

Brompton Hospital, a variety of drugs were tried with little effect. Chloroform inhalation gave some relief, but caused cardiac intermission. Hypodermic injection of morphia did good, but her increasing lividity precluded its continuance. Chloral was then given in twenty-grain doses, and the first dose induced slumber and easy respiration. The drug was continued in smaller doses for upwards of two months, during which time the attacks seldom recurred, and, when they did so, were extremely mild. Once the chloral was omitted, and the asthma immediately returned, but ceased on resuming it.—All the cases were complicated by catarrhal symptoms, and in the third case there was considerable emphysema, which diminished during the patient's stay in the hospital. Biermer, of Zurich, had already used chloral extensively in these cases. Dr. Theodore Williams's own experience, founded on upwards of twenty cases, was decidedly favourable to its use in spasmodic asthma. In only two cases had any bad symptoms arisen.—Dr. SOUTHEY said that the patient who had been under his care was of a markedly hysterical temperament, and any little occurrence in the ward brought on an attack of asthma. In one bad attack he gave her nitrite of amy, which seemed to benefit her; but he was not too sure about its efficacy, and it was not a remedy to leave in unskilled hands. In such cases he thought stimulants did most good; and chloral, he thought, would be found most beneficial when the disease was most purely neurotic.—Dr. A. P. STEWART said that chloral seemed to have a decided effect in these cases, but in many he thought it risky and uncertain. In some instances it did well for a time, and then, for no reason at all apparently, it began to disagree, and its use was followed by extreme depression of the circulation to a most alarming extent. In others the same happened after long use. In many cases, no doubt, it was very good; but he would be strongly disinclined to order it several times a day. Often it gave rise to severe itching, so as to destroy rest, as well as to severe irritation about the eyes. He thought bromide of ammonium in large doses better in every way.—Mr. NUNN had seen some cases of asthma, almost like suffocative attacks, produced by food—in one patient by rice.—Dr. WILLIAMS did not think chloral a stimulant; and in one case stimulants properly so called had been given largely before the chloral. He had seen no mischief arise from its use. The cases he thought mainly due to damp.

Chronic Bright's Disease in a Syphilitic Patient.—Dr. SOUTHEY read the account of a case of chronic Bright's disease in a young man, aged 21, the subject of syphilis. The patient had had scarlet fever when a child, and had suffered with dysentery several years previously. The first symptom which led to his admission into St. Bartholomew's Hospital was erysipelatous inflammation of the left ankle, following a trivial injury. His urine was loaded with albumen, but was always excessive in quantity; its daily average was fifty ounces, but on many days more than seventy ounces were passed. His temperature was invariably at or above normal, and he presented very trivial anasarca during his illness. Generally his appetite was good, but, at times, he suffered in the morning, sickness, and had severe colicky pains. Among the anomalous symptoms noted were the following: bright red patches of erythema came out on different portions of his body, sometimes on the face, at others on the trunk and limbs; they were attended by febrile symptoms, and coppery-coloured stains marked their situation for a while. Their disappearance was usually attended with the most profuse perspirations, or critical sweats. These rashes, as well as transient mottlings of the arms and legs, and sudden transitory attacks of acute pain in the calves, loins, and back, were attributed, by Dr. Southey, to the syphilitic poisoning, of which there was further confirmatory evidence in amygdaloid cervical glands, and scars of old buboes in both groins. After being two months under observation, during all which time the microscopical characters of the sediment of his urine varied very little, fatty and granular casts of varying size being always present, although never in large quantity, he was suddenly seized with rigors of a most severe kind. His temperature rose to 103.2; he complained of general pains in different parts of his body, and especially of headache, localised behind his ears. This was followed by profuse sweating, which afforded some relief. For three successive days these ague-like attacks were repeated. The abdomen then became tympanitic and tender, and acute peritonitis supervened, to which he succumbed after a few days; his temperature gradually rising up to 106, which it reached twelve hours before death. At this high temperature he passed into an insensible state, with protruded eyeballs, dilated pupils, and stertorous breathing; but, up to this period, his intellectual faculties had never been clouded, and he never exhibited any epileptic convulsions. The necropsy revealed old as well as recent peritonitis, large and soft liver and spleen, large pale fatty kidneys, the pair together weighing seventeen and a half ounces. All the viscera were examined by iodine, but did not furnish any amyloid reaction.—Dr. SILVER asked if the kidneys had been tested, as in almost every respect the

case was a typical one of amyloid kidney. Such forms of disease usually occurred after syphilis. The quantity of water passed was very large, the amount of albumen considerable, and the specific gravity was also often considerable; whilst there was no dropsy, and little tendency to uræmia.—Dr. WILLIAMS asked what was the nature of the liver and kidney changes.—The PRESIDENT said it was not very common to have constitutional symptoms with scars in the groins. Were there no enlarged glands? He now had a case under his care where there were two kinds of sores and two kinds of glandular enlargement: he had also seen a similar case previously. Scars did not, as a rule, indicate the existence of syphilis.—Dr. SOUTHEY said the liver was large and granular. The kidney had all the marks of intertubular change. He thought the case differed from amyloid kidney in the quantity of albumen and specific gravity of the urine passed.

ASSOCIATION INTELLIGENCE.

SOUTH-EASTERN BRANCH: WEST KENT DISTRICT.

THE first meeting of the Seventeenth Session, 1873-74, is appointed to be held at St. Bartholomew's Hospital, Rochester, on Wednesday, October 29th, at 4 P.M.; Dr. JAMES V. BELL in the Chair.

Papers have been promised by John M. Burton, Esq., Dr. Monckton, and the Chairman.

Dinner will be provided at the King's Head Inn, Rochester, at 6 P.M. Mr. Simon of St. Thomas's will dine with the members of the District.

FREDERICK JAMES BROWN, M.D., *Honorary Secretary.*
Rochester, October 13th, 1873.

CUMBERLAND AND WESTMORLAND BRANCH.

THE autumnal meeting of the above Branch will be held at Penrith, on Wednesday, the 29th October. The President, Dr. TIFFIN of Wigton, will take the chair.

Gentlemen intending to read papers are requested to give immediate notice to the Secretary,
HENRY BARNES, M.D.
Carlisle, October 1st, 1873.

BATH AND BRISTOL BRANCH.

THE first ordinary meeting of the session will be held at the York House, Bath, on Thursday evening, October 30th, at 7 o'clock P.M.; E. LONG FOX, M.D., President.

R. S. FOWLER, } *Honorary Secretaries.*
E. C. BOARD, }

Bath, October 1873.

ABERDEEN, BANFF, AND KINCARDINE BRANCH.

A MEETING will be held in the Music Hall Buildings, Aberdeen, on Wednesday, November 5th, 1873.

Papers have been promised by Drs. Greig, A. D. Davidson, Dyce Brown, etc.; and a proposal to alter the laws of the Branch so as to have a boundary mutually advantageous to it and the Northern Counties Branch, will be brought forward.

ALEXANDER OGSTON, *Secretary.*
Aberdeen, October 20th, 1873.

WEST SOMERSET BRANCH.

THE autumnal meeting of this Branch will be held at the Squirrel Hotel, Wellington, on Friday, November 7th, at 5 P.M.

The following question has been settled by the Council as the one on which each member should be asked to express his opinion at the said meeting after dinner:—"Is Club Practice conducive to the interest and welfare of the Profession?"

Gentlemen who intend to be present at dinner, or who may have communications for the meeting, are requested to send notice thereof to the Secretary.
W. M. KELLY, M.D., *Honorary Secretary.*

Taunton, October 15th, 1873.

SOUTH-EASTERN BRANCH: EAST KENT DISTRICT MEETINGS.

THE next meeting will be held at the Fountain Hotel, Canterbury, on Thursday, November 6th, at 3 o'clock P.M.; Mr. H. G. Sadler in the Chair.

Dinner at 5 o'clock precisely. Charge 5s., exclusive of wine.

The following papers have been promised. 1. Dr. Kersey : Case of Irregular and Deficient Development in a New-born Infant.—2. Mr. Bowes : Case of Cardiac Disease.—3. Dr. Robinson : Some Remarks on the Carriers of the Contagium of Enteric Fever.—4. Mr. Clement Walter : Case of Ligature of the External Iliac.—5. Mr. Rigden : On the advantage of the Obstetric Forceps in some cases in which they are not considered absolutely necessary.

Gentlemen who intend to be present at the dinner are particularly requested to inform me on or before Tuesday, the 4th inst.

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

2, St. James Street, Dover, October 21st, 1873.

PROCEEDINGS OF THE COMMITTEE OF COUNCIL.

AT a meeting of the Committee of Council held at the Queen's Hotel, Birmingham, on Friday, the 17th instant—present, Mr. G. Southam (President of the Council), in the Chair; Dr. Falconer (Treasurer); Mr. Baker; Mr. Board; Mr. Bartleet; Dr. Bryan; Dr. Carpenter (Croydon); Mr. Andrew Davies; Dr. Foster; Dr. Fox; Mr. Harrison; Mr. Husband; Mr. Humphreys; Mr. R. H. B. Nicholson; Dr. Rumsey; Dr. Sibson, F.R.S.; Dr. Steele; Dr. Stewart; Dr. Underhill; Dr. Waters (Chester); Mr. Wheelhouse; Dr. Eason Wilkinson; Dr. Wade; Mr. Wood.

The minutes of the last meeting were read and confirmed.

Read minutes of the JOURNAL and Finance Committee.

Resolved—That the minutes of the JOURNAL and Finance Committee be approved and carried into effect.

The following recommendations of the JOURNAL and Finance Committee were also ordered to be carried into effect.

"That the General Secretary be instructed to furnish to each quarterly meeting of the Finance Committee a statement showing the amount of subscriptions due, and the amounts forwarded from the members of the Association; and also the number of members, and the amounts due and paid in each Branch.

"That it be recommended to the Committee of Council to request the Finance Committee to consider whether the Association is likely to be in a position to make special grants for the prosecution of original research in medical science, and, if so, what amount, and report thereon to the Committee of Council before the next annual meeting."

Resolved—That the Annual Meeting of 1874 be held on the 11th, 12th, 13th, and 14th days of August next.

Resolved—That the Arrangement Committee consist of the following gentlemen:—The President; the President-elect; the President of the Council; the Treasurer; Dr. Chadwick; Dr. Sibson; Dr. Stewart; Dr. Bateman; Mr. Cadge; and the three Local Secretaries, Dr. J. B. Pitt, Mr. Robinson, and Dr. Beverley.

The General Secretary reported that a resolution was passed at the last annual meeting, of which the following is a copy; viz:

"That the Committee of Council be requested to draw up a complete code of laws and bye-laws for the government of the Association, based on the existing laws, with such suggested alterations and additions as may appear desirable, and to submit the same for consideration to the next general annual meeting of the Association."

Resolved—That a Subcommittee be appointed, to consist of the following gentlemen, to consider and report upon the laws, in accordance with the foregoing resolution, to the Committee of Council at their earliest convenience; viz., The President of Council, Dr. Falconer, Mr. Husband, Mr. Wheelhouse, Mr. Nicholson, and Dr. Steele.

Resolved unanimously—That the Committee of Council have received with deep regret the announcement of the premature death of Dr. John Murray. In expressing their deep sympathy with the members of his family, they desire at the same time to record their sense of his high personal qualities, and their warm appreciation of the faithful and important services which he rendered to the JOURNAL and the Association.

Read letter from Dr. Mackay (Elgin), reporting the formation of a new Branch, to be called the Northern Counties of Scotland Branch of the British Medical Association, and forwarding copy of the proposed laws.

Resolved—That the laws of the Northern Counties Branch of Scotland be approved and the Branch recognised.

Resolved—That the Committee of Council desires to express its congratulations to the members upon the formation of the Northern Counties of Scotland Branch of the British Medical Association, and its thanks to Dr. Mackay and others for their exertions in securing this valuable addition to the Association.

One hundred and sixteen gentlemen were elected members of the Association.

THE SHROPSHIRE ETHICAL BRANCH: ANNUAL MEETING.

THE annual general meeting was held in the Assembly Room at the Lion Hotel, Shrewsbury, on Monday (the first week in October having, for several years, been the appointed date for the meeting,) October 6th, at 1 P.M., the President—S. BETTON GWYNN—in the Chair, and the following resolutions were passed unanimously:—

Minutes of General Meeting.—"That the minutes of the last general meeting be affirmed."

Vote of Thanks.—"That the cordial thanks of the meeting be given to the late President, Vice-Presidents, Council, and Honorary Secretary and Treasurer, for their valuable services during the past year."

Election of Officers.—"That W. A. Davies, Esq., be elected President, and C. B. H. Soame, Esq., and R. Wilding, Esq., Vice-Presidents, and the following gentlemen members of the Council for the ensuing year, in the place of those who retire by rotation, or otherwise:—W. A. Davies, Esq. (Llanidloes), Joseph Hickman, Esq. (Brockton), Dr. Fuller (Oswestry), A. Mathias, Esq. (Bridgnorth), and J. W. Roe, Esq. (Ellesmere).

Representatives of Branch in General Council.—"That, in accordance with the eighth general law of the British Medical Association, S. B. Gwynn, Esq., W. A. Davies, Esq., C. B. H. Soames, Esq., and Dr. Jukes Styrap, be the representatives of the Branch in the General Council for the ensuing year."

Representative of Branch on Parliamentary Committee.—"That the President, S. B. Gwynn, Esq., be the Branch representative on the Parliamentary Committee."

Hospital Abuses.—"That, in the opinion of this meeting, the system of medical relief as at present administered at our hospitals, infirmaries, and dispensaries, is open to grave objection; and, considering the abuse which is thereby practised, requires a thorough revision in all its details."

Tariff of Surgical Fees.—"That the members of the Ethical Branch, deeply sensible of the efforts so freely devoted by Dr. Styrap for many years past to promote the interests of the profession, venture to make a further appeal to him: viz., to undertake the completion of the Branch tariff of fees by the addition of a scale of surgical charges—the preparation of which they are aware will entail considerable labour, but which they confidently believe will be ungrudgingly given."

Dr. STYRAP, in thanking the members for the personal compliment, remarked that, although he had never hitherto, he believed, hesitated to accede to a request made to him by his medical brethren in the interests of the profession, he now felt it necessary to withhold assent, until he had well considered the serious responsibility of undertaking so important and laborious a work; but that, should he eventually decide on doing so, it must be on the distinct understanding that no further appeal shall be made to him: for, after so many years of arduous, honorary duties, he thought that he was fairly entitled to retire, and to call upon younger men "to put their shoulders to the wheel!" He would communicate his decision to the President at an early date.

Papers and Communications.—1. Mr. Whitwell (Shrewsbury) exhibited several Calculi of Triple Phosphate of extraordinary form and size taken from the left kidney of a patient—the right being converted into a large sac of pus, and the bladder thickened and ulcerated. The man was fifty years of age, and had suffered more or less from retention of urine, relieved by the catheter, for five years, but continued his employment, as waggoner, to within a week of his death. Mr. Whitwell also related a case of retention of urine with infiltration, and large abscess in the perineum, the natural canal and orifice of the urethra being obliterated, and a fistulous opening formed behind the glans penis, through which the urine had flowed for a long time. The patient was relieved by passing a curved bistoury into the dilated urethra behind the abscess, and then cutting its way through the indurated mass.—2. Dr. Morgan (Madeley) read a paper on a case of Hæmatemesis cured by hypodermic injection of ergotine; and exhibited an improved Ether Inhaler invented by his brother, Dr. J. Morgan of Dublin.—3. Mr. Humphreys (Shrewsbury) described a case of Inversion of the Uterus unconnected with pregnancy.—4. Mr. Wilding (Church Stretton) read notes of a case of Ruptured Uterus terminating fatally on the fourth day, and a case of Inversion of the Uterus.—Mr. Edwards (Llanbrynmair) contributed notes of a rare case in Midwifery, and one of Strangulated Hernia in a pauper, aged 85, terminating successfully.

A Vote of Thanks to the President closed the business proceedings of the meeting.

Seven new members have joined the Branch during the current half-year.

The Dinner was served in the Ball Room at 3.30 P.M. (for the convenience of the country members, several of whom had to leave by inconveniently early trains), under the presidency of S. B. Gwynn, Esq., the vice-chair being filled, in the unavoidable absence of the President-elect, by R. Wilding, Esq. During the dinner, and after each toast, appropriate selections from Auber, Bellini, Bouillon, Donizetti, Mendelssohn, Rossini, and Verdi, etc., were played by the band (an exceptionally excellent one), consisting of nine instrumentalists and vocalist, under the leadership of Mr. Wright of Liverpool—whose strains were listened to with rapt attention, and elicited frequent applause. The party did not break up till a late hour, after spending a very enjoyable evening.

YORKSHIRE BRANCH: AUTUMNAL MEETING.

THE autumnal meeting of this Branch was held at the Church Institute, Wakefield, on Wednesday, October 15. Dr. C. ALLBUTT read a paper on Cardiac Defects as a Cause of Deferred Convalescence in Typhoid Fever, as the first of a series which he proposed to bring before the Branch, and which should deal with some of the less familiar dangers arising in the course of enteric fever. The author divided the failures of the heart into two classes (1), those due direct to the failure of the heart muscle itself, and (2) those due to disorder of the innervation of the heart. After alluding to the combustion of the muscular tissues in fever, he stated that the heart muscle is consumed with the rest, and that a gradual loss of the first seemed very generally noticed in the second and third week. The heart should always be consulted daily in fever, and the state of the first sound is the best single guide to the use of stimulants. The heart muscle is in some cases so far weakened that the cause, great debility of the circulation, seriously impedes recovery. Secondly, the heart often suffers from an interference with its nervous supply or regulation. Such a cardiac neurosis depends rather upon the patient than upon the fever, while, on the contrary, a direct improvement of the heart's muscle depends upon excessive or prolonged pyrexia. Although both these forms of cardiac failure may coexist in varying measure in the same patient, yet it is important to distinguish the two forms. The author then gave the points of diagnosis between them, and spoke of the treatment applicable to each.

Dr. HOLDSWORTH exhibited a case of Hermaphroditism in a child thirteen months old, which had been brought to the Clayton Hospital by the mother for hernia. On examination by the medical man, there was no hernia. There was a rudimentary penis apparently attached to the inner side of the left labium, which, as well as the right, was large, and the urethra appeared to be in the proper situation for a female; on further examination a testicle was detected in each labium. The parts present the general appearance of those of a female child, with large labia; when these are separated, there is the aspect of a vagina, but, on examination, no true vaginal passage existed, but a *cul de sac*. The penis, although small, possesses a rudimentary glans, and a perpendicular ridge where the urethra should be.

Mr. JESSOP exhibited an improved Tracheotomy Tube, and other instruments for operations about the mouth.

Mr. WALKER related a case of Laryngotomy.

Mr. STATTER exhibited and described the use of Casella's Spirometer.

Mr. LAWSON TAIT exhibited an interesting illustration of the method of Amputation of Limbs in a foetus of the eleventh or twelfth week. The cord was twisted round the limbs in a variety of ways, but practically under and round the right leg. The tissues were so eroded that the bones were affected, and the limb would undoubtedly have been amputated below the knee had it remained *in utero* for some time longer. Mr. Tait also showed a specimen which had a very important medico-legal bearing on the question, as to whether the patient had not been pregnant. The general appearance was that of a vascular hydatigenous ovum when the villi of the chorion had become cystic. Careful examination, however, revealed that there was no ovum cavity or any trace of it—the pseudo-hydatigenous ovum always having such a cavity, and often a stunted image of the foetus. Further, the specimen had a pretty extensive liminary membrane, in the substance of which the sacs seemed to have been produced; and microscopic examination showed that this membrane was clearly of uterine origin. An opinion was therefore given that the offcast in question was really the result of membranous dysmenorrhea, the membrane having been retained long enough *in situ* in its hypertrophied condition for some of the tubercles to undergo the cystic dilatation, and this was corroborated by the history of the case. Mr. Tait also read a paper on the temperature and pulse after ovariectomy.

After the meeting, twenty-three members dined together at the Bull Hotel.

CORRESPONDENCE.

PNEUMATIC ASPIRATION: A NEW METHOD OF MEDICAL AND CHIRURGICAL TREATMENT.

SIR,—The JOURNAL of 23rd August last has only just reached me, and I hasten to answer a letter in it of Dr. P. Smith, who appears—certainly to my mind—to be needlessly reopening a question which appeared settled after what passed at one of the meetings of the Medical Section of the British Medical Association. However, as Dr. P. Smith's letter raises two questions—one concerning priority, the other concerning a patent taken out in London—I can only say that there actually exists no manner of patent. As to the question of priority, being afraid of trespassing too much on your valuable space, I would beg those of your readers who may be interested in the matter to refer to the first chapter of my treatise on aspiration,* where they will find the whole subject discussed in full detail.

I am, etc.,

Paris, rue Caumartin, 16.

DR. DIEULAFOY.

UNCERTIFIED DEATHS.

SIR,—I have been recently appointed medical officer of health in the small town where I reside. It became necessary to procure copies of the Register of Deaths for the purpose of making my report to the Board of Health. Judge of my astonishment, on receiving them, to find that 26 per cent. of these deaths were uncertified. I found patients who had been attended by myself entered as having died of complaints differing considerably from the real cause of death, and doubtless those attended by my brother practitioners were equally mis-registered. The explanation is as follows: The sub-registrar resides at a small town about six miles distant; he visits here three or four times a month, and, if he find the relatives of the deceased unprovided with a medical certificate of the cause of death, he registers as the cause whatever they please to say it is.

I am anxious to know what the law is on the subject, as the returns of the Registrar-General must be greatly falsified, and the deductions to be made from them of but little use if in other localities they are equally loosely obtained. I shall be glad if any of your readers can give me information on the subject.

I am, etc.,

ZERO.

LOCAL GOVERNMENT AND SANITARY DEPARTMENT.

It is proposed that the rural sanitary authorities of East Stoneham, Horsham, Steyning, and Thakeham, and the urban sanitary authorities of Worthing and Littlehampton, shall combine in the appointment of a medical officer of health.

THE ENNIS BOARD OF GUARDIANS have voted the maximum superannuation allowance, based on the average emoluments for the last three years, to Dr. Charles Cullinan, who has resigned as medical officer of the Crusheen Dispensary District from ill-health.

THE DANGER OF AN INTERMITTENT WATER-SUPPLY.

DR. ALFRED CARPENTER, of Croydon, writes:—A correspondent, "A Medical Officer of Health," asks the grounds upon which the danger of typhoid fever arises in connection with an intermittent water-supply. The greatest danger arises from a constant pressure-service being turned to do duty for an intermittent supply-service. The theory of a constant supply-service is, that the service-pipes shall be always full under a moderate pressure, so that pure water may be ready at all times for use. One has only to turn the tap, and out rushes the water direct from the main, without the intervention of any cistern. It is acknowledged, and does not want demonstration, that pure water rapidly absorbs noxious elements from the air, and that, if the water have not been exposed to this chance in a cistern, it cannot be so contaminated.

Hence the demand for constant pressure-service, and the determination of the legislature that it shall be provided. Parliament may order, but local authorities occasionally over-ride Acts of Parliament and the

* *Treatise on Pneumatic Aspiration.* By G. Dieulafoy. London: Smith, Elder, and Co. 1873.

It was further resolved—

“That a copy of the above resolution be forwarded to the relatives of the late Dr. Murray, accompanied by the expressions of deep sympathy and condolence with them on the severe loss they have sustained.”

The Weekly Board of Governors is *specially* summoned for next Tuesday, to pass resolutions on the same subject.

The following resolution was unanimously adopted at a full meeting of the Medical Committee of the Hospital for Sick Children, Great Ormond Street.

“Dr. Murray's colleagues have heard with extreme distress of his almost sudden death. They desire to record their sincere regret for the loss of a colleague who gave high promise, not only of attaining to great eminence, but also of adding to the store of medical knowledge; and they wish further to express their high respect for his character, and for the unwearied zeal and scrupulous conscientiousness with which he performed all the duties of his office.

“They beg leave to tender to his bereaved relatives the assurance of their most hearty condolence with them in this their irreparable loss, and of the share which they take in their sorrow.”

UNIVERSITY INTELLIGENCE.

UNIVERSITY OF CAMBRIDGE.

THE following grace passed the Senate of the University of Cambridge on Thursday, October 16th. That, on the recommendation of the Local Examinations Syndicate, a student, though he is above the age of sixteen, may be admitted to the examination for students under that age, provided that he produces a certificate signed by a graduate of the University, or a member of the medical profession whose name is on the *Medical Register*, that such graduate or member believes him to be *bonâ fide* intending to become a medical student; and that the names of students admitted under this condition and satisfying the Examiners be sent to the Registrar of the General Medical Council, but that the ordinary certificates be not granted to such students.

MEDICAL NEWS.

APOTHECARIES' HALL.—The following gentlemen passed their examination in the science and practice of medicine, and received certificates to practise, on Thursday, October 16th, 1873.

Eastall, Henry Francis, Shooter's Hill Road, S.E.
Waller, William Bevan, Milner Square, Islington.

The following gentleman also on the same day passed his primary professional examination.

Crawshaw, Benjamin, London Hospital

MEDICAL VACANCIES.

THE following vacancies are announced:—

BAWNBOY UNION—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Ballinamore Dispensary District: £90 per annum and fees. Applications, 5th November, to James W. Gower, Clerk of Union.
BIRMINGHAM AND MIDLAND EYE HOSPITAL—House-Surgeon: £80 per annum, apartments, board, and attendance.
BIRMINGHAM AND MIDLAND FREE HOSPITAL FOR SICK CHILDREN—Acting-Physician: Acting-Surgeon: Surgeon-Dentist; Extra Acting-Physician: £60 per annum. Applications, 4th November.
BOSTON UNION—Medical Officer and Public Vaccinator for the Shirbeck District: £55 per annum and fees. Applications, Oct. 31st, to Henry Bates, Clerk.
BRANCEPETH COLLIERY, near Durham—Medical Officer.
BRIDGWATER UNION—Medical Officer for District No. 2: £70 per annum.
BRISTOL HOSPITAL FOR SICK CHILDREN—Two Honorary Medical Officers.
BRISTOL ROYAL INFIRMARY—Physician.
CARMICHAEL SCHOOL OF MEDICINE, Dublin—Lecturer on Chemistry.
CASTLE WARD RURAL SANITARY DISTRICT—Medical Officer of Health for the Ponteland Division.
CASTLE WARD UNION—Medical Officer for the Workhouse: £30 per annum.—Medical Officer and Public Vaccinator for the Ponteland District: £20 per annum, and fees. Applications, 1st Nov., to Thomas Arkle, Clerk to Guardians, Highlaws, Morpeth.
CHERTSEY, EPSOM, REIGATE, and DORKING Rural and Urban Sanitary Districts—Medical Officer of Health: £600 per annum for three years. Applications, 1st Nov., to F. H. Beaumont, Esq., Reigate.
CLIFTON UNION—Medical Officer to the Workhouse: £130 per annum.
DALTON-IN-FURNESS URBAN SANITARY DISTRICT—Medical Officer of Health: £60 for one year. Applications, 31st instant, to F. H. Clark, Clerk to the Authority.
DAVENTRY UNION—Medical Officer for District 5: £30 per annum, and fees. Applications, 28th inst., to G. Norman, Clerk.
DERBY URBAN SANITARY DISTRICT—Medical Officer of Health: £20 for one year. Applications, Oct. 29th, to Joseph Jones, Clerk to the Authority.

ETON RURAL AND URBAN SANITARY DISTRICTS—Medical Officers of Health: £100 and £20 for one year. Applications, Nov. 3rd, to R. H. Barrett, Esq., Slough.
GOOLE and SELBY RURAL SANITARY DISTRICTS, and Selby Urban Sanitary District: £500 per annum. Applications, 30th October.
GREAT YARMOUTH HOSPITAL—House-Surgeon: £100 per annum, furnished apartments, coal, gas, and attendance.
GUEST HOSPITAL, Dudley—Honorary Surgeon. Applications, 31st instant, to E. Poole, Secretary.
HALIFAX INFIRMARY AND DISPENSARY—Assistant House-Surgeon: £40 per annum, with yearly increase, board, lodging, and attendance. Applications, 28th instant, to Dr. Alexander.
HOSPITAL FOR SICK CHILDREN—Assistant-Physician.
KENT and CANTERBURY HOSPITAL—House-Surgeon: £80 per annum, board, lodging, etc. Applications, 28th Nov., to Thomas Southee, Sec.
LEEDS PUBLIC DISPENSARY—Senior Resident Medical Officer: £120 first year, £140 second and subsequent years, rooms, board, etc. Applications, Nov. 6th, to John Horsfall, Esq., 31, Albion Street, Leeds.
LINCOLN GENERAL DISPENSARY—House-Surgeon: £150 per annum, furnished apartments, etc. Applications, 28th inst., to James Ward, Secretary.
LIVERPOOL DISPENSARIES—Assistant House-Surgeon: £108 per annum, furnished apartments, etc. Applications, 20th inst., to Wm. Lister, Secretary.
METROPOLITAN DISPENSARY AND CHARITABLE FUND, Fore Street, Cripplegate—Physician. Applications, Nov. 15th, to W. H. Goodchild, Secretary.
MIDDLESEX HOSPITAL—Assistant-Physician.
MIDDLESEX HOSPITAL MEDICAL COLLEGE—Joint Lecturer on Pathological Anatomy: Dean.
NEW ROSS UNION—Medical Officer for the Templewigan Dispensary District: £50 per annum. Applications, 30th inst., to E. Kavanagh, Hon. Sec.
NORTHERN INFIRMARY, Inverness—House-Surgeon and Apothecary: £50 per annum, board, etc. Applications, 13th Nov., to Alexander Dallas, Sec.
OAKENSHAW COLLIERY, near Durham—Medical Officer.
QUEEN'S COLLEGE, Galway—Professor of Materia Medica. Applications, 27th inst., to The Under Secretary, Dublin Castle.
ROYAL FREE HOSPITAL—Senior House-Surgeon: £104 per annum, board and residence. Applications, 20th inst., to James S. Blyth, Sec.
ST. PETER'S HOSPITAL FOR STONE, Berners Street—Clerk and Dispenser: £100 per annum.
SHEFFIELD PUBLIC HOSPITAL and DISPENSARY—Surgeon.
SOUTH DEVON and EAST CORNWALL HOSPITAL, Plymouth—House-Surgeon: £80 per annum, and board. Applications, 5th Nov., to Alfred Rooker, Sec.
STROMNESS, Orkney—Parochial Medical Officer. Applications to W. Ross, Chairman.
SURREY HOUSE OF CORRECTION, Wandsworth—Medical Officer.
SWANSEA RURAL SANITARY DISTRICT—Medical Officer of Health: £250 for one year, and private practice. Applications, 1st Nov., to G. B. Haynes, Clerk to the Authority.
THETFORD RURAL SANITARY DISTRICT—Medical Officer of Health: £70 for one year. Applications, Nov. 3rd, to E. N. Cole, Clerk to the Authority.
TURTON URBAN SANITARY DISTRICT—Medical Officer of Health: £10 per annum. Applications, 29th inst., to Thomas Dawson, Clerk to Authority, Turton, near Bolton.
WESTMINSTER HOSPITAL—Surgeon: Assistant-Surgeon. Applications, 28th instant.
WEST SUSSEX INFIRMARY, Chichester—House-Surgeon and Secretary: £100 per annum, board, lodging, etc. Applications, 1st November, to P. A. Murdoch, M.B., House-Surgeon and Secretary.
WILTSHIRE PAUPER LUNATIC ASYLUM, Devizes—Medical Superintendent: £600 per annum, furnished apartments, etc. Applications, 28th inst., to A. Grant Meek, Esq.

MEDICAL APPOINTMENTS.

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

LUSH, W. J. H., M.R.C.S., L.R.C.P.Ed., L.M., appointed Medical Officer to the Fyfield District of the Andover Union, *vice* Hammond, resigned.
*PARTRIDGE, Thomas, L.K.Q.C.P. and M.R.C.S.E., appointed Medical Officer of Health for Stroud and Bisley Urban Sanitary Districts.

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.

ELLIS.—On October 21st, at Reynoldston, Gower, near Swansea, the wife of *Henry Vause Ellis, M.B., of a daughter.
HASLEHUST.—On October 19th, at The Lodge, Claverley, near Bridgnorth, the wife of *T. W. Haslehurst, Esq., of a son.
KERR.—On October 18th, at Markyate Street, near Dunstable, the wife of *Norman S. Kerr, M.D., F.L.S., of a daughter.
MORISON.—On October 19th, at Hamilton House, Pembroke, the wife of Joshua W. Morison, Esq., of a daughter.

MARRIAGE.

WEDDELL—RATCLIFF. On September 3rd, at Holy Trinity Church, Burton-upon-Trent, by the Rev. W. F. Drury, M.A., Vicar, assisted by the Rev. Jno. Auden, M.A., Vicar of St. John's, Horninglow, James Call Weddell, M.D. and C.M., Birmingham, second son of J. C. Weddell, Solicitor, Berwick-upon-Tweed, to Emily Martha, third daughter of the late James Ratcliff, Burton-upon-Trent.

DEATHS.

GODWIN, James, Esq., Surgeon, at Twyford, near Winchester, on October 3rd, aged 42.
GORDON, Adam, Esq., M.R.C.S.Fng., for many years Parochial Medical Officer and General Practitioner in South Ronaldshay, Orkney, aged 55, on September 25th, suddenly, of heart-disease (angina pectoris).

OPERATION DAYS AT THE HOSPITALS.

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

TUESDAYGuy's, 1.30 P.M.—Westminster, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.—West London, 3 P.M.—National Orthopaedic, 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, 1.30 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.

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

SATURDAY...St. Bartholomew's, 1.30 P.M.—King's College, 1.30 P.M.—Charing Cross, 2 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.—St. Thomas's, 9.30 A.M.—Royal Free, 9 A.M. and 2 P.M.

MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

MONDAY.—Medical Society of London, 8 P.M. Mr. Churton, of Erith, will bring forward a Case of Suppurative Pericarditis, etc., with Specimen; Mr. A. E. Durham, F.R.C.S., "A Case of Foreign Body in the Pleura, accidentally introduced through opening made for Empyema, and successfully removed; Dr. Routh, "A Case of Stone impacted in Kidney, with Specimen"; Dr. Purcell, "A Specimen of Calculus in the Pelvis of Kidney."

TUESDAY.—Royal Medical and Chirurgical Society, 8.30 P.M. Dr. Miller Ord, "On a Case of Duchenne's Pseudo-hypertrophic Muscular Paralysis"; Dr. C. J. B. Williams (President), "On the Acoustic Principles and Construction of Stethoscopes and Ear-trumpets."

FRIDAY.—Clinical Society of London, 8.30 P.M. Sir Wm. Gull, "On Anorexia Hysterica, and on a Cretinoid State supervening in the Adult"; Dr. Guinier, of Montpellier, will show a New Method of Gargling the Larynx, illustrating this upon himself.

EXPECTED OPERATIONS AT THE HOSPITALS.

ROYAL FREE HOSPITAL, Saturday, October 25th, 2.30 P.M. Excision of Tongue, by Mr. Gant.

NOTICES TO CORRESPONDENTS.

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

AUTHORS desiring reprints of their articles published in the JOURNAL, are requested to communicate beforehand with the printer and publisher, Mr. T. Richards, 37, Great Queen Street, W.C.

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.

COMMUNICATIONS respecting editorial matters should be addressed to the Editor; those concerning business matters, non-delivery of the JOURNAL, etc., should be addressed to the General Manager, at the Office, 37, Great Queen Street, W.C.

DR. MACKINTOSH's request shall be complied with.

MR. A. MCKEWAN (Belfast) appears to have been treated with great, but no doubt unintentional, injustice. He should write to the editor privately.

DR. DUKES (Rugby) writes to express the opinion, that the case recorded last week as being believed by the author of the paper to be one of "Abscess of Brain in a Child", was in truth only an example of acute hydrocephalus in the third stage.

A MEMBER OF THIRTY YEARS' STANDING has omitted to furnish his name.

WE are much obliged to Mr. Michael for the prompt and valuable information.

ERRATA.—At p. 463, second line of second column, for "graver operations", read "other grave operations"; and in the same column, five lines from bottom, for "forms of disease", read "germs of disease".

DR. WHIR (Preston Pans).—There is a swindling university which has a nominal seat in Philadelphia, and which sells diplomas *in absentia*. The Charter has been annulled by Act of Congress, and the diplomas obtained from it by purchase are not registrable in this country, or recognised in courts of law.

SIR.—I did not write the article you copied from the *Cork Examiner* in your publication of the 18th inst., nor would I have sanctioned the publication of such a report. I am, etc., N. J. HOBART, M.D.

8, Princes Street, Cavendish Square, W., Oct. 22nd, 1873.

IN the notes of "A Case of Rupture of the Heart by Violence", the third person should throughout have been substituted for the first, as is usual in our hospital reports. The alteration was only partially made in the MSS.

DR. STONE AND "OUR MEDICAL COLUMN".

At the moment of going to press, and after the foregoing pages have been despatched, we have received an advance copy of the *English Mechanic* for October 24th, in which we find it stated that, "not liking a weekly 'pulling over the coals', and not wishing to trample professional etiquette under feet, Dr. Stone last week proposed a modified plan. We think, however, it is better to drop the Medical Column as a distinct department of the paper, and to insert any suitable inquiries that may reach us appertaining to life, health, and disease, as ordinary queries, leaving them to be answered by Dr. Stone or any other competent authority."

CORRESPONDENTS are particularly requested by the Editor to observe that communications relating to Advertisements, changes of address, and other business matters, should be addressed to Mr. Francis Fowke, General Secretary and Manager, at the Journal Office, 37, Great Queen Street, W.C., and not to the Editor.

MR. G. TURNER'S (Portsmouth) letter shall be handed to the Parliamentary Bills Committee. Most of the difficulties mentioned arise from defects in the bye-laws, and in the determination of the authority to allow excessive terms of indulgence. They should consult some good sanitary lawyer, such as Mr. W. H. Michael, who would frame improved bye-laws and remove most of the suggested difficulties.

EXCELLENT INTENTIONS.

A SINGULAR tribute to the memory of the late Baron Liebig is published, in metrical form, in the *Giant College Students' Journal*, Bombay, No. 6, September 1873. The stanza runs thus—

"Had I but angels' wings, I straight would fly
To where, for aye, embosomed thou dost sleep;
Weave thee a crown of *Champaks* of my land;
The milk-white *Mogra* circle round thy neck;
And scatter roses o'er thy marbled dome!
For such, great Priest of Nature, is thy meed!

We understand this to imply the most amiable intentions towards the great deceased chemist.

THE "REGULAR DEPARTMENT".

IN a biographical memoir of Professor Redwood, in the last number of the *Chemist and Druggist*, it is stated that—"The subject of our narrative had at that time passed the period of his three years' engagement. He had gone from the 'putting-up counter' to the infusion and decoction department, and from thence to the 'regular department', which comprised the sending out of medicines that were supplied regularly every day, or every two or three days, to customers who took their medicine as they took their food, and thought it equally necessary. In those days medicines were largely prescribed in draughts, for those who could afford the luxury; and it was no unusual thing for the assistant having charge of the regular department to send out daily from ten to twenty sets of four or six draughts to patients who took them either twice or three times a day, and some of whom were thus supplied for years, without intermission. Where are these patients nowadays, or the physicians who prescribed for them? Does even the 'regular man' or his department exist now? We know not, but this we know, that draughts have been to a great extent superseded by mixtures, and mixtures by drops, with increased danger to the patient, and diminished profit to the dispenser.

LIFE ASSURANCE.

SIR.—The London Life Assurance Society, 81, King William Street, E.C., applied to me for a certificate of health for a gentleman proposing to insure in their office. I filled the usual form, and sent it to the Secretary through the post. Receiving no fee, in due course I wrote on the subject, and received a lithographic reply informing me that I must claim my fee from the patient, and that the Society never paid for certificates from medical men. Imagining that such a practice on the part of assurance companies had become a thing of the past, I think it desirable to make it known through our JOURNAL that there is still existing an office which adopts the plan of first getting a medical certificate for the safe conduct of its business, and then declines to pay for services rendered. I am, etc.,

October 17th, 1873.

W. TOWERS SMITH.

AN APPEAL.

SIR.—After fruitless attempts to procure the admission of my daughter to the Royal School for Officers' Daughters, I now venture to ask the assistance of the Association which you advocate and propound, feeling assured they will not allow a member of the profession to be in difficulties. The British Medical Association will confer a lasting benefit on my daughter, whose schooling they will be the means of advancing. I am, etc.,

H. J. G. ATKINSON, Assistant Staff-Surgeon, H.P.

Lincoln Cottage, Freemantle, Southampton, Oct. 16th.

P.S. The increasing debility caused by paralysis and rheumatism of limbs unfits me for the exertion even of writing: I cannot always hold objects in my hands.

MR. G. NEWSTEAD (Ecclehill).—The only qualifications required for the appointment of a medical officer of health under the regulations of the Local Government Board, 11th November, 1872, are that the officer shall be registered under "The Medical Act of 1858", and shall be qualified by law to practise both medicine and surgery in England and Wales. The Local Government Board may, however, upon the application of the sanitary authority, dispense with the requirement that the officer shall be qualified to practise both medicine and surgery, if he be duly registered to practise either medicine or surgery.

THE CLIMATE OF AUSTRALIA.

SIR.—I should feel thankful to any of your readers who have had the opportunity of knowing, if they would kindly furnish me with their experience of the climate of Australia—I mean more particularly in the neighbourhood of Sydney and Melbourne—also the chances of success a young unmarried surgeon would have in either of those cities. I may mention that I have got friends in both cities, so that I would not go out entirely as a stranger. I should also like to know the scale of fees, and any other information bearing on the subject.

October 1873.

I am, etc.,

INQUIRER.

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

THE DISPENSARY SYSTEM.

SIR.—This day commences (October 6th) the working of the dispensary system for the Reading Union. I want the fact recorded, that guardians and medical officers elsewhere may copy this example. In Reading, the proposal to adopt the principle was introduced by J. O. Taylor, Esq., the chairman, in which he was supported by the vice-chairman, R. C. Hurley, Esq. (soon to be elected mayor), and a majority of the Board. I ought also to add that every help has been afforded to the Committee for carrying out the decision by Mr. J. J. Henley, of the Local Government Board. It only remains that the Guardians modify the existing contracts slightly, and which I anticipate being able to report to you that they have done very shortly. After more than thirty years of providing drugs, and dispensing or providing a dispenser, to find at length that "the hour is come" for one's release, I feel hardly able to breathe deep enough. Well, thank God, seriously it is come. Reading, Oct. 6th. I am, etc., T. L. WALFORD.

MR. S. A. LANE ON TERTIARY SYPHILIS.

SIR.—There are two points in the valuable and graphic sketch of tertiary syphilis by Mr. Lane in your columns, to which, with some diffidence, I will call attention.

1. If mercury cures secondary syphilis by preying on that constituent of the blood which acts as the "gluten" of the "syphilitic fermentation", it would follow that a mercurial course given to a person suffering from Hunterian chancre would serve as a tolerably efficient prophylactic against secondary syphilis, or even that an efficient course of mercury administered during infancy would prove a more or less complete protection against the acquisition of future constitutional syphilis, just as vaccination does against small-pox; but in neither case does such a result follow.

2. If tertiary syphilis be a mere ruin left by a storm which itself has passed completely away, how is it that tertiary syphilis should occur, as I have often seen it, unpreceded by any manifest symptom of secondary syphilis? nay, why should it follow, as it sometimes unquestionably does follow, so closely on primary syphilis as to commence, and even attain a considerable development, before the primary lesion has had time to heal?

As to this important question of the relation of tertiary to secondary syphilis, my recollection of my own experience has induced me to take a different view of the determining influence which regulates the phase (secondary or tertiary) under which syphilitic phenomena are developed in individual cases, although I must admit that I have not yet collected any precise statistics on the matter. This determining influence to which I refer is the age of the patient.

This theory of mine, should it chance not to be new, is at all events one that I have never yet heard expressed. It comes to this: that secondary syphilis is the constitutional syphilis of youth; tertiary syphilis is the constitutional syphilis of middle age and old age; and equally so whether the primary syphilis giving rise to it be ancient or recent, and whether (if ancient) the phenomena of secondary syphilis have or have not preceded, in youth, the development, at a later age, of tertiary syphilis.

The reason, in my view, why tertiary syphilis often, though by no means invariably, is preceded by secondary syphilis, while secondary syphilis is never preceded by tertiary, is not because the tertiary phenomena are either a later and fuller development, nor yet because they are mere sequelæ of the later phenomena, nor even because they are mere results of a depraved condition, which itself is no longer truly syphilitic, but because the patient must be older in order to become the subject of tertiary phenomena than he was when capable of producing secondary phenomena. If this be so, the terms secondary and tertiary, as applied to the phenomena of syphilis, cease to have any scientific value.

I of course claim a certain amount of variation of the limit of age, which I have inferred as dividing the secondary from the tertiary phenomena, since age, for the purposes of such a theory, is a question not of the years an individual may be able to number, but of the extent to which, in ordinary parlance, he has "aged".

I am, etc., BALMANN SQUIRE.
9, Weymouth Street, Portland Place, October 11th, 1873.

ELECTRISATION OF THE UTERUS.

SIR.—Since my friend Dr. Beverly Morris's short paper to the Association, and the subsequent correspondence which appeared in your columns, I have been applied to by several gentlemen for information relative to the instrument he described for producing premature labour, etc. The electro-galvanic conductor is a modification of Dr. Radford's instrument for producing uterine contraction in *post partum* hæmorrhage, for the invention of which he deserves of the profession and many patients the highest meed of gratitude and honour; and I am glad to have an opportunity of personally stating that under most distressing circumstances I have been repeatedly indebted to his invention in preserving the lives of patients under my treatment.

I have no doubt but for the excessive bulk and somewhat complex form of Dr. Radford's battery, his uterus-stimulator would have been more commonly resorted to in general practice. To remedy that inconvenience, I had made by Grey and Selby of this town, for my own use, the more portable and comfortable instrument which Dr. Morris described, which with Gaiffe's small battery may be conveniently carried in the pocket.

For uterine examination, production of labour, etc., the conductor may be passed through a medium-sized glass or other speculum, so as to obtain, during manipulation, a view of the undilated os. My modified instrument has of course all the advantages of Dr. Radford's original one for giving shocks to the uterus, to cause its immediate contraction in *post partum* hæmorrhage: whilst when dilatation of the os is required in producing premature labour, the spherical tip may be screwed off and changed for the small cone or the plain blunt point, with which it has to some extent the advantage of being usable as a uterine sound; whilst the neater size and improved curve of the stem admits of its ready passage through a speculum without the light being obstructed. By using Gaiffe's battery, with the box-case slightly altered, so that the lid may be closed during operation, it becomes less formal in appearance at the bedside, and consequently less annoying to timid patients not under anesthesia.

The improvement in the case of this battery is quickly effected by first wrenching off the wooden stop, stuck on by the maker inside to prevent the lid being closed whilst the battery is in action (a caution necessary only to a very ignorant or careless person). Next, bore three small holes through the lid vertically, over those made for inserting the pegs at one end of the conducting cords for connecting the battery with the handles, etc. The pegs may then be inserted through the lid

whilst closed: and the battery is in action instead of its being unnecessarily exposed.

In conclusion, I must in justice give credit to Messrs. Grey and Selby, the makers, for having produced a superiorly finished article, which they offer at a reasonable price. I am, etc., JNO. VARLEY.

Nottingham, October 12th, 1873.

AFRICAN FEVER.

THE advice which Dr. McCormac (Belfast) tenders to Sir Garnet Wolseley, and the officers and others of the Ashantee expedition, has much good sense in it, if little novelty. His ideas of the treatment of African fever, however, are heretic; and we should dispute his dictum as to the general acquiescence in favour of blood-letting and active aperients. He writes:—

"The doctrine and the practice of medicine, for well-nigh two thousand years, have decided with tolerable unanimity that fever, when it does ensue, should, in general, be treated with more or less depletion. Bleeding will not remove the terrible reaction attendant on African fever; but a dozen or twenty ounces taken from the arm of a full-blooded, robust European will tend to abate that reaction, and help to keep it in bounds compatible with life. There cannot be a question about the propriety of clearing out, with some simple and sufficiently active aperient, the long tract of the intestinal canal. Sometimes, this being premised, a smart emetic will check the further progress of the fever at once. If not, I would administer quinine in twenty-grain doses—preferably during the remission, if happily a remission of the fever ensue. The hair should be cut or shaved, cold applications applied to the head, and a sheet wrung out of cold water to the body generally. The air must be carefully renewed, and the insatiable thirst properly appeased. Generally the fever abates, when it does abate, as rapidly as it began; but sometimes the remissions lead inexperienced persons to imagine—too often most erroneously—that the fever has departed altogether. The utmost prudence, therefore, must be exercised, since an ounce of solid food, premature effort, any incaution, in fine, may cost a life. Relapses, too, are not unfrequent. In short, the convalescence, when convalescence happily ensues, has to be as carefully watched and diverted as the fever itself. Occasionally, however, the fever runs a more protracted course, and the sufferer then sinks into a condition of excessive prostration. In no case must watchfulness be omitted or hoped given up—at least while life endures. It is hardly necessary to observe that in cases like these due warmth must be maintained, and such sustenance and stimuli had recourse to as are most judicious, practicable, and expedient to employ. The cummer-band or waist-belt, and the avoidance of evening and night-chills, prove great preservatives against dysentery. As for the actual treatment of dysentery, the same general rules—at least during the inflammatory period—subsist as with regard to fever itself; otherwise, the invaluable aid of topical, warm, moist applications, along with opium and ipecacuanha internally, is now too well appreciated to need insisting upon."

. We should be glad to hear the views of some experienced African medical officers on this subject.

WE are indebted to correspondents for the following periodicals, containing news, reports, and other matters of medical interest:—The Daily Post; The Lincoln Journal; The Liverpool Weekly Albion; The Manchester Courier and Lancashire General Advertiser; The London Mirror; The Leeds Mercury; The Exeter and Plymouth Gazette, Oct. 15th; The Anti-Gam-Law Circular, Oct. 18th; The Northern Echo, Oct. 17th; The Daily Post, Oct. 21st; The Bedfordshire Mercury, Oct. 18th; The Eastern Daily Press, Oct. 17th; The South Durham and Cleveland Mercury; The Manchester Evening News; The Australasian; The Cumberland Pacquet; The New York Evening Post; The West Country Lantern; etc.

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

Dr. T. Grainger Stewart, Edinburgh; Dr. George Johnson, London; Dr. Lombe Athill, Dublin; Dr. J. Althaus, London; Dr. Jacob, Dublin; Mr. Balmanno Squire, London; Dr. Jacob, Dublin; Dr. W. D. Stone, London; Mr. Nicholson, Hull; Dr. Kelly, Taunton; Mr. Sargeant, London; Dr. Rutherford, London; Dr. Spiegelberg, Breslau; Dr. Davies, Duffryn; Mr. Purves, St. Andrew's; An Associate; Mr. W. H. Michael, London; Dr. Ogston, Aberdeen; The Secretary of the Royal College of Surgeons of Edinburgh; Dr. Rumsey, Cheltenham; The Secretary of the Clinical Society; Dr. Alexander Bennett, Edinburgh; Mr. Lawson Tait, Birmingham; Mr. Woodman, Exeter; Dr. Cayley, London; Mr. Holmes, London; Mr. Southam, Manchester; Mr. Partridge, Stroud; Mr. Randolph, Milverton; Mr. Sympton, Lincoln; Dr. D. Goyder, Bradford; M.R.C.S. Eng.; The Secretary of Apothecaries' Hall; The Registrar-General of England; The Registrar-General of Ireland; Mr. Wanklyn, London; The Registrar of the Medical Society of London; Mr. J. W. Langmore, London; Dr. F. J. Brown, Rochester; Dr. Shann, York; Mr. Garman, Wednesbury; Mr. Benson Baker, London; Mr. Harry Leach, London; Dr. Norman S. Kerr, Dunstable; Dr. James Ross, Waterfoot; Dr. Duffin, London; Dr. Macnamara, Dublin; Mr. Fairlie Clarke, London; Dr. Dieulafoy, Paris; Dr. Lonsdale, Carlisle; Mr. H. Nelson Hardy, London; Mr. Jeaffreson, Newcastle-upon-Tyne; Dr. Weir, Preston Pans, N.B.; Dr. J. W. Moore, Dublin; Dr. Bryan, Northampton; Dr. Brown, Preston; Dr. Hobart, Cork; Dr. Creighton, London; Dr. Bradbury, Cambridge; Mr. Lawson, London; Dr. Styrap, Shrewsbury; Mr. Morison, Pembroke; The Secretary of the Royal Medical and Chirurgical Society; Dr. Procter, York; A Correspondent; Dr. C. Parsons, Dover; Mr. Johnston, West Bromwich; Our Dublin Correspondent; Dr. Edis, London; Dr. Farquharson, London; Dr. Angus Mackintosh, Chesterfield; Mr. Wright, Leeds; Mr. Callender, London; The Secretary of the Pathological Society; Dr. Dukes, Rugby; Mr. A. McKewan, Belfast; Dr. Rutherford, London; etc.

BOOKS, ETC., RECEIVED.

On Accelerated Pulse in Consumption. By Edward Williams, M.D. Colchester: 1873.
The Fourteenth Annual Report of the Convalescent Society for Newcastle-upon-Tyne and the Counties of Northumberland and Durham. Newcastle-upon-Tyne: 1873.