London, refused to acknowledge the instruction given at the county hospitals or by private lecturers, as part of the recognised curriculum of education, Mr. Welbank joined with others of his standing in supporting Sir William Lawrence in the attempt to obtain from the Council a revision of their regulations, and his name was one of those attached to the public notice calling a meeting of members of the College to consider the question.

His name was placed in the first list of Fellows of the College under the Charter of 1843; and the following year he was elected into the Council—being the first member chosen by the Fellows. However honourable as a mark of the approbation of his professional compeers, this latest honour came too late in life to be of any value as an object of personal ambition; "but", said he to the Council, after taking his seat, "I do value it extremely, as it may be the means of enabling me to extend to the younger members of the profession that encouragement of which, for thirty years of my professional life, I have so much felt the disheartening want myself." He was re-elected on the expiration of his term of office, but did not retain his seat long. Under a consciousness of failing health, he soon afterwards retired from practice.

MEDICAL NEWS.

APOTHECARIES' HALL.—The following gentleman passed his examination in the science and practice of medicine, and received his certificate to practise, on Thursday, September 15th, 1870.

Ringer, Beverley Stewart, Metropolitan Free Hospital, City

As an Assistant in compounding and dispensing medicines.

Butterworth, Albert, Halifax, Yorkshire

The following gentlemen also on the same day passed their first professional examination.

Lee, Alfred Robert, University College
Popham, Francis W. H., University College
Shaw, Josephus, Guy's Hospital
Wacher, Frank, St. Bartholomew's Hospital

MEDICAL VACANCIES.

THE following vacancies are announced:—

CHELTENHAM UNION—Medical Officer for District No. 4: applications, 28th; election, 29th.

CLONMEL UNION, co. Tipperary—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the St. Mary's Dispensary District: Oct. 4th.

DREADNOTH INFIRMARY, Greenwich—Surgeon.

ENNSKILLEN UNION, co. Fermanagh—Medical Officer for the Lisbellaw Dispensary District: 30th.

HOLYWELL UNION, Flintshire—Medical Officer for the Whitford No. 2 District.

KELLS UNION, co. Meath—Medical Officer for the Nobber Dispensary District: October 7th.

KIDDERMINSTER INFIRMARY—House-Surgeon and Secretary: applications, Oct. 5th; election, 12th; duties, early in November.

KILMUIR, Parish of, Isle of Skye—Medical Officer.

KINGSBRIDGE UNION, Devon—Medical Officer for District No. 2; applications, 30th; election, Oct. 1st.

LEICESTER UNION—Medical Officer for District No. 3.

LEICESTER PROVIDENT DISPENSARY—Medical Officer: applications, Oct. 17th; election, 20th.

LIVERPOOL DISPENSARIES—Honorary Medical Officer, North Dispensary: applications, 28th; election, Oct. 6th. Two Assistant Resident House-Surgeons: applications, 28th; Medical Board, 29th.

MIDDLETON UNION, co. Cork—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Cloyne Dispensary District: 29th.

MORVEN, Argyleshire—Parochial Medical Officer: applications, Oct. 1st.

NARBERTH UNION, Pembrokeshire—Medical Officer for District No. 2: applications, 24th; election, 26th; duties, 29th.

NORTHALLERTON, Yorkshire—Surgeon to the Gaol: applications, Oct. 8th; election, 18th.

NORTHUMBERLAND COUNTY LUNATIC ASYLUM, Morpeth—Medical Officer: applications, Oct. 3rd.

RETFORD GENERAL DISPENSARY—House-Surgeon and Apothecary.

ST. BARTHOLOMEW'S HOSPITAL, Rochester—Assistant-Surgeon: Oct. 13th.

ST. MARY'S HOSPITAL AND DISPENSARY FOR WOMEN AND CHILDREN, Manchester—Medical Officer for Out-Patients: applications, 30th.

SLEAFORD UNION, Lincolnshire—Medical Officer for the Blankney District.

STOURBRIDGE DISPENSARY—Surgeon and Secretary: applications, 26th.

SURREY DISPENSARY, Great Dover Road—House-Surgeon: applications, 26th; Committee, 27th; election, Oct. 6th.

UNIVERSITY OF ABERDEEN—Three Examiners for Graduation in Medicine: applications, Oct. 1st.

WATERFORD UNION—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Tramore Dispensary District: 26th.

WESTMINSTER HOSPITAL—House-Physician: applications, Oct. 1st; election, 11th.

WORCESTER AMALGAMATED FRIENDLY SOCIETIES MEDICAL ASSOCIATION—Medical Officer: applications, Oct. 11th; vacancy, Christmas.

YELL and FETLAR, Islands of, Shetland—Parochial Medical Officer: applications, Oct. 1st.

WEST RIDING LUNATIC ASYLUM, Wakefield—Clinical Clerk: applications before 30th inst.

MEDICAL APPOINTMENT.

Names marked with an asterisk are those of Members of the Association.

FUSSELL, E. F., M.B., appointed Assistant-Physician to the Sussex County Hospital.

BIRTHS.

GRAHAM.—On September 20th, at Weybridge, the wife of *A. R. Graham, M.B., of a daughter.

HARRISON.—On September 8th, at Ambleside, the wife of *R. Harrison, Esq., Surgeon, of a son.

HAYWARD.—On September 7th, at Cambridge House, Ealing, the wife of *H. Howard Hayward, Esq., of Harley Street, of a son.

LOWE.—On September 15th, at Lincoln, the wife of *G. M. Lowe, M.D., of a son.

MARRIAGES.

ALLEN, William, Esq., Surgeon Bengal Army, to Mary Frances, daughter of C. F. THURSTON, Esq., of Machynlleth, at Pennal, on September 15th.

BOWERMAN, R. J., Esq., of Uffculme, Devon, to Alice Margaret, daughter of C. LINGAN, M.D., of Hereford, on September 15th.

LAWRANCE, E. A., Esq., Surgeon Indian Army, to Margaret Drysdale, daughter of J. DUNCAN, Esq., of Aberdeen, at St. George's, Hanover Square, on Sept. 15.

*LONG, Mark, M.D., of Barking Road, Essex, to Sophia Amelia, eldest daughter of *James Cooper, Esq., Surgeon, of Cromer, on September 15th.

DEATHS.

CHOWNE, William D., M.D., of Hyde Park Place, at Withern, Lancashire, aged 79, on September 17th.

PEARSON.—On September 9th, at Shotley Bridge, Durham, aged 5 months, Thomas Darrel Oakes, second son of T. R. Pearson, L.R.C.P.Ed., of Stowmarket, Suffolk.

ROOKE, Henry T. L., M.D., aged 46, for twenty-two years on the Medical Staff of the Seamen's Hospital Society, at the Seamen's Hospital, Greenwich, aged 46, on September 17th.

PHYSIOLOGY AND VIVISECTION.—At a meeting of the General Committee of the British Association on Tuesday, the following resolution was proposed by Mr. Samuelson, seconded by Dr. Rolleston, and carried: "That the Committee of Section D be requested to draw up a statement of their views upon physiology and experiments in their various bearings, and that this document be circulated among the members of the Association; that the said Committee be further requested to consider from time to time whether any steps can be taken by them or by the Association which will tend to reduce to its minimum the suffering entailed by legitimate physiological inquiries, or any which will have the effect of employing the influence of this Association in the discouragement of experiments which are not clearly legitimate on live animals."

BRITISH PHARMACEUTICAL CONFERENCE.—The seventh annual meeting of the British Pharmaceutical Conference was held last week, in the Royal Institution, Liverpool, under the presidency of Mr. W. W. Stoddart. A large number of new members—about 920—were elected. The report of the Executive Committee announced the donation of fifty guineas by Mr. T. H. Hills, with the suggestion that it should be employed in stimulating pharmaceutical education. The President delivered an address, which was principally devoted to a review of the progress of chemistry during the year. He believed that the Pharmacy Act, obtained two years ago, had worked well, and that benefit was to be expected from it in the future.

THE BABY-FARMING CASE.

THE trial of the two women, Waters and Ellis, on charges of causing the death of children under the baby-farming system, commenced at the Central Criminal Court on Wednesday. One case only was gone into at first. The trial lasted over Wednesday and Thursday. On the latter day, a verdict of "Not guilty" was returned as regarded the prisoner Ellis, the trial of the other woman not being completed. The woman Ellis was retained in custody, as there were other charges against her.

EDUCATIONAL VACCINATING-STATIONS.

IN order to provide for the granting of those Special Certificates of Proficiency in Vaccination, which, under the Regulations of the Privy Council, are required to be part of the Medical Qualification for entering into contracts for the performance of Public Vaccination, or for acting as Deputy to a Contractor, the following arrangements are made.

1. The Vaccinating-Stations, enumerated in the subjoined list, are open, under conditions appointed by the Privy Council, for the purposes of teaching and examination.

2. The Public Vaccinators officiating at these Stations are authorised by the Privy Council to give the required Certificates of Proficiency in Vaccination to persons whom they have sufficiently instructed therein.

3. The Public Vaccinators, whose names in the subjoined list are printed in *italic letters*, are also authorised to give such Certificates, after satisfactory examination, to persons whom they have not themselves instructed.

Cities and Towns.	Places used as Educational Vaccinating-Stations.	Public Vaccinators authorised to give Certificates of Proficiency.	Days and Hours of attendance.
London	PRINCIPAL STATION: Surrey Chapel, Blackfriars Road.	<i>Mr. J. F. Marson.</i>	Tuesday, Thursday; 1.
—	NORTH-W. STATION: 7, Grove Place, Lisson Grove.	Mr. J. G. Gerrans.	Monday; 2.
—	WEST STATION: 9, St. George's Road, Pimlico, S.W.	Dr. E. L. Webb.	Monday; 10.
—	EAST STATION: 1, Well Street, Wellclose Square.	Mr. W. J. Lewis.	Tuesday; 10.
—	NORTH STATION: Tottenham Court Chapel, Tottenham Court Road.	Mr. W. E. G. Pearse.	Monday, Wednesday; 1.
—	SOUTH-W. STATION: 2, Regent Place, Horseferry Road.	Mr. W. E. G. Pearse.	Tuesday; 2.
—	STRAND STATION: Charing Cross Hospital.	Mr. R. W. Dunn.	Monday; 10.
Birmingham	STATION 1: School Rooms, 27, Old Meeting Street.	<i>Dr. E. Robinson.</i>	Monday; 11.
—	STATION 2: Working Men's Mutual Improvement Society, Barr Street.	<i>Dr. E. Robinson.</i>	Tuesday; 11.
—	STATION 3: St. Mark's School Rooms, St. Mark St.	<i>Dr. E. Robinson.</i>	Wednesday; 11.
—	STATION 4: Islington Assembly Rooms, 42, Broad St.	<i>Dr. E. Robinson.</i>	Thursday; 11.
Bristol	The Public Vaccination Station, Peter St.	<i>Dr. H. A. P. Robertson.</i>	Wednesday; 10.
Exeter	Odd Fellows' Hall, Bamfylde Street.	<i>Mr. C. H. Roper.</i>	Thursday; 3.
Leeds	23, Burmantofts Street.	<i>Mr. F. Holmes.</i>	Tuesday; 3.
Liverpool	4, Oldham Street.	<i>Mr. A. B. Steele.</i>	Thursday; 2.
Manchester	159, Rochdale Road.	<i>Mr. E. S. Guest.</i>	Monday; 2.
Newcastle-upon-Tyne	11, Pilgrim Street.	<i>Mr. G. C. Gilchrist.</i>	Tuesday; 2.
Edinburgh	The Royal Dispensary.	<i>Dr. W. Husband.</i>	Wednesday, Saturday; 12.
Glasgow	The Hall of the Faculty of Physicians and Surgeons.	<i>Dr. J. Dunlop.</i>	Monday; 12.
—	The Royal Infirmary.	Dr. R. D. Tannahill.	Monday, Thursday; 12.

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.—National Orthopaedic, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Free, 2 P.M.
 WEDNESDAY...St. Bartholomew's, 1.30 P.M.—St. Mary's, 1.30 P.M.—Middlesex, 1 P.M.—University College, 2 P.M.—St. Thomas's, 1 P.M.—London, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Great Northern, 2 P.M.—Samaritan Free Hospital for Women and Children, 2.30 P.M.—Cancer Hospital, Brompton, 3 P.M.—King's College, 2 P.M.
 THURSDAY....St. George's, 1 P.M.—Central London Ophthalmic, 1 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.—Central London Ophthalmic, 2 P.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, 1 P.M.—Lock (Clinical Demonstrations and Operations), 1 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Free, 2 P.M.—East London Hospital for Children, 2 P.M.—Hospital for Women, 9.30 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.

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.

WE CANNOT UNDERTAKE TO RETURN MANUSCRIPTS NOT USED.

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

THE CONTAGIOUS DISEASES ACTS.

SIR,—I notice in your issue of last week some remarks made by Dr. Rumsey relative to the Contagious Diseases Acts; as they are calculated to mislead your readers, I shall feel obliged if you will allow me to contradict them. Dr. Rumsey says that the English system differs from the French because in this favoured isle there is no registration of the women brought under the operation of the Act. This is one of the false facts which have been industriously circulated, and no doubt Dr. Rumsey, like many more, has been misled. The truth is, that the essence of the system consists in the registration and periodical examination of the women, in proof of which permit me to refer to a document which is at present held *in terrorem* over unfortunate women in subjected districts, in order to force them on to the register. The ordinance to which I allude emanates from the Secretary of State for War, and provides "That a complete register shall be kept by the police, in all the districts to which the act applies, of all the women that come under its provisions." They are further to be told of the *penal consequences* of not submitting voluntarily to be registered and periodically examined. Dr. Rumsey further remarks that the women are not licensed under this Act. Now, they are permitted, nay, encouraged to practise under certain conditions. The Government women are called good girls, they give no trouble to the police, and set a good example to recalcitrants; like licensed hawkers, they regard with great jealousy girl's practising illegally, that is, without being registered; and in common with brothel-keepers, are valuable allies to the police in bringing outsiders under the regulations. Now, what is this but licensing? If I am permitted to practise as a physician, provided I submit to examination and pass satisfactorily, and am deprived of all privileges if I do not, am I not licensed? Exactly the same remark applies to the women, and it is simply an insult to common sense to pretend otherwise.

Dr. Rumsey says, moreover, that no clean bill of health is given to the women here as in France. Now, according to the original English Act, the surgeon was obliged to do this, saying that the woman was free from contagious disease. At present, exactly the same document is supplied to the women on both sides of the Channel, and the surgeon is bound by the Act to supply it, namely, a piece of paper stating the date of the last examination and the time of the next. This is, of course, a clean bill of health for the intermediate period, and I should like to know why the women are not to have it. Surely it is very inconsistent of Government to disinfect prostitutes for the use of soldiers, and then deprive the soldiers of all evidence as to what women have undergone the process.

In fact, sir, the French and English Acts are essentially the same, and alike infamous. The only difference that I can discover is, that the English law is infinitely more atrocious than the French, inasmuch as it sanctions the registration as common prostitutes of girls under age and little children, notwithstanding their parents' reclamations, wives in spite of their husbands, kept women in spite of their keepers, none of which things have ever been tolerated by the French administration. As to the indecent discussion, it has been rendered necessary by the one-sided conduct of the press and the meddlesome *doctrinaires* who, in originating this obscene law, are, in my opinion, guilty of far greater indecency than those who merely proclaim their indignation in order to be rid of it.

I am, etc.,

CHARLES BELL TAYLOR, M.D., F.R.C.S.E.

Nottingham, August 1870.

P.S.—As a sanitary measure, I am prepared to prove that the measure is utterly futile.

* * Mr. R. Craister Bramley, Leeds, wishes it to be known that he has received, for the second time, a document asking him to state that he records his solemn protest, etc., against the extension of the Contagious Diseases Acts, and that he has returned it, stating that, on the contrary, he considers the measure fraught with a large amount of benefit, and calculated to do much good. He adds that, on returning the document as requested, with the necessary alterations to express his opinion, he has not felt bound to pay the postage.

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.

THE CARBOLIC ACID TREATMENT.—Mr. H. M. Morgan (Lichfield) asks: "Whether there is any published account, in the form of a pamphlet or otherwise, of Mr. Lister's usual hospital treatment by carbolic acid, as such would be very acceptable to many who cannot go to see his treatment for themselves. Where can his plasters and dressings be obtained?"

STUDENS (Middlesex Hospital).—Yes.

MEDICAL ETIQUETTE.

In forwarding the subjoined correspondence, Dr. Lownds states that the case which gave rise to it was a simple wound of the arm from the horn of a bull. After having been cleansed with a carbolic acid lotion, it was united by three wire sutures, and dressed with lint soaked in carbolic acid lotion. This was again applied next day through the dressings by the patient. On the third day, or two clear days after the accident, Dr. Lownds again dressed it, and nothing could appear more satisfactory. No pus at all exuded, nor was there pain. The correspondence has relation to the Saturday; on the morning of which day the patient was seen by Dr. Lownds's assistant, Dr. Jackson, who saw no tumour, nor was pain complained of.

Egham Hill, Monday Evening.

My dear Sir,—I am told that, on Saturday last, you visited one of my patients, and, at his request, undid the dressings on Leggett's arm, and prescribed a different treatment to what I had ordered. I trust you will favour me with an explanation of this, as I believe that the only way in which medical men can work together is by scrupulously observing the rules of medical etiquette.

Yours faithfully,

T. M. LOWND'S.

G. P. Heyward, Esq., Charnhill Hurst.

Charnhill Hurst, Englefield Green, Staines, August 31st, 1870.

Dear Sir,—It is true that, after a second urgent application from Mr. Geo. Leggett, I visited him on Saturday last; and it is also true that, finding him to be suffering severe pain from a fluctuating tumour in the upper arm, I removed, at his request, the overtight bandage, and gave exit to about half a teacupful of foetid pus, to his astounding relief. I directed warm fomentations, and the application of a poultice; and I desired him to communicate the fact to you at your next visit. I took this course from motives of humanity; and if any further justification be necessary, I may plead that I have attended Leggett and his family for twenty-five years. He pressed me strongly to take charge of the case; but, feeling perhaps less solicitous about practice than in past times, I advised that the future treatment should be confided to you; and I am bound in truth to add, that Leggett unwillingly accepted my advice. If, when called to the case, you had bestowed a thought upon the matter, it might have occurred to you that some one or other practitioner had previously attended Leggett (an old resident in the parish); but I am apprehensive that an overweening self-confidence may have led you to infer that you were deliberately preferred, and not summoned in a most serious emergency. I can recall three instances where you have attended patients of mine under the like circumstances, without complaint from me. You retained two of these cases until their deaths relieved you from further attendance; and you relinquished the third without reluctance. This conduct may or may not be scrupulously correct; it discloses, however, a warm regard for your own interests, real or imaginary. I may supplement these details by stating that, about three weeks since, I was requested by ... of ... to visit her mother, Mrs. ...; and I declined, upon the ground that you had already been consulted by Mrs. ... and other branches of the family. If you had been equally forbearing and less sensitive, there would have arisen no occasion for crimination and recrimination upon the question of what you infelicitously term medical etiquette.

I am, yours faithfully,

G. P. HEYWARD.

Dr. Lownds, Egham Hill.

Egham Hill, Thursday, 1st September, 1870.

Dear Sir,—I regret that you should have looked upon my note of Monday as a personal rather than one due solely to professional grounds. I avoid replying to any of your personal remarks. What I consider objectionable was in your attending Leggett and opening his arm, as dressed, without being prepared to take over the case, or communicating to me or my assistant, Dr. Jackson, on the subject. The distance to my house was so short, that no delay could have taken place. Until I got your note, I was quite unaware that before Saturday last ... had ever been attended by you. Some of his family sent for medical attendance to me as early as January last.

As far as I know, I have only attended at two places where you were in attendance, or had been so lately: one at Thorpe, about which I saw you next day; and one in the Sand-pits, where I was called in, and not told that the child had been under medical treatment, until I had examined it, and asked who had been attending lately, or if they had medical advice. The reply was, that you had been, and that you had not seen the child for some days, and that they wished to make a change. I attended for some days (three, I think); and after the first day, they did not send for medicine, and on the third day they told me that they had decided on continuing under you. I went away; and, after the child's death, I spoke to you about the medical features of it, and you expressed no dissatisfaction.

My only wish has been to work comfortably with my brother practitioners here; and I have ever given them what assistance I could. If you think I have complained unreasonably, I shall be glad to submit this correspondence to any of the medical journals, or to the British Medical Association. I only wish points settled that may otherwise produce unpleasantness.

Yours faithfully,

George P. Heyward, Esq., Charnhill Hurst.

T. M. LOWND'S.

Charnhill Hurst, Englefield Green, Sept. 1st, 1870.

Dear Sir,—I have to acknowledge the receipt of your letter of this day's date. I demur to the assumption of "Dr." which you claim for your assistant (as at present advised); albeit, I attach no importance to the designation which is often obtained without real merit; however, the unreasoning may be influenced by the tinkling cymbal. I conclude that the profession, amid their senseless jealousies and heart-burnings, will soon come to dictate to the public whom they may and may not employ; and therefore I can have no objection to your submitting our correspondence to the public and medical journals, or to the British Medical Association, in order that the laity, as contra-distinguished from the profession, may fairly judge the matter at issue.

I am, yours faithfully,

Dr. Lownds, Egham Hill.

G. P. HEYWARD.

NOTICE.—It is requested that all Letters, etc., intended for the Editor or the Publisher of the BRITISH MEDICAL JOURNAL be addressed solely to the Office, 37, Great Queen Street, London, W.C.

R. B.—The subject is noticed in another page.

THE TREATMENT OF DIARRHŒA.

SIR,—I have read, with much surprise, the statement contained in the opening paragraph of Dr. Johnson's letter in your issue of the 20th instant; and I cannot but think that some explanation of "the very unusual course adopted by the Registrar-General" is due, not only to the profession, but to the public at large.

While fully recognising the therapeutical value of sulphuric acid in certain cases of chronic or passive diarrhœa, and other discharges depending on a relaxed and debilitated condition of the intestinal mucous membrane, I believe that the indiscriminate use of it, or any other astringent, *ab initio*, in the treatment of our common summer or autumn diarrhœa, cannot be too strongly deprecated. There is probably no other disorder to which we can so stringently apply the rule, "treat causes rather than symptoms"; and it is this point that not only the public in general, but many members of the profession, appear to misapprehend. Thus, a man gets an attack of the "bowel complaint", and naturally thinks he had better have it cured. He applies to a surgeon, who gives him, perhaps, chalk mixture, with catechu and opium; while another, perhaps, would give him sulphuric acid and opium—diametrically opposite treatment, and therefore irrational; for if the chalk will do good, the acid must necessarily do harm, and *vice versa*. Now, in most cases, both will do harm if given *ab initio*. They defeat nature's indications; the one by shutting up offending matter, the other by causing additional irritation. The apparent good often produced by the latter (sulphuric acid) results from the large doses of opium given, which by their anodyne effect mask the irritation existing; just as in the case of acute tropical dysentery, where opium was formerly largely given, producing apparent ease and amendment, while inflammation, ulceration, and perhaps sloughing, were going on unchecked.

In practice, we recognise at least six forms of diarrhœa, each having its special causes, symptoms, and treatment; and in only two of these are we justified in using astringents *ab initio*, viz., colliquative diarrhœa from bowel ulceration, and the purely passive diarrhœa of old people, where the shock and drain will prove rapidly fatal if not checked; and it is in this form especially that sulphuric acid and opium often act admirably, the sulphuric acid as a tonic and astringent, the opium (in half-grain doses) as a stimulant and astringent.

The form most rife this season is either simple diarrhœa from irritant ingesta, or bilious, choleraic or autumnal diarrhœa (plum cholera), and both of these are to be regarded as efforts of nature to get rid of irritant matter in the small intestine, whether that be indigestible food, or redundant and vitiated bile, or "acescent" fruit. Here, by giving astringents, we simply thwart nature, and shut up in the intestines what she is trying to expel, if we will only let her, while we run the additional risk of setting up muco-enteritis. On the contrary, if we give castor-oil, followed by warm rhubarb draughts, we not only assist and guide nature's efforts, but also promote a secondary astringent effect by the tannic acid in the rhubarb, thereby preventing the mucous membrane from being left in a relaxed and debilitated condition, and so obviating the supervention of the chronic or passive form.

I have used the following formula extensively in India. R. Olei ricini 3iiv; spiritus chloroformi (Ph. B.) 3i; liquoris opii sedativi M. x; olei cinnamomi M. iii; spiritus vini gallici 3ii; aquæ ad 3iss. M. Fiat haustus, to be taken at once, and repeated in an hour or two, if required. In cases of disordered bowels and diarrhœa, but especially those associated with cholera malaise, when that disease was prevailing, as it generally did, endemically, I found it act literally like a charm, marked relief being usually given to the urgent symptoms by the first dose, and more than a second being seldom required; the subsequent treatment being as indicated by the progress of the case, as warm rhubarb draughts or salines if febrile reaction supervened; or the various mineral or vegetable astringents if a tendency to the chronic or passive form was established.

I can personally speak as to the relief given by the above formula, having more than once experienced it myself; and I remember particularly an outbreak of choleraic diarrhœa on board the steamship *Candia* in the Hooghly, when I had recourse to it, for the first time, with most favourable results.

I do not, of course, mean to extol castor-oil as an universal specific in all cases of diarrhœa, though I believe that even such would be an error on the safer side. I simply give the result of my experience, limited though it may have been; but somewhat similar testimony is given by Surgeon-Major Farquhar (*Medical Times and Gazette*, July 30th, 1870); and I may add that the same opinion has been more than once expressed to me by the distinguished First Physician of Medical College Hospital, Calcutta, to whose friendly precepts I principally owe the acquirement of what little knowledge I possess on the subject.

I am, etc., C. STENNETT REDMOND,

Formerly Surgeon Peninsular and Oriental Steamship *Candia*.
Shrewsbury, August 23rd, 1870.

WEAK INTELLECTS.

SIR,—Will you be good enough to inform me, through the medium of your JOURNAL, if there is any establishment in London or elsewhere for the training of boys of weak or deficient intellect. I have a son, about 18, to whom I have given a good education; but, up to this time, he exhibits not the least capacity for business. He has a very good memory, but cannot count money; is very fond of music, and is a tolerable executant, but is totally destitute of will or determination; and cannot resist boys of half his age, but submits to anything they tell him to do. He is of very good temper, and is willing to do anything that lies in his power. I may just say, that we attribute this deficiency to an injury he received from a severe fall down the cellar-steps when about eighteen months old.

September 1870. I am, etc., J. H.

DR. M. (Edinburgh) will see by last week's number, that steps are being taken to procure some organisation of the Volunteer Medical Staff.

ENEMA APPARATUS.

SIR,—I can confirm what Dr. Robertson says, as to the convenience of the form of enema apparatus which he recommends; but it has been long in use in many of the Hydropathic establishments. As, however, economy is its chief recommendation, it ought to be put up for half-a-crown or three shillings by any tinman; using, of course, plain materials—a simple can, an elastic tube, gas cock, and ordinary enema-tube. If Dr. Robertson would attach to it a moveable tube, with a very small rose made of the finest perforated zinc, he would have one of the most powerful apparatus I know of, to treat local inflammation, ulcers of the leg, abscess about the rectum, hæmorrhoids, ophthalmia, etc.

I am, etc., JAMES MARTIN.

NOTICES of Births, Marriages, Deaths, and Appointments, intended for insertion in the JOURNAL, should arrive at the Office not later than 10 A.M. on Thursday.

X.—The letter was too personal to appear.

THE SANITARY STATE OF JERSEY.

THE notice in the JOURNAL of September 3rd, in reference to Dr. Lankester's opinion of the defective sanitary state of St. Helier, has, we regret to find, caused offence to a local paper (the *Jersey Express*), which, in an article headed "Slander and Slanderers", quotes our article, and accuses this JOURNAL of reproducing a slander of some years' standing on the sanitary state of St. Helier. The writer asserts that Dr. Lankester's estimate of the death-rate is wrong, and denies that the water-supply is scanty and defiled. As to the mortality, the following is the argument adduced to show that it is not so high as represented by Dr. Lankester.

"Very many die here of diseases contracted in other parts, who are sent to this island, *en dernier ressort*, by medical men who feel their inability to do anything more for their patients. We think we may safely set these down as one per cent., or 10 per 1,000 of those who die here, which would reduce the *real* death-rate at St. Helier to 16, and in the island generally to 12, per 1,000. To these may be added those who die of 'fast living', that is, from causes over which no sanitary arrangements, however well-devised or efficiently carried into effect, can have the slightest control; and this will have the effect of further reducing the death-rate figure by a considerable amount."

We confess that we cannot follow the arithmetical computation in the second sentence of this paragraph; and we have much difficulty in imagining that deaths from "fast living" can preponderate so greatly in Jersey over those in other places as to make a considerable disturbance of the mortality returns. The *Express* alleges that the sanitary condition of the town has been represented as bad, for the purpose of injuring the island. With this motive, we have nothing whatever to do. We assure our contemporary that we have no other desire in regard to Jersey than to see it healthy and prosperous; but, if unfavourable statements regarding the health of a place come before us on the strength of such an authority as Dr. Lankester is allowed to be, it is our duty to call attention to them, in the hope of contributing towards the bringing about amendment. If what has been said about Jersey be wrong, let it be met by facts, which shall put aside at once and for good all unfavourable statements.

DISINFECTANT AFTER SCARLET FEVER.—Mr. H. M. Morgan wishes for information as to the most effectual means of disinfecting wearing apparel, bedding, and drapery, after scarlet fever, so as to make them perfectly safe for use again. Unfortunately, he says, it is a subject of great interest in the neighbourhood of Lichfield at the present time.

UNIVERSITY OF EDINBURGH.—Mr. Spence will give a course of Operative Surgery in the summer, at 4 P.M., on Mondays, Wednesdays, and Fridays. The fee is £2:2. In the table, at page 316 of last week's number, the letter W. should be inserted after the name of Mr. Turner in the column headed "Edinburgh University"; and W. and S. after the names of the Professors of Clinical Medicine.

THE SPREAD OF SCARLET FEVER.—M.R.C.S., 1826, has not understood our meaning. We have not intended—for the present, at least—to say anything about the medicinal treatment of scarlet fever. What we want to point out, as forcibly as we may consistently with facts, is that much of the mortality of scarlet fever arises from the spread of the disease through ignorance and want of care, and might be prevented.

We are indebted to correspondents for the following periodicals, containing news reports and other matters of medical interest:—The Indian Medical Gazette, August 22nd; The New York Medical Gazette, Sept. 3rd; The Parochial Critic, Sept. 22nd; The New York Medical Record, Sept. 8th; The Boston Medical and Surgical Journal, Sept. 8th; The Madras Mail, July 11th; The Shield, Sept. 17th; The Chemists' and Druggists' Advocate, Sept. 10th; The Jersey Express; The Lancashire Guardian, Sept. 17th; etc.

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

Mr. J. Croft, London; Mr. J. W. Langmore, London; Dr. Jelly, Madrid; Dr. P. W. Latham, Cambridge; Dr. A. White, Tunbridge Wells; J. N. P.; Dr. H. W. Jackson, Egham; M. Eugène Parisot, London; Dr. M. Long, Barking Road; Dr. W. Fergus, Marlborough; Mr. T. Gilbert, Edinburgh; Dr. J. M. Bryan, Northampton; Dr. Bodington, Sutton Coldfield; Dr. J. C. Browne, Wakefield; Mr. T. R. Pearson, Stowmarket; etc.

LETTERS, ETC. (with enclosures) from:—

Dr. G. H. Philipson, Newcastle-upon-Tyne; Dr. T. Clifford Allbutt, Leeds; Dr. J. Rogers, London; Dr. C. C. Hayman, Eastbourne; Mr. W. Dixon, Morpeth; Mr. J. Fox, Bath; Mr. C. Griffith, Ilfracombe; Messrs. G. W. Fox & Co., Manchester; Mr. R. H. B. Nicholson, Hull; Dr. A. E. Sansom, London; Dr. C. Parsons, Dover; Dr. W. V. Pettigrew, Worthing; Mr. C. Steele, Clifton, Bristol; The Registrar-General of England; The Secretary of Apothecaries' Hall; The Registrar-General of Ireland; Mr. T. M. Stone, London; The Registrar of the Medical Society of London; Mr. T. Greene, Bristol; Dr. G. E. Shuttleworth, Lancaster; Dr. J. Turnbull, Liverpool; Dr. Gibson, Newcastle-upon-Tyne; Dr. S. M. Hewitt, Dublin; Dr. W. C. Arnison, Newcastle-upon-Tyne; Mr. F. J. Gant, London; Dr. J. Hughes Bennett, Edinburgh; Dr. F. J. Brown, Rochester; Mr. Miles A. Wood, Ledbury; Dr. Russell, Liverpool; etc.

BOOKS, ETC., RECEIVED.

A Sketch of the late Epidemic of Small-Pox in Bhurtpoor. By Robert Harvey, M.D. Calcutta: 1870.
The Scottish Poor-Laws. By Scotus. Edinburgh: 1870.
A Retrospect and Balance-Sheet of the Medical Reform Union. London: 1870.
An Elementary Course of Botany: Structural, Physiological, and Systematic. By Professor Henfrey, F.R.S., L.S., etc. London: 1870.
Transactions of the New York Academy of Medicine. Part ix. Vol. iii.