

mean size. Here are to be seen patients innumerable, sitting smoking or strolling about smoking the universal pipe (the question of the effect of tobacco on German intellectual development may seriously be raised); boys engaged in gambling, and groups of women gossiping; while children are pursuing games suitable to their age. The best proof of the local belief in the healthiness of their hospital is, that many authorities and teachers live within its walls—notably old Rokitansky. Within, the wards give the impression of being somewhat crowded, but are very cosy-looking, with their shaggy blankets and big stoves. There are ventilators, with indicators attached; I do not know on what principle the ventilation is conducted, but the wards are very free from hospital smell. If rigors follow us into another world, the shade of Sir James Simpson will feel very uncomfortable at many things in Vienna, and not the least at the cool way in which teachers and students pass from obstetrical operations on human forms to the obstetrical wards, after merely good wash with soap and water. The opportunities of learning obstetrics are excellent, and to those wishful to study obstetrics and gynaecology a residence here is very desirable. The student is made to examine the patient, and to give his opinion, and his reasons for it, both regarding the nature of the case and the measures to be adopted, to the professor at the bedside. Those who wish it can easily arrange to be present at the different operations at all hours, and have opportunities of personally performing many of them. A new Pathological Institute is an additional inducement to strangers, and was yesterday visited by the ubiquitous Emperor of Brazil. Here every morning, superintending the *post mortem* examinations, is to be seen the hale and active figure of the veteran Rokitansky, whose mind is as active as his body, neither apparently impaired by either years or by honours.

ASSOCIATION INTELLIGENCE.

BATH AND BRISTOL BRANCH.

THE first ordinary meeting of the Session will be held at the York House, Bath, on Thursday evening, October 26th, at seven o'clock: CROSBY LEONARD, Esq., President.

R. S. FOWLER, Bath, } Honorary Secretaries.
E. C. BOARD, Clifton, }
6, Belmont, Bath, October 1871.

CUMBERLAND AND WESTMORLAND BRANCH.

THE autumnal meeting of the above Branch will be held at the King's Arms Hotel, Wigton, on Wednesday, October 25th, at half-past twelve o'clock. The President, Dr. ELLIOT of Carlisle, will occupy the Chair.

Gentlemen intending to read papers or cases, are requested to communicate with the Secretary at their earliest convenience.

HENRY BARNES, M.D., Honorary Secretary.
Carlisle, October 3rd, 1871.

SOUTH WALES AND MONMOUTHSHIRE BRANCH: ORDINARY MEETING.

THE next Ordinary Meeting of this Branch will be held on Tuesday, November 7th, at the Town Hall, Cardiff, at 1.30 P.M. The Council will meet at 12.30 P.M.

The Dinner will take place at 5.30 P.M.; and members may introduce professional friends to the meeting and dinner.

Members intending to read papers or notes of cases are requested to communicate the titles thereof as soon as possible to one of the Honorary Secretaries.

All members who purpose joining the dinner, will oblige by communicating their intentions to one of the Honorary Secretaries before the 31st instant.

ANDREW DAVIES,
ALFRED SHEEN, M.D., } Honorary Secretaries.
October 4th, 1871.

SHROPSHIRE SCIENTIFIC BRANCH.

THE annual meeting of the members of the above Branch will be held in the Museum, Shrewsbury, on Friday, October 27th, at 2 o'clock: Dr. J. W. MOORHOUSE in the Chair.

Several papers have been promised; and some photographs and interesting preparations will be exhibited.

Gentlemen intending to contribute, are requested to communicate with the Honorary Secretary.

The dinner will take place at the Lion Hotel at 4.30. Members intending to dine or introduce friends, are requested to send in their names not later than the 24th instant.

SAMUEL WOOD, F.R.C.S., Honorary Secretary.
Shrewsbury, October 10th, 1871.

SOUTH-EASTERN BRANCH: WEST KENT DISTRICT.

THE first meeting of the fifteenth session was held at Rochester on September 26th; J. J. D. BURNS, M.D., in the Chair.

The next meeting was appointed to be held at the General Hospital, Maidstone, on November 28th; and Dr. Davies was elected Chairman.

Medico-Ethical Committee.—Dr. Frederick J. Brown was unanimously elected a member of the Medico-Ethical Committee of the West Kent District, *vice* Dr. Adam Martin, deceased. The Honorary Secretary announced the withdrawal of Henry W. Joy, Esq., from the Committee. It was resolved by the meeting to fill up the vacancy at the next meeting.

New Member.—Dr. Alfred Wiltshire, already a member of the Association, was elected a member of the South-Eastern Branch.

Communications.—1. Mr. John H. Lyddon related a case of Hepatic Abscess occupying the Right Lobe, following on Dysentery, in a man that had been in hot climates. The large intestine, cæcum, and ascending colon were thickened, but not ulcerated.

2. Mr. A. W. Nankivell related a case of Traumatic Erysipelas in which 255 grains of chloral hydrate were given by mouth and rectum within six hours.—In the discussion on this paper, Mr. Hoare of Dartford related a case in which he gave 60 grains every hour for forty-eight hours.—Dr. White mentioned a case in which five grains nightly acted as an hypnotic.

3. Mr. Nankivell also read a paper on a case of Partial Luxation of the Atlas. [Mr. Nankivell's papers are published at page 437.]

4. Dr. James V. Bell read a paper on Thermometric Observations on Fever, in Relation to Prognosis. The observations were confirmatory of the following propositions. *a.* Morning temperature persistently higher than evening—almost certainly fatal. *b.* Fluctuation of temperature (accompanied by considerable range) from day to day; such as 105 down to 98 deg.; then up to 103 deg., and down again—very grave. *c.* Sudden fall of temperature in the second or third week of enteric fever betokens one of two conditions as imminent; viz., remission or intestinal haemorrhage.

5. Dr. F. J. Brown related a case of Internal Strangulation in a man aged 66, from effusion of blood between the serous surfaces of two folds of the ileum, occurring under tortina brought on by eating old peas. Death took place in five days, with painless ileus of four days' duration. There was effusion of lymph or of serum; and the obstruction was entirely mechanical.

WEST SOMERSET BRANCH.

THE autumnal meeting of the above Branch was held at the Railway Hotel, Taunton, on Tuesday, October 3rd, at 5 P.M. There were present W. H. AXFORD, M.B., President, and eight other members.

After dinner, the Secretary read the notice convening the meeting, which had been sent to each member of the Branch, on the 3rd of Sept., and published in the JOURNAL weekly since that date. He stated that he had not been deputed to communicate to the meeting any replies from absent members.

Discussion on Carbolic Acid.—The Chairman, having shortly introduced the question as settled by the Council, viz., "Does the application of carbolic acid favour the healing of wounds?" called on each gentleman in succession to speak on it. The general opinion expressed was to the effect that no healing property existed in carbolic acid; but that, on the contrary, if applied in a concentrated form, it was very irritant and destructive. From its remarkable antiseptic properties, however, when used in a diluted form (1 to 4 or 5 or oil, and 1 to 50 or 100 of water), it exercised a very salutary influence, and was a most valuable aid in the treatment of wounds. Mr. Randolph, Mr. Winterbotham, Mr. Garland, and Mr. G. Norris cited cases in support of the opinions which they gave; and Mr. Rigden exhibited the carbolic acid gauze and other of the latest improvements in the dressings employed by Mr. Lister in his plan of antiseptic treatment. Dr. Cordwain read an elaborate reply to the question, in which he stated reasons for not agreeing with the generally received theories on the subject under discussion; and lastly, the President summed up and gave his own opinion in accordance with that expressed above.

Specimens.—Mr. Rigden exhibited an Ovarian Cyst, which, by its

rupture, had caused sudden death. The cyst was shown to be so intimately adherent to the left side of the uterus, that if an operation for removal had been attempted during life, the uterus itself must have been removed with the cyst.

A specimen of Acute Tubercular Disease was also shown by Mr. Rigden.

A paper by the President was postponed to the next meeting.

SOUTH MIDLAND BRANCH: AUTUMNAL MEETING.

THE fifteenth Autumnal Meeting of this Branch was held at the Town Hall, Wellingborough, on Tuesday, October 10th; WM. W. CLARK, M.D., President, in the chair. There were also present nineteen other members, who were handsomely entertained at luncheon at the President's house previously to the meeting.

The PRESIDENT gave an address, referring more particularly to sanitary measures now mooted and being carried out, and more particularly to the utilisation of sewage.

The question was raised, as to having honorary secretaries at Bedford and Buckingham, in addition to the present two (Dr. Bryan and Mr. Moxon of Northampton), but was negatived.

The PRESIDENT remarked that the medical profession ought to join the Association more freely than at present, as it has great influence in Parliament, as shown by the proceedings which have taken place there with regard to medical legislation.

Proposed conjoined Meeting of Branches.—It was proposed that a joint meeting of the Cambridge and Huntingdon Branch with the South Midland be held in 1871; and that the secretaries of this Branch communicate with the secretary of the Cambridge and Huntingdon Branch; and that the meeting should be the annual one of the Branches, at Peterborough, or wherever decided.

New Member.—Mr. George Lawrence of Towcester was proposed, and duly elected.

The question of dispensing with a dinner was raised; and it was decided that one shall take place as usual, but at the annual meeting only.

On the suggestion of Dr. Bryan, it was determined that the meetings should commence earlier than heretofore; viz., twelve to half-past, the dinner being not later than four P.M.

Papers.—The following papers were read.

1. The Antiseptic Treatment of Wounds; with cases. By W. Newman, M.D., Stamford. Dr. Newman, having spent most part of his fortnight's holiday this year in Mr. Lister's wards at Edinburgh, was convinced that the results outweighed all others.

2. On the Topography of Goutre. By C. E. Prior, M.D., Bedford.

CORRESPONDENCE.

SMALL-POX AND VACCINATION.

SIR,—I have always maintained that Vaccination is at least as good a preventive of Small-pox as a previous attack of the disease itself. In the following instances neither has acted prophylactically.

This morning a letter-carrier presented himself to me, who has two children, aged respectively nine and five. Not only, he assures me, were they both successfully vaccinated in infancy, but both subsequently took small-pox, and are again attacked with it at the present time.

I am, etc., WALLER LEWIS,

Medical Officer in Chief.

Medical Department, General Post Office, October 9th, 1871.

NITRITE OF AMYL AS A REMEDY FOR CHOLERA.

SIR,—It appears to me quite reasonable and right to make a fair trial of nitrite of amyl in the collapse stage of cholera, as suggested by Dr. Talfourd Jones. I must confess, however, that I am not very hopeful as to the results of the experiment, for reasons which I will endeavour to state as briefly as possible.

Experiment proves that this agent has a remarkable power of relaxing the systemic arterioles, and so causing congestion of the subcutaneous capillaries; but I am not aware of any experiments which show that it has a like influence upon the pulmonary arterioles and capillaries. It is well known that an agent which has a powerful influence upon the systemic arteries and capillaries may have no direct effect upon the pulmonary vessels, and *vice versa*.

Then, even assuming that the nitrite of amyl has the power to relax the pulmonary arterioles in the normal state, it does not follow as a matter of course that it could exert this influence when those vessels

were abnormally contracted under the influence of the cholera poison, or that the relaxing effect, if it occurred at all, would be sufficiently durable to assist the patient's recovery. These considerations, while they render it doubtful whether the remedy in question will prove to be a physiological antidote for the cholera poison, yet rather suggest than forbid a careful trial of the drug, if such trial have not already been made.

I am, etc., GEORGE JOHNSON.

Savile Row, October 1871.

THE WESTMINSTER HOSPITAL.

SIR,—As I find that an erroneous statement which appeared in your JOURNAL some weeks since, to the effect that the Westminster Hospital is about to be removed, is still being repeated, to the detriment of the hospital and school, you will oblige my colleagues and myself by kindly inserting this contradiction of the report.

I am, etc., OCTAVIUS STURGES,

Dean of the Westminster Hospital School.

Westminster Hospital, October 10th, 1871.

* * * The statement appeared first in the daily papers. We can only regret that Dr. Sturges did not address this letter to us at an earlier date.

"CONTAGION" AT UNIVERSITY COLLEGE.

SIR,—Dr. Charlton Bastian's lecture on the Nature and Mode of Origin of Epidemic and Contagious Diseases marks, as you say, "an era in medical thought." It will doubtless be discussed as fully as the position of the lecturer and the power of the lecture deserve; and it is with the desire of seeking information, not of giving it, that I make these few remarks.

I conceive that Dr. Bastian's argument may be epitomised as an argument *against* the germ-theory of disease, and *in favour of*, so to speak, the catalytic nature of disease. He first of all brings arguments against the germ-theory, and afterwards other arguments in favour of the chemico-physical theory, hitherto applied to the processes of putrefaction and fermentation. His arguments against the germ-theory are four in number.

1. Dr. Bastian first argues that, as one disease where organisms are shown to exist—viz., "malignant pustule"—tends to death, so ought all diseases due to the presence and multiplication of cells tend to a fatal termination.

2. His next argument is that, as there are about twenty different zymotic diseases, therefore the germ-theory requires twenty different kinds of germs; none of which, however, have at any time been seen.

3. The third argument which he employs against the germ-theory is, that *bacteria* flourish in carbolised lotions.

4. Dr. Bastian's last argument is, he considers, his strongest. It is to the effect that, in a disease so virulently contagious as sheep-pox, the blood does not carry the disease from one animal to another, as it would be expected to do if the disease depended on the presence of living organisms.

Without attempting to fully answer these arguments, which are doubtless strong, as they are strongly reasoned, I should be glad to make one or two brief comments upon each.

1. In regard to the first, it does not appear *prima facie* why the presence of cells other than those of the blood should tend to death, more than that they should tend to elimination. The argument would, indeed, be of precisely the same force, if it were demonstrated that in some one disease germs were eliminated, to infer that, if present, they would be eliminated in all. Further, it is by no means certain that every case of "malignant pustule" does terminate fatally. On the other hand, so far as we know, hydrophobia does invariably cause death; and yet I imagine Dr. Bastian does not see in this circumstance any evidence of the presence of germs in the blood.

2. Referring to the second argument, there is nothing more inherently improbable, so far as I can see, in the existence of twenty different living organisms of an invisible character, than there is in the existence of but one. The low forms of algae and fungi are very numerous, and yet, as a rule, breed true. Doubtless evolution has gone on here, as in the rest of the organic world; but, at the present day, persistent types exist, whether we speak of zymes or of fungi. It is no more difficult thus to conceive a cell, as yet invisible, endowed with the potentiality of typhus or scarlatina, than it is to conceive (what we know to be true) that a single sperm-cell and germ-cell contain all the morphological units of the future being.

3. That *bacteria* flourish in carbolised lotions will be new to many; and I shall look for Professor Lister's remarks on this head with great interest. In the meantime, I would observe that, far from *bacteria*

OBITUARY.

FRAZER THOMSON, M.D., PERTH.

WE announce with regret the sudden death on Tuesday afternoon, from disease of the heart, of Dr. Frazer Thomson, of Perth. He had just arrived by train from Edinburgh, and expired in the railway station. For many years Dr. Thomson acted as out-door surgeon to the Perth Infirmary, but he had resigned the office some years ago. He was engaged in an extensive practice. Benevolent, and taking an active and earnest interest in many of the philanthropic institutions of the city, Dr. Thomson gained the respect of the community.

THOMAS BUSHELL, M.R.C.S.Eng.

THE late Thomas Bushell was apprenticed nearly sixty years since to Mr. Coles, a surgeon, near Covent Garden. He was a pupil of the late Joshua Brookes, and of St. George's Hospital. Having passed the examinations at the Apothecaries' Hall and the College of Surgeons, he commenced, fifty years ago, practice at 117, Crawford Street, and continued there to the time of his death, being highly esteemed by all around. On the formation of the Royal Botanical Society in Regent's Park, he became one of its earliest members. Being much attached to botany, he was soon elected on the Garden Committee of the Society, to the welfare of which he was much devoted. He was constant in his attendance; and, on the day previous to his death, he was present at a meeting on business. Early on Thursday morning, the 5th instant, he awoke, and feeling ill, rang for assistance, but expired very shortly afterwards, in the 75th year of his age. He was buried at Highgate Cemetery.

ROBERT BUCHANAN, M.D., KNOXLAND, DUMBARTON.

THE subject of this memoir was born in Glasgow on April 13th, 1794. He was the son of Mr. William Buchanan, a much respected citizen. He received his education at the Grammar School, and completed it in the University of that city. As was once the practice with students of medicine, he served an apprenticeship to Dr. M'Dougall, a surgeon and druggist in Glasgow. In 1815, after being duly qualified, he commenced practice in Dumbarton, then a very limited field in population. He became well and favourably known not only in the town of Dumbarton, but throughout the county, and gained an extensive practice among all classes. In these times the means of transit were very limited, and many a long, exhausting, and ill-required journey he cheerfully undertook wherever and whenever his aid was sought. Many years ago, he received the appointment of Surgeon to the garrison in the Castle of Dumbarton and to the County Prison. He was the official surgeon of the local magistracy; and often at the assizes he received high commendation from the judges for the simplicity, skill, and accuracy of his reports in criminal cases often of much delicacy. He was placed on the Commission of the Peace for the county at a period when its roll was very select. He possessed a very refined taste for music and painting, and other branches of the fine arts, to which he devoted his leisure hours to the close of his life. Of a manly frame, he had the frank and easy manners of the perfect gentleman of the olden school. In all circles, his acquaintance and company were eagerly sought and much appreciated. In 1829, he married Mary, the second daughter of Mr. John Dixon, of Levingrove; she survives him with two daughters, one married and resident in England. Some years ago, on his completing his fiftieth year of practice, his medical brethren of the locality, as well as from a distance, presented him with an address at a public dinner. A year before his decease he had a severe attack of illness; but this gradually abated, and his friends were hopeful that he had recovered. In the latter end of the summer of the present year, his malady returned in an aggravated form; and, after much suffering, he died on September 10th, and was interred in the new cemetery of Dumbarton on the 15th. A numerous company followed the body. A party of the Royal Artillery showed their respect to his memory by carrying the coffin from the gate of the cemetery to the tomb. In passing to the cemetery, the shops were shut and the streets of Dumbarton were crowded by the inhabitants. In politics, Dr. Buchanan was a decided and consistent Tory, and a staunch member of the national church; but he never obtruded on others his opinions either political or ecclesiastical, and was ever as ready to allow liberty of judgment and free expression of sentiment to others as he claimed for himself.

MEDICAL NEWS.

APOTHECARIES' HALL.—The following gentlemen passed their examination in the science and practice of medicine, and received their certificates to practise, on Thursday, October 5th, 1871.

Addy, Boughton, Southport, Lancashire
Bradbury, John Batley, Leeds
Marshall, John, Bolney, Suffolk
Slater, John Samuel, Bath
Vores, William Mallam, Great Yarmouth

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

Clyma, Handsford Hosking, Guy's Hospital
Welch, Samuel, London Hospital

MEDICAL VACANCIES.

THE following vacancies are announced:—

ABERDEEN ROYAL LUNATIC ASYLUM—Assistant Medical Officer.
ARDWICK AND ANCOATS DISPENSARY, Manchester—Junior Surgeon.
ATCHAM UNION, Salop—Medical Officer for the St. Mary's District.
BALTINGLASS UNION, co. Wicklow—Medical Officer for the Kiltegan Dispensary District.
CAVAN UNION—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Ballyhaise Dispensary District.
CHARING CROSS HOSPITAL—Assistant Physician.
CORNWALL LUNATIC ASYLUM, Bodmin—Assistant Medical Officer.
GOVERNMENT DIOCESAN TRAINING COLLEGE FOR GOVERNSESSES, Derby—Surgeon.
DEVON COUNTY LUNATIC ASYLUM—Assistant Medical Officer.
ENNIS UNION, co. Clare—Medical Officer for the Newmarket-on-Fergus Dispensary District.
GENERAL HOSPITAL, Nottingham—Resident Surgeon Apothecary; Assistant House-Surgeon.
GORT UNION, co. Galway—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Ardrahan Dispensary District.
GREAT NORTHERN HOSPITAL—House-Surgeon.
GUEST HOSPITAL, Dudley—Resident Medical Officer.
INFIRMARY FOR CONSUMPTION AND DISEASES OF THE CHEST, Margaret Street, Cavendish Square—Visiting Physician.
LAMBETH, Parish of St. Mary—Medical Officer of Health.
LIVERPOOL NORTHERN HOSPITAL—House-Surgeon.
MALE LOCK HOSPITAL—Resident House-Surgeon.
MARLBOROUGH UNION, Wilts—Medical Officer for District No. 2.
OMAGH UNION, co. Tyrone—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Eastern Division of the Omagh Dispensary District.
PEMBROKE UNION—Medical Officer for District No. 5.
POCKLINGTON UNION, Yorkshire—Medical Officer and Public Vaccinator for the Pocklington No. 2 District and the Workhouse.
PRESTON AND COUNTY OF LANCASTER ROYAL INFIRMARY—Two House-Surgeons.
RATHDOWN UNION, co. Dublin—Medical Officer for the Killiney Dispensary District.
ROMFORD UNION, Essex—Medical Officer for District No. 7.
ROYAL HOSPITAL FOR DISEASES OF THE CHEST, City Road—Surgeon.
ROYAL SURREY COUNTY HOSPITAL, Guildford—House-Surgeon.
ST. GEORGE DISPENSARY, Mount Street, Grosvenor Square—Physician-Accoucheur.
SHEFFIELD PUBLIC HOSPITAL AND DISPENSARY—Assistant House-Surgeon.
TIVERTON UNION, Devon—Medical Officer for the Silverton District.
WARMINSTER UNION, Wilts—Medical Officers and Public Vaccinators for the Corseley and Warmminster Districts and the Workhouse.
WARNEFORD HOSPITAL, Leamington—Medical Officer.
WEYMOUTH UNION, Dorset—Medical Officer and Public Vaccinator for the Melcombe Regis District.
YORK COUNTY HOSPITAL—House-Surgeon,

MEDICAL APPOINTMENTS.

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

CARRE, Fenwick, L. K. Q. C. P. Irel., appointed Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Bellaghay Dispensary District of the Magherafelt Union, co. Londonderry.

KISBY, Wm. J., L. F. P. S. Glasg., L. A. H. Dub., appointed Apothecary to the Workhouse and the Gort Dispensary of the Gort Union, co. Galway.

*TAIT, Lawson, Esq., appointed Surgeon to the Birmingham Lying-in Charity.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths, is 3s. 6d., which should be forwarded in stamps with the communication.

BIRTHS.

DAY.—On September 1st, the wife of *W. Henry Day, L. R. C. P. Ed.. Chapel Street, Pentonville, of a son.

MAPOTHER.—On October 11th, at Merrion Square North, Dublin, the wife of *E. D. Mapother, M.D., of a daughter.

DEATHS.

GREAVES, Augustus G., Esq., Surgeon, at Derby, aged 59, on October 1st.
YOUNG, Andrew Kerr, M.D., late of Glasgow, at Southend, Essex, aged 69, on October 1st.

OPERATION DAYS AT THE HOSPITALS.

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

FRIDAY Royal Westminster Ophthalmic, 1.30 P.M.—Royal London Ophthalmic, 11 A.M.—Central London Ophthalmic, 2 P.M.—Royal South London Ophthalmic Hospital, 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, 2 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.—Royal Westminster Ophthalmic, 1.30 P.M.

MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

MONDAY.—Medical Society of London, 8 P.M. Casual Communications. Mr. John Gay, "On Crural Venosity"; Dr. Richardson, "Preliminary Notes of a Research as to the possibility of Destroying Animals intended for Human Consumption without the infliction of Pain."

TUESDAY.—Pathological Society of London, 8 P.M.

THURSDAY.—Harveian Society of London, 8 P.M. Clinical Communications.

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 halfpenny 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.

MR. W. BOURNE (Ambleside).—The Swiss condensed milk is a sufficient substitute for fresh milk (when the latter is not procurable) for hand-fed infants. It is made from cow's milk, and its price is rather below that of fresh milk in great towns.

THE TESTIMONIAL TO SIR JAMES PAGET.

SIR.—I have just read "A Charitable Proposition" of H. F. S. referring to the above-mentioned testimonial, in which he advocates its being thrown open to the whole of the profession, instead of being limited to those who have been connected with St. Bartholomew's. I do hope this suggestion may not be carried into effect; at any rate, not till it has been submitted to the approval of all those who, like myself, have already subscribed to the testimonial, on the understanding of its having a special connection with the hospital.

I am quite ready to agree with H. F. S. that Sir James Paget belongs to the "scientific world, both here and abroad", as well as to the "profession at large"; and if H. F. S. will only take the necessary steps to start the matter, I have no doubt he would have no difficulty in getting up a handsome testimonial from the whole of the profession; but I trust he will not think me selfish in expressing a hope that we may keep ours to ourselves.

As an old student of St. Bartholomew's, and a resident in the College there during part of the time that Sir James was Warden, I think he belongs more especially to us; and I do believe that there is a special corner in his heart, and a large one too, for dear old St. Bart's, and every one connected with it; and that a testimonial from the old students would, for this reason, give him especial pleasure.

I have written this entirely on my own responsibility, and without having been able to communicate with any one on the subject. Your columns will show whether I represent the views of the old students, or not; I feel sure I have not mistaken the feelings of Sir James Paget.

October 9th, 1871.

FOREIGN DEGREES.

SIR.—In reply to your correspondent "Physician", I would tell him not to expect to get the Brussels degree easily. He will have to undergo an examination very like that for the License of the Royal College of Physicians of London, embracing all subjects of medical study, and extending over a week. Besides, he will be questioned at the bedside, and have to do operations on the dead body; and then, if he be not well up, he is plucked. In fact, one has to know and do a great deal more for the Brussels M.D. than many of our seniors who obtained their Scotch degrees on much more reasonable terms, and when they were just as useless in England as the Continental ones are now. It is, indeed, high time that some British University should do the right thing and admit qualified men, without the bugbear of residence, to the examination for its degrees. The rising generation of medical men will never be satisfied till this is done.

I am, etc.,

ANOTHER PHYSICIAN.

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.

LUNACY CERTIFICATES IN IRELAND.

SIR.—Would you or some of your numerous correspondents kindly inform me if the Bill introduced by Sir Dominic Corrigan last Session, by which Irish Poor Law Medical Officers are entitled to a fee of two guineas for examining and certifying in cases of lunacy at the request of the local authorities, has yet become law; and if so, how is the fee to be obtained?

I am, etc., A MEMBER.

* * The Bill was withdrawn, and will be reintroduced.

POOR-LAW MEDICAL OFFICERS AND THE SANITARY SERVICE.

SIR.—I entirely agree with Dr. Gourley and with the recommendations of the Royal Sanitary Commission, that the medical officers should be the local sanitary officers for their district. Not only would the appointment improve their usefulness, influence, and position; but, whatever be the future sanitary organisation of the country, the district medical officer is far the most likely to foresee the propriety or necessity of sanitary alteration or improvement; he alone can carry them out promptly; and, in crushing out the origin of a contagious epidemic, for instance, promptitude is of the last importance. An officer for a large district, as a county, could not carry out sanitation with sufficient promptitude.

I have always thought it a great pity also that the Poor-law medical officers who are public vaccinators should not be registrars of death also for their district. Such an arrangement would secure the proper vaccination of infants, without the inconvenience which is now often experienced.

I am, etc., October, 1871. POOR-LAW MEDICAL OFFICER.

MEDICAL WOMEN.

SIR.—Presuming that you will give fair play to this discussion, I ask you to publish the following reply to the editorial comments which are annexed to my letter at page 396.

i. I have not surrendered any point for which I have ever contended. To make clear my own position, I cite the following extracts from an address delivered by me at the Hanover Square Rooms, in October 1866:—

"The teaching operations recently commenced by the Female Medical Society have been described as 'an attempt to revive the old midwives'—a description as false as to say that the Royal College of Surgeons was designed to revive barber surgery. The Female Medical Society, without setting any limits to the medical education of women, or to the future extension of the college it has recently commenced—without in any way obstructing, or even refusing to co-operate with, those who wish to agitate for the admission of women to University degrees, and to the general practice of medicine and surgery, precisely as now followed by men—has organised its present rudimentary teaching operations for the purpose of meeting a great and pressing social want, and of superseding what of the 'old midwife institution' has not necessarily perished, in presence of the educational advantages which have long been monopolised by men. It is now working to induct educated intelligent women into a full knowledge of modern obstetric science and the accessory branches of medicine; and, while attempting to do for female midwifery what the now wealthy and powerful corporation of the Royal College of Surgeons has done for barber surgery, and thus to raise women to a level in midwifery with medical men, it will rest for the present on the assurance that, if a good and true basis be laid down, the requirements of society will bring about a natural development of the plan. ... Supposing a separate and *complete* medical school accessible, woman—in order to make herself passably acquainted with the whole circle of medical science, and to obtain the status of a general medical practitioner—must devote a term of five years to study, in displacement of many pursuits which, by common consent, are considered to be more appropriate for her probable future. She must expend a sum of at least £500 in supporting herself during that time, and in payment of professional fees; and, when legally qualified—unless accidental notoriety or personal genius enable her to outstrip average men—she must be prepared to devote a second five years to converting general information into practical knowledge, and to acquiring skill in her profession and confidence from the public; then, and then only, does a really professional education begin to return a profit upon its cost. In fact, nothing is clearer, to those who know the bearings of this question, than that general medical practice is the work of a lifetime, and that its responsibilities are not a something to be set down and taken up again at convenience. ... But, beyond the organisation of a separate medical college, *in conformity with the regulations of the Apothecaries' Company*, there is nothing to obstruct women from entering fully into the profession, and undertaking all cases which are now treated by men. Many exaggerated statements have recently been floated upon the organs of the general press, and the passing of the examination for an apothecary has been represented as a prodigious feat. ... Practically, there is nothing in that examination which may not be passed by any fairly educated person of ordinary capacity."

The objects which I have advocated are strictly practical ones. They are—
1. To supersede the present ignorant midwives by skilled obstetricians. 2. To add to the employments now open to the women who turn governesses. 3. To do away with the unjust exclusion by which women are now prevented from practising medicine—an exclusion totally uncalled for, and which violates the broad principles of free trade and personal liberty, while it imposes a disability and injustice upon the weaker sex. How far, when this exclusion is done away with, women may avail themselves of their liberty, is another question, and one which they should settle for themselves.

2. That the present exclusion is supported by an *animus* on the part of the medical men is, I think, shown by the whole current of affairs. Take the tenor of your own editorial in the JOURNAL of March 9th, 1867. There—referring to the action of the Apothecaries' Company—you remark approvingly:—"This amounts, as it is avowedly intended, to an exclusion of female candidates from the only diploma hitherto open to them." As the JOURNAL informs us that you interpret the sentiments of "more than four thousand medical men, the *élite* of the profession", your *dictum* must be conclusive. Last Saturday, also, you pounce upon our skeleton prospectus for a course on obstetrics and its accessories, and you tear it to pieces, as if we were clamouring for its recognition as a full medical school. Then, after demonstrating the non-existence of that which had never been asserted, you say—"The colleges cannot be blamed for not recognising what does not exist."

3. You ask as to the number of lectures. The obstetric course by Dr. Murphy comprises seventy-five lectures, and is equal to that given by him at University College. The supplementary course—of three sections—comprises forty-eight lectures; and the extra courses on chemistry, *materia medica*, diseases of women,

and diseases of infants, each comprise twelve lectures. There is also the following general provision, which you must have overlooked:—

"The minimum curriculum recommended for ladies intending to practise midwifery comprises:—1. Attendance during two winter sessions upon all the obstetrical and supplementary courses of lectures. 2. Attendance during the intervening summer upon clinical practice at a lying-in hospital or maternity charity, with personal attendance upon at least twenty-five deliveries, under the superintendence of an adequately qualified midwife or registered medical practitioner.

"Additional classes will be formed at the request of twelve students."

4. As to what ladies should do: if they will only take to heart the last sixteen lines of your article "*Minerva medica*", they will adopt what I have continuously urged. But, unfortunately, certain ladies, holding what are called "advanced views", have joined in depreciating the obstetrical work of the Female Medical Society, simply because it did not put upon paper a big, hollow scheme like that for the Women's College at Hitchin, which has now failed so disastrously.

4, Fitzroy Square, W., October 2nd, 1871. I am, etc., JAMES EDMUNDS.

. Dr. Edmunds has a singular mode of expressing himself; but we shall not quarrel with his form of speech. We shall only reply briefly:

1. That we do not approve of the exclusion of women from examination for medical or any other degrees, when they have gone through the required curricula of study, and are able to satisfy the same intellectual tests as men. We do strongly disapprove of mixed classes of the two sexes for medical instruction.

2. That we did not "pounce upon" the prospectus of the "Female Medical Society", but that it was forwarded to us by Dr. Edmunds, who expressly challenged our opinion of it. Our candid opinion is, that it describes a farcically incomplete course of education, dangerously delusive in essence, in title, and in method; that the treatment of the diseases of women and children requires the same amount of medical education as the treatment of the diseases of men; and that for this purpose, the sort of education described in the prospectus is rather worse than nothing, and more dangerous than can easily and shortly be stated.

3. We cannot approve of the use made of the name of an aged gentleman, once a professor at a medical school, but who has fallen in the battle of life, and for whom a collection, to enable him to end his days in peace, has now for some months been actively and publicly made among the charitable members of the profession and through the columns of the medical journals.

4. We look upon the Female Medical Society, judged by its own prospectus, as the greatest obstacle which has yet been raised to the true interests of female medical education; and, however good may be Dr. Edmunds's intentions, we hold him to be in effect the worst enemy of the cause which he comes forward to champion.

THE TREATMENT OF CHOLERA.

SIR.—Having read with interest accounts of treatment in cholera in your JOURNAL lately, I think the following case may be of interest. Hearing, while at a midwifery case, that a man had been seized with sickness and purging, and cramps in his limbs and body, I sent a dose of chlorodyne, which I always carry with me at this time of year; and, as I returned home, called to see how he was. The purging still continued, though not so severely, and the sickness was rather better, but the cramps continued, and were very distressing. I left another dose of chlorodyne, and gave directions to let me know if he were no better in the morning. I then sent a mixture of carbonate of soda, with small doses of hydrocyanic acid, and ordered his body to be fomented, and rice and milk to be given as food, and toast-water *ad libitum*. The following day, he appeared something better, as, the cramps having quite left, he was free from all pain, the motions being reduced to a thin watery discharge, that ran from him as he lay; it was colourless, but of a very offensive odour. His tongue was warm, but the pulse fluttering and scarcely perceptible. He was ordered brandy in the rice-milk. The next that I heard of him was, that he was dead, after about fifty-six hours' illness. It appeared that, some weeks previously, he had been employed to empty a well into which sewage had for some time found its way; that, when opened, the stench from it was particularly offensive, causing, at the time, sickness to one of the bystanders, and subsequent ill effects to others present. The case was undoubtedly one of blood-poisoning from local cause; so I returned it as choleraic diarrhoea. I was very sorry afterwards that I had not given a dose of castor oil, which I was as near as possible doing when the discharges became offensive. The reason of my writing this is to further endorse the eliminative treatment in cholera as a blood-poison; it may be instructive in a negative point of view. In ninety-nine cases out of a hundred, I find small doses of tincture of opium, chalk mixture, or chlorodyne and mint water efficacious in the sickness and purging so common at this time of year.

Beeston, Notts, 28th September, 1871. I am, etc., JOHN ORTON.

HOSPITAL TENTS FOR EPIDEMIC DISEASE.

SIR.—I am glad to see your suggestion that it would be wise to pitch a hospital tent near Bridgewater, if a small-pox hospital be needed before a permanent structure is provided. It is an excellent suggestion, and might be wisely adopted to a larger extent than you propose, and at other places. A friend, who was engaged with the American ambulance corps during the siege of Paris by the Germans, informs me that their hospital-tent was at once well ventilated, sufficiently light, without glare, and comfortably warm. It consisted of thin double canvas; the air imposed, being almost motionless, greatly obstructed the passage of heat, except what was necessarily lost by a free but gentle passage of air through the canvas, and by its ventilating openings. The tent had no windows, and needed none, as the thin canvas allowed a gentle light to pass. Another tent with windows was used for operations. The tent was warmed by a stove, with long piping passing in a sort of channel in the ground underneath its floor. This mode of warming, and the double canvas for retaining the heat, seem to be the only important peculiarities, but they are important; as, when air is not chilled by contact with cold walls or windows, that which has been warmed by respiration or contact with the skin is not cooled and made to descend so as to be breathed again, but is at once carried away by the ventilating openings, and its place supplied by fresh and pure air warmed from below; moreover, by warming from below, the floor was always, as it ought to be, the warmest part of the room; while, the stove, and flues not being near anything inflammable, the danger of setting the hospital-tent on fire was avoided, a subject of great anxiety when those unable to move are in a tent with an ordinary stove. Moreover, the economy of fuel is often a matter of great consequence, as, indeed, it was in Paris.

Such hospital-tents would be invaluable for all cases where an unusual amount of hospital accommodation is needed for a short time only, as they can be quickly and cheaply erected wherever required, easily removed when wanted elsewhere, and easily disinfected after having received cases of infectious disease; for example, by soaking the canvas in chloride of zinc solution, by which, also, it would be rendered uninflammable.

I am, etc., P. H. H.

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

OFFICIAL OBSTRUCTIVENESS TO VACCINATION.

SIR.—At a juncture when small-pox has been raging from John O'Groats to Land's End, that any arbitrary regulations as to the periods of vaccination and in distinct contravention of the Act should be enforced by the Inspectors of Vaccination, seems inexplicably contradictory.

Allow me to instance my meaning by informing you that last spring one of the Inspectors made his periodical visit and inspection in my district, and, having satisfied himself, informed me that the Board of Guardians would make a new contract for the performance of vaccination, which at midsummer they accordingly did with me, and with the other medical officers of the union. The terms of the contract were that all patients were to be brought to my surgery to be vaccinated, only during the months of April and October in each year; thus at once violating that clause of the Act which expressly directs that children are to be "vaccinated within three months of the date of birth." A child born at the beginning of May would be five months old by the end of September. Now, in country districts it is found most convenient to vaccinate when a few cases present themselves, so as never to have any over three months unvaccinated.

I have always satisfactorily performed vaccination from arm to arm after having first procured well-charged points, which I generally have done for many years from the establishment in Russell Place, Fitzroy Square. Two preceding Inspectors had awarded me the extra gratuity from the Privy Council for successful vaccination.

As to making it compulsory for children to be brought to the surgery in all cases, this is almost impracticable, as parents cannot at all times leave their homes; the weather may be too inclement sometimes, especially at these months. Under these circumstances, to prevent trouble and delay, I contrive, as often as possible, to have a child vaccinated near where others require to be done, so that they may more easily be brought together; and have in some cases carried recent lymph, not quite dry, in a bottle.

I feel sure that, if mischievous impediments be thrown in the way, it will increase the difficulties with which medical men already have to contend, as well as perpetuate the scourge which we are endeavouring to stamp out.

October 1871. I am, etc., A MEMBER.

Dr. B. W. FOSTER is thanked for his courteous letter.

GRATUITIES TO VACCINATORS.

SIR.—From time to time, we see notices in the papers of bonuses or extra grants to public vaccinators. Now, I have been for some years a vaccinator in a small way under the Poor-law Board, but have not had the good luck to see a penny of any bonus. I am just now entering on a fresh contract with the guardians, and have been supplied with the modern form of register-book; so I hope that, under the new *régime*, I may come in for what I have only yet heard of. Will you kindly inform me, through the medium of our JOURNAL, what I must do to gain the desired end?

I am, etc., ASSOCIATE.

. Observe strictly the rules of the department, and vaccinate carefully and successfully.

We are indebted to correspondents for the following periodicals, containing news, reports, and other matters of medical interest:—The Altringham and Bowden Guardian, Oct. 7th; The Philadelphia Evening Bulletin, Sept. 15th; The Wolverhampton Chronicle, Oct. 11th; etc.

COMMUNICATIONS, LETTERS, ETC., RECEIVED FROM:—

Dr. T. E. Beatty, Dublin; Mr. John Wood, London; Mr. Joseph Lister, Edinburgh; Dr. C. J. Gibb, Newcastle-upon-Tyne; Dr. W. Royds, Reading; The Secretaries of the Harveian Society; Mr. W. H. H. Crossman, London; An Associate; Mr. James Haughton, Dublin; Mr. W. Whitehead, Manchester; Our Dublin Correspondent; Mr. A. W. Nankivell, Rochester; Mr. T. O. Wood, Newcastle-upon-Tyne; Dr. G. M. Brumwell, Mossley, Manchester; Dr. W. B. Cheadle, London; Dr. Tilt, London; H. H. P.; A Member; Our Manchester Correspondent; Mr. Richard Hare, Weymouth; Dr. Tibbits, London; Mr. J. Hancock, Wathen, Fishguard; Mr. W. Miller, London; The Secretaries of the Pathological Society; Dr. James Hardie, Manchester; Dr. Waller Lewis, London; Dr. F. M. Pierce, Fallowfield, Manchester; Dr. R. W. Crighton, Tavistock; Dr. A. Ernest Sansom, London; Mr. E. Newton Greaves, Derby; Dr. Octavius Sturges, London; Mr. George Terry, Mells, Frome; Dr. W. M. Kelly, Taunton; 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; Dr. Edmunds, London; M.R.C.S. Eng.; Mr. W. H. Day, London; G. T.; Mr. W. Bourne, Ambleside; Mr. Samuel Wood, Shrewsbury; Our Vienna Correspondent; Mr. Furneaux Jordan, Birmingham; Dr. Dobell, London; Mr. T. H. Bartleet, Birmingham; Dr. Bryan, Northampton; Mr. C. L. Todd, London; Mr. Reginald Harrison, Liverpool; Mr. Morrall Baker, London; Mr. R. G. Whitfield, London; Mr. Arthur Jackson, Sheffield; Dr. R. Bentley, London; Mr. H. Brown, London; Dr. Burder, Bristol; Mr. Charles James Fox, London; Dr. Cayle, London; Mr. Greenway, Plymouth; Mr. H. M. Morgan, Lichfield; Dr. B. W. Foster, Birmingham; Mr. C. J. Evans, Northampton; Dr. Aitkin, Carlsbad; Mr. S. M. Bradley, Manchester; Dr. T. H. Green, London; Mr. R. Cory, London; etc.

BOOKS, ETC., RECEIVED.

The Thirteenth Annual Report of the Herefordshire Medical Association, 1871. Address to the Cardiff Chamber of Commerce on the Present Aspect of Commercial Affairs. By John Morgan, President. Second Edition. Cardiff: 1869.

Fistula, Hæmorrhoids, Painful Ulcer, Stricture, Prolapsus, and other Diseases of the Rectum: their Diagnosis and Treatment. By William Allingham. London: 1871.

The Micrographic Dictionary. Parts I and II. London: 1871.