

ASSOCIATION INTELLIGENCE.

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 Ligation 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.

MIDLAND BRANCH.

THE autumnal meeting of the above Branch will be held on Tuesday, November 11th, at 7 P.M., at Messrs. Crossley and Clarke's, Medical Library, Leicester.

Several gentlemen have promised to read papers and bring cases forward for discussion. Any member who is desirous to assist at this meeting is requested to communicate with me without delay.

THOS. BLUNT, M.D., *Hon. Sec.*

Leicester, October 29th, 1873.

SOUTH-EASTERN BRANCH : EAST SUSSEX DISTRICT MEETINGS.

THE next meeting of the above District will be held at the White Hart Hotel, Lewes, on Friday, November 14th, at 3 o'clock. RICHARD GRAVELY, Esq., in the Chair.

All members of the South-Eastern Branch are entitled to attend, and to introduce professional friends.

By permission of the Committee of the Sussex Archaeological Society, the Museum at the Castle will be thrown open to members and their friends for inspection.

Papers have been promised by Dr. Moon of Brighton, "On the Therapeutics of Pythogenic Fever", and on "Stricture" successfully treated by "Holt's" method at the Newick Cottage Hospital, by the Chairman.

Dinner will be provided at 5.30 P.M., at the White Hart Hotel; charge, 5s., exclusive of wine.

Notice of intended communications is requested by the Secretary on or before Thursday, the 6th instant.

THOMAS TROLLOPE, M.D., *Honorary Secretary.*

35, Marina, St. Leonards-on-Sea, October 28th, 1873.

SOUTH-EASTERN BRANCH : EAST SURREY DISTRICT MEETINGS.

A MEETING was held on Thursday, October 16th, at Laker's Hotel, Redhill. Dr. Holman presided, and twenty-five members and visitors were present.

An excursion was made to the Earlswood Asylum, where the party were received by Dr. Graham, the resident physician, who took them over the institution, showing its general arrangements, etc., and pointing out several cases of interest. The return to the hotel was made by 6 P.M. Most of the members remained to dinner; and the Mayor of Reigate and Dr. Graham were present as guests of the Chairman.

A hearty vote of thanks was accorded to Dr. Graham for the pleasant and instructive visit of the afternoon.

EAST YORK AND NORTH LINCOLN BRANCH.

THE following is an abstract of the President's Address read at the autumnal meeting of the above Branch, held at Cleethorpes on Wednesday, September 24th, 1873.

Mr. MORLEY having given a brief statement of the business transacted by the Council, together with a general account of the late meeting of the Association in London, invited the opinion of the meeting respecting a question which had arisen in his practice as a Poor-law medical officer, viz.: "The right of payment for cases when medical relief is granted on loan."

From the correspondence read, it appears that Mr. Morley had attended a man named Marris (who had walked a mile to his house immediately after having sustained a fracture of the arm) without an order, and that within a week he received an order from the relieving officer, which was confirmed by the Board of Guardians at their next meeting, when he was relieved in the ordinary way for a month, and then the relief hitherto given was granted on loan for a fortnight, and afterwards recovered from the patient. After Mr. Morley had sent in his quarterly account for payment of extra fees, the clerk informed him by letter that Marris did not become chargeable to the union until several days after the date when the treatment of his arm commenced, and the relief subsequently given to Marris was only given on loan. Under these circumstances, the guardians are of opinion that the charge cannot properly be made against them."

On appeal to the Local Government Board respecting this case through the Board of Guardians, Mr. Morley asked, Was not medical relief included in this loan? Two months afterwards, he wrote to the Board of Guardians, informing them that he had not yet received an official reply, but had been verbally informed by their clerk that the Local Government Board had instructed them that he had clearly no legal right to the fee, and had granted it to him as a *gratuity*. He therefore requested it to be forwarded with a copy of the resolution respecting the same, to which the clerk answered, that he was directed by the board not to furnish the copy asked for, and at the same time enclosed a cheque for £1 awarded as a *gratuity*. To which Mr. Morley replied by acknowledging the receipt of a cheque for £1 awarded as a *gratuity* under Article 172 (which provides compensation for "extraordinary services") in answer to his claim for payment of the fee provided for treatment of a fracture of the arm by Article 177, and stated that as this is a question affecting the medical profession in general, and Poor-law medical officers in particular, he respectfully declined accepting as a favour what he claimed as his right, and returned the cheque.

An animated discussion arose (several Poor-law medical officers being present) on the following questions.

1. Have the guardians power, having confirmed the order of a relieving officer on a case specially provided for by Article 177 of the General Consolidated Order of the Poor-law Commissioners of July 24th, 1847, to repudiate payment by subsequently giving relief on loan?

2. Could he consistently with his appeal for services rendered as above stated, accept payment in the form of a *gratuity*?

On the motion of Mr. KETTLY, seconded by Mr. DIX, it was resolved unanimously that Mr. Morley was clearly entitled to his fee as a right, and an opinion was expressed by a majority present that it would have been better had he accepted the fee *under protest*.

It was also recommended that the representatives in the Council should urge upon the Poor-law Committee of the Association the importance of memorialising the Local Government Board, that on all future appeals an answer be forwarded direct to the medical officer instead of to the clerk of the union *only*, it being impossible under the present arrangement to obtain an exact opinion respecting any question submitted for consideration.

moon at rising. The complexion was soft and fair; the skin presented a peculiarly smooth and fine texture, which had a porcellanous aspect; the cheeks were tinted of a delicate light rose-purple. The cellular tissue under the eyes became loose and folded, and that of the neck and under the jaws thickened; the lips were large and thick, and of a rose-purple; *alæ nasi* thick. The distance between the eyes appeared disproportionately wide, and the root of the nose depressed; this change gave the face a flattened, broadened character, which was quite peculiar, the whole expression being at the same time gentle and placid. The tongue grew broad and thick, the voice was guttural, and the pronunciation clumsy, as if the tongue were too large for the mouth. The hands had undergone a characteristic change, and became broad, thick, and spade-like, from thickening or infiltration of tissue. With this change in the face, tongue, lips, and hands, there was gradually increasing languor and disinclination to exertion; and the mind, from being active and inquisitive, assumed a placid and lazy indifference, with a liability to occasional outbreaks of temper. The intellect remained unimpaired. The integuments of the chest, abdomen, and upper and lower extremities were loaded with subcutaneous fat. A cursory aspect of one of these cases, without any previous experience of its peculiarity, would have led to the suspicion of some disease of the heart causing venous obstruction, or of a morbid state of the kidneys favouring oedema. Neither of these conditions was present in the cases under consideration. All the viscera were healthy. Although a large deposit of subcutaneous fat accompanied the changes named, the author contended that the mere condition of corpulency, obesity, or fatness would not explain the pathology of these cases. Common observation showed that, in ordinary polysarcia, there were no attendant changes which could be regarded as cretinoid. The author stated that his remarks on this state were rather tentative than dogmatical; but he believed that anyone who should observe the malady in question would regard it as substantive and definite, and as having special characters. That it was allied to the cretinoid state would appear from the facial expression, the changes in the tongue and hands, and the coincident change in the locomotive powers and in the mental activity. The author referred to Dr. Fagge's paper on "Sporadic Cretinism occurring in England." Dr. Fagge had cited a case beginning as late as the eighth year in a subject previously healthy and well-developed, and had speculated upon the possible supervention of the disease in the course of adult life. Rösch had recorded two instances of this disease beginning respectively at the ages of five years and between seventeen and eighteen. In the cretinoid condition in adults which the author had seen, the thyroid body was not enlarged in four cases; but, from the general fulness of the cutaneous tissues in the neck, he was not able to say whether the thyroid was wasted or not, as Dr. Fagge had found it to be in cases of sporadic congenital cretinism; nor was the author able to determine the presence of the supra-clavicular masses of fat outside the sterno-cleido-mastoid muscles first described by Mr. Curling, and specially noticed by Dr. Fagge as occurring in congenital sporadic cases. The author added that such masses of supra-clavicular fat in the lower triangular space of the neck were not infrequent in the adult, without any associated morbid state whatever. When the change which the author had described as occurring in adults had begun, so far as his limited experience went, it continued. Some advantage seemed to be derived from baths and frictions, fresh air and change of place—from such means, in fine, as stimulated the nervous system and quickened the peripheral venous circulation; but the results were very limited. This was specially shown by comparing two clinical reports made of the same case at an interval of seven years. The details singularly coincided, showing how little change had occurred in that time.

MEDICAL SOCIETY OF LONDON.

MONDAY, OCTOBER 20TH, 1873.

Dr. HABERSHON, President, in the Chair.

THE PRESIDENT delivered a brief address.

DR. RICHARDSON read a Clinical Study of Stricture of the Oesophagus. After discussing its development and diagnosis, he proceeded to state his views of treatment as follows. After defining that such treatment should be accepted as palliative and alleviating only in our present state of knowledge, the author insisted on systematic feeding as the first rule of treatment. This would be admitted generally, but the difference was in the supply of food. The common practice was, to attempt to dilate the stricture to enable the patient to swallow; this he thought wrong, and considered that the first effort should be made to pass through the stricture a small tube by which food could be introduced, to get the parts accustomed to the tube, and to let dilatation follow. The reasons for this plan having been offered

the details of feeding were considered, and foods were classified according as they ought to be administered—by the stomach, through the feeding-tube, or by the rectum. Dr. Richardson showed that only foods of the crystalloid and water types could be given with advantage by the rectum. Foods of colloidal character (albuminoid foods) were useless when thus given, the albumen was simply deposited on the mucous membrane and was decomposed, and occasioned flatulence and disturbance; these foods required to be digested in the stomach before they could be taken into the circulation. Fatty foods required the lacteal system for their absorption, and they also must be administered through the stomach; by the rectum, water can be introduced, and sugar, and alcohol with water: different formulæ were here described for foods requiring to be administered by either channel. For introducing food by the mouth through the stricture, a double-current tube was advisable, as the passage of gases from the stomach was often an obstacle to the passage of food. A tube, newly constructed on this principle, was exhibited. There was also exhibited another tube, through which the patient might swallow liquid food himself after the tube had been introduced; and a bottle for the feeding process, which bottle, by a change in arrangement, could be used for injection of fluids by the rectum. Directions for keeping up the temperature of the patient, and for the employment of alcohol, were noticed at length. In some cases, where there is profuse secretion in the oesophagus and accumulation of secretion above the stricture, it is advisable to clear the tube. To effect this, the author showed a tube fitted with a sponge in a sheath; the sponge answered well for absorbing and removing the secretion. Medicines could not, the author thought, be administered in cases of oesophageal stricture for the purpose of effecting a cure, but still medicinal measures were not to be despised; they were often of great value, especially those of a narcotic class. Indeed, to secure sleep was not less important than to provide food and warmth; the stomach, however, should never be troubled with medicines; they should be introduced either by subcutaneous injection, or by enemata, or by inhalation; for procuring sleep, the author preferred the method of inhalation of a volatile fluid—bichloride of methylene and pure methylic alcohol in equal parts formed the best combination for this purpose. The question of dilatation of organic oesophageal stricture in certain cases was now brought under consideration, and objection was taken to all dilators that act as wedges, and which press the strictured part downwards. Mr. Durham's dilators were commended as the best up to the present time. A new dilator, by the author, in which lateral dilatation was secured by air or water pressure, was laid before the Society as an instrument promising to do a great service. It was quite impossible, the author believed, to tear or rupture the oesophagus with this dilator. On the performance of the operation of gastrostomy, Dr. Richardson spoke with reserve; it could, he thought, never be more than a doubtful and temporary measure, so long as we fail to control the progress of the disease in the oesophagus. If we could find means to control the progress of the stricture, then we might have to consider this operation more earnestly. The author would himself prefer to open a communication into the small intestine (if an operation were demanded) through the parietes rather than into the stomach. Dr. Richardson, in conclusion, referred briefly to the experiments he had made for the purpose of being able to feed by the veins; but, as his researches on this subject were incomplete, he proposed, with the permission of the Society, to bring them forward, at a future time, as a distinct communication.—In the discussion which followed, Dr. SEMPLE narrated several cases in which the cachexia, so usually seen in cases of malignant disease, was absent.—Mr. MASON had treated very successfully traumatic stricture following oxalic acid poisoning by forcible dilatation.—Mr. DURHAM also discussed, from an extensive series of statistics, the relative proportion of non-malignant strictures, about twenty per cent; being traumatic; he described and demonstrated his improved bougie dilators, made by Krohne and Sesemann; and mentioned several highly successful cases.

UNIVERSITY INTELLIGENCE.

UNIVERSITY OF OXFORD.

ON November 18th, there will be an election at Balliol College, Oxford, to a scholarship on the foundation of Miss Hannah Brackenbury, "for the encouragement of the study of Natural Science," worth £80 a year (and tuition free) for four years, open to all such candidates as shall not have exceeded eight terms from matriculation. At 10 o'clock A.M., papers will be set in the following subjects: (1) Mechanical

Philosophy and Physics ; (2) Chemistry ; (3) Physiology. But candidates will not be expected to offer themselves in more than two of these. There will also be a practical examination in one or more of the above subjects, if the examiners think it expedient. Candidates are requested to communicate their intentions to the Master of Balliol by letter, on or before Monday, November 10th, inclosing testimonials from their colleges or schools, and (if members of the University) certificates of their matriculation, and stating the subjects in which they offer themselves for examination.

CORRESPONDENCE.

PROVIDENT DISPENSARIES.

SIR,—I have read with much pleasure in one of the Coventry newspapers—the *Herald and Free Press* of October 10th—an extract from your JOURNAL describing the benefits of provident dispensaries, and especially of the one at Coventry, now numbering nine thousand free members, who contributed last year £1,251, divided amongst the medical officers. I am confident that the principles upon which these institutions are founded are capable of much further adoption than during my father's lifetime, who for so many years devoted his time and energies gratuitously to the establishment of them in so many towns throughout the kingdom. The institution at Coventry was one of the first that he founded, amidst considerable opposition and the prejudiced dislike of some of his profession; yet, in spite of all, he succeeded, and the result you have before you. Dr. Nankivell of Torquay, whom you name as founder, was only one of the first medical officers, who successfully and with much ability carried out for some years my father's plans; but we feel sure he would disclaim being the originator of them.

In the Twenty-seventh Annual Report of the Coventry Provident Dispensary, read at a general meeting in St. Mary's Hall on May 3rd, 1859, occurs the following. “The Committee much regret to have to notice the death of the founder of provident dispensaries, Mr. H. L. Smith of Southam. He assisted at the establishment of this institution in the year 1831. He was a kind-hearted, generous-minded man, and has been the cause of good to thousands. At his request, a meeting was held at St. Mary's Hall on the 21st October, for the purpose of assisting the Society for Promoting a Knowledge of Provident Dispensaries, when those present will not soon forget the excellent paper he read, and the kind philanthropic spirit he evinced.” Again, the sixth resolution is in these terms: “That this meeting desires to record its admiration for the character, and deep respect for the memory, of the late Mr. Henry Lilley Smith. The Coventry Provident Dispensary, in common with all similar institutions, owes its origin to his untiring zeal and earnest heartfelt philanthropy; and the meeting desires to convey to Mrs. Smith and the family their sincere sorrow for a loss which will be long felt by all who are interested and occupied in promoting the well-being of the poor around them.”

The ascription in your paper of the merit of being founder of the Coventry Provident Dispensary to Dr. Nankivell is, therefore, a mistake which, in memory of the lifelong services and sacrifices to that cause of my respected father, I write, hoping that (either by the publication of this letter or in some other manner), you will do me the kindness to correct.

I am, etc., W. L. SMITH.

Dorsington Rectory, Stratford-on-Avon, October 25th, 1873.

REST IN PULMONARY CONSUMPTION.

SIR,—In a paragraph which appears in the BRITISH MEDICAL JOURNAL of Oct. 4th, it is mentioned that Dr. Berkart has instituted a novel plan of treating pulmonary consumption by the application of mechanical compression made in such a manner by strapping and bandaging as to control the respiratory movements and prevent contact of the atmosphere with the inflamed portion of the lung. Will you kindly allow me, in justice to Dr. Horace Dobell, to state that I have for several months had constructed, at his request, what he designates a “lung-splint”, which acts on precisely the same principle as Dr. Berkart's strapping and bandages, with the additional advantage of being able to regulate the amount of compressing force?

Dr. Dobell's “lung-splint” consists of two padded metal plates adjusted to the anterior and posterior surfaces of the thorax at the affected pulmonary region, and held together by a thin steel band, the force of which can be easily increased or diminished at will.

Wimpole Street.

I am, etc. HEATHER BIGG.

LOCAL GOVERNMENT AND SANITARY DEPARTMENT.

PROPOSITION OF DR. ROBINSON FOR CARRYING INTO OPERATION THE PUBLIC HEALTH ACT, 1872, IN EAST KENT.

AT a meeting of delegates from the various Urban and Rural Sanitary Authorities of the combined district of East Kent, held at Canterbury, on Saturday, October 18th, Dr. Robinson read the following report:—

“In order to secure the entire services of an officer who should be debarred from private practice, the Urban Sanitary Authority of Dover, with the Rural Authorities of Thanet, East Ashford, Bleasdale, Eastry, Bridge, West Ashford, Elham, and Dover Rural, following the course advised by the Local Government Board, and pursued in many other parts of England, united together for the purpose of appointing a Medical Officer of Health; but, after the appointment was made, the Central Committee, composed of representatives from the several authorities concerned, ceased to act further in their collective capacity. Inasmuch, however, as for the original purpose the act of this Combination Committee required and received the confirmation of the several authorities involved in their proceedings, so a like course can probably be adopted with advantage for other purposes, if the separate authorities are pleased to do so. In the administration of the new powers conferred by the Public Act of 1872, it is not unnatural to suppose that conferences (of those who, like chairmen and other gentlemen connected with the different Boards, take the most active part in their respective capacities, and upon whom necessarily falls the greatest share of the work and responsibility) should be deemed advantageous, as such conferences would afford opportunity for mutual counsel, the free interchange of ideas and suggestions, and the promotion of a healthy stimulus to action. Chairmen, too, would, on return to the occupation of their respective posts, feel more confidence in commanding to their Boards measures for adoption, which had been carefully considered and decided upon at such representative meetings, and, on the other hand, the various Boards might reasonably be expected to take more decided and regular action from a knowledge that they were not pursuing a separate and distinct course of procedure, but one in unison with a large and important combination, acting in furtherance of a common interest in the limitation of disease and exaltation of the tone of the public health. Again, the work of the medical officer of health would be considerably facilitated, if, instead of reporting to the several authorities, he could communicate simultaneously with the representatives of all to whom he might make his reports, and from whom he could receive his instructions. In order to give effect to any proceedings, all that appears to me necessary to be done would be, that each authority represented should by resolution endorse the acts of the Combination Committee, as was the case in the appointment of the medical officer. Since the time you conferred upon me the honour of appointing me as your sanitary adviser, I have been engaged chiefly in making myself acquainted with the general leading characteristics of the districts, by personal visitation and collection of information from all available sources; without entering into details, I will merely say, that there is work, neither trivial in character nor extent, to be done, and that the object of this meeting will be attained, if the base of operations is to-day well established. From an analysis of the requirements contained in the instructions issued by the Local Government Board, it appears that there are three prominent matters which require arranging, viz., 1st, the collection and tabulation (for convenient reference) of facts; 2nd, reports on same to sanitary authority; 3rd, administration of sanitary acts. 1st, the facts to be collected are the number of deaths and causes of same, cases and causes of sickness, nuisances deemed to be prejudicial to the public health. The mortality returns can be furnished by the registrars, on forms similar to the one now produced and compiled by myself (No. 2 Form). A bill was introduced last session, providing for the supply of these returns to sanitary authorities on payment of 2d. per case, which will probably be again brought forward and passed. In the meantime, it is desirable to arrange for their present supply, and payment of the same. I should now have been in possession of the returns for the entire combined district, had not some question arisen as to the legality of payment for their supply. The Local Government Board has just issued instructions, requiring medical officers of health to tabulate and arrange on forms provided the cases and causes of sickness of the pauper and hospital population. I shall be able to compile these, if the returns on Form 3 are sent to me under instruction of the

and his name will be perpetually associated with valuable apparatus purchased by means of the "Holland Fund". Sir Henry was especially kind to young students in philosophy; and, when any one of these had been timidly giving an account of his experiments at the lecture-table of the Institution, on a Friday evening, Sir Henry would invite him to his house the next morning, listen attentively to his explanations, and encourage him to prosecute his research. Sir Henry most especially welcomed the advent of Professor Tyndall to the Institution in 1853. Great will be the number of those who will join in deep regret that society has lost a man so rich in knowledge, wisdom, and in love to his fellow-men.

THOMAS LAWRENCE PRIDIHAM, ESQ., OF BIDEFORD.

MR. Thomas Lawrence Pridham, who died lately, was born at Tops-ham in the year 1803 (his father being a surgeon of that place), and was educated at Honiton. He studied at St. Bartholomew's, passed his examinations at the College of Surgeons and the Apothecaries' Hall in 1825, and first practised at Thorverton. He afterwards removed to Bideford, where, for nearly forty years, he resided, and had the medical charge of the district nearly the whole of that time. He was a skilful surgeon and an advanced sanitarian. His essay upon the effects of imperfect drainage and impure water on epidemic diseases was well received at Birmingham in 1857 by the National Association for the Promotion of Social Science. He published a pamphlet upon the epidemic diseases which prevailed in Bideford in 1857 and 1858, and this had a great influence in stimulating the authorities to carry out the necessary improvements in the town. Among his published works are essays and papers upon asthma, convulsions, the use and abuse of stimulants in typhoid fever, mania, and gunshot wounds. He published, in 1855, a pamphlet upon the successful treatment of cholera by nitrous acid. In 1865, he was elected President of the South-Western Branch of the British Medical Association. His last work was the *Celebrities of Devon*. By the poor his name will long be remembered with affection. He was a man of quick perception and untiring energy, and had a great love for poetry and art generally. He was never happy unless doing something for his own improvement or that of others, and was always ready to give a helping hand either in sickness or trouble.

WILLIAM BLAKELY COCHRANE, M.R.C.S.

MR. COCHRANE, M.R.C.S., only son of the Rev. William Cochran, of Netherend, Brierly Hill, Staffordshire, was born at Spamount, near Belfast, on June 16th, 1848. He studied medicine at Sydenham College, Birmingham, where he took the medal in surgery, and the first prize in medicine. He was for a considerable time a resident pupil in the Birmingham General Hospital. Shortly after obtaining his diploma he was elected one of the resident surgeons to the Birmingham General Dispensary. This appointment he held for more than two years. He then became assistant to Mr. Evans, surgeon, of Tir Phil, near Cardiff. About six weeks after he had entered upon his duties, typhoid fever became epidemic in the village. In one street of about twenty houses, he had, at the same time, no fewer than fifteen cases. He exerted himself to the utmost to arrest the progress of the epidemic; but he himself very soon became its victim, and died on September 30th, at the early age of twenty-five. It will, no doubt, afford some little consolation to his friends to know that in his new home he had already gained for himself general respect and esteem. In an obituary notice *The Western Mail* states: "He had only resided in Tir Phil about three months, and in that short time secured the affection of all around him. He was ever ready, night and day, to attend to the call of the sick, and his geniality and tender-heartedness endeared him to all with whom he came into contact."

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 23rd, 1873.

Clunn, Thomas Robert Hood, Mauntell, Pembroke
Denton, Thomas John, Bridlington, Yorkshire
Ransford, Thomas Davis, Guy's Hospital
Rigby, James Arthur, Preston, Lancashire
Twort, William Henry, Tunbridge Wells

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

Hopgood, William Charles, University College

KING AND QUEEN'S COLLEGE OF PHYSICIANS IN IRELAND.—At the October examination meetings of the College, held on the 14th, 15th, and 16th of October, the following were the successful candidates for the License to practise Medicine.

Bourke, George Dean	Kelsall, Edward William
Horne, Patrick	Stoney, George Legge Buchanan
Kelly, Michael James	Wolfenden, Joseph Hines
For the Midwifery Diploma.	
Bourke, George Deane	Stoker, William
Kelly, Michael James	Stoney, George Legge Buchanan
Kelsall, Edward William	Wolfenden, Joseph Hines

MEDICAL VACANCIES.

THE following vacancies are announced:—

BAWNBURY UNION—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Ballinamore Dispensary District: £90 per annum and fees. Applications, 5th instant, to James M'Govern, Clerk of Union.

BIRMINGHAM AND MIDLAND EYE HOSPITAL—House-Surgeon: £80 per annum, apartments, board, and attendance. Applications, 15th inst., to James C. Gell, Secretary.

BIRMINGHAM AND MIDLAND FREE HOSPITAL FOR SICK CHILDREN—Acting-Physician: Acting-Surgeon; Surgeon-Dentist; Extra Acting-Physician: £60 per annum. Applications, 4th instant.

BUCKS COUNTY LUNATIC ASYLUM—Assistant Medical Officer: £100 per annum, with board and furnished apartments.

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 inst., to Thomas Arkle, Clerk to Guardia Highlaws, Morpeth.

CLIFTON UNION—Medical Officer to the Workhouse: £130 per annum.

ETON RURAL AND URBAN SANITARY DISTRICTS—Medical Officer of Health: £100 and £20 for one year. Applications, 3rd instant, to R. H. Barrett, Esq., Slough.

GREAT YARMOUTH HOSPITAL—House-Surgeon: £100 per annum, furnished apartments, etc. Applications, 19th inst., to R. K. B. Norman, Hon. Sec.

INFANT ORPHAN ASYLUM, Wanstead—Examining Surgeon.

KENT and CANTERBURY HOSPITAL—House-Surgeon: £80 per annum, board, lodging, etc. Applications, 28th inst., to Thomas Southee, Sec.

LEEDS PUBLIC DISPENSARY—Senior Resident Medical Officer: £120 first year, £140 second and subsequent years, rooms, board, etc. Applications, 6th inst., to John Horsfall, Esq., 31, Albion Street, Leeds.

MANSFIELD, SOUTHWELL, and WORKSOP Rural Sanitary District, and Mansfield Urban Sanitary District. Medical Officer of Health: £500 per annum. Applications, 1st instant, to John Whall, Clerk to the Worksop Rural Sanitary Authority.

METROPOLITAN DISPENSARY AND CHARITABLE FUND, Fore Street, Cripplegate—Physician. Applications, 15th instant, to W. H. Goodchild, Secretary.

NORTH CAMBRIDGESHIRE COTTAGE HOSPITAL—House-Surgeon: £130 per annum, furnished house, gas, and coals.

NORTHERN INFIRMARY, Inverness—House-Surgeon and Apothecary: £50 per annum, board, etc. Applications, 13th inst., to Alexander Dallas, Sec.

PLOMSEgate UNION, Suffolk—Medical Officer for the Aldeburgh District: £40 per annum.

RADCLIFFE INFIRMARY, Oxford—House-Surgeon.

RAMSGATE and ST. LAWRENCE ROYAL DISPENSARY—Resident Medical Officer: £100 per annum, furnished apartments, etc. Applications, 9th instant, to A. R. Emmerson, Secretary.

ROYAL FREE HOSPITAL—Junior House-Surgeon.

SOUTH DEVON AND EAST CORNWALL HOSPITAL, Plymouth—House-Surgeon: £80 per annum, and board. Applications, 5th instant, to Alfred Rooker, Sec.

SURREY HOUSE OF CORRECTION, Wandsworth—Surgeon: £300 per annum, unfurnished residence and garden, etc. Applications, 13th instant, to Richard Onslow, Governor.

SWANSEA RURAL SANITARY DISTRICT—Medical Officer of Health: £250 for one year, and private practice. Applications, 1st inst., to G. B. Haynes, Clerk to the Authority.

THETFORD RURAL SANITARY DISTRICT—Medical Officer of Health: £70 for one year. Applications, 3rd instant, to E. N. Cole, Clerk to the Authority.

UNST, Shetland—Parochial Medical Officer. Applications to Mr. White, Inspector of Poor.

WESTMINSTER HOSPITAL—Assistant-Surgeon.

WESTPORT UNION, co. Mayo—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Louisburgh Dispensary District: £100 per annum, fees, residence, etc. Applications, 10th instant, to Hugh Wilbraham, Esq., Boat Haven Lodge, Westport.

MR. THOMAS HARPER WHITAKER, Surgeon, Kirkby Lonsdale, took the oath, and qualified as a Magistrate of the County of Westmoreland, at the Easter Quarter Sessions held at Kendal,

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. 22nd; The Anti-Game-Law Circular, Oct. 25th; The Northern Echo, Oct. 24th; The Daily Post, Oct. 27th; The Bedfordshire Mercury, Oct. 25th; The Eastern Daily Press, Oct. 24th; The South Durham and Cleveland Mercury; The Manchester Evening News; The Australasia; The Cumberland Pacquet; The New York Evening Post; The West Country Lantern; etc.

OPERATION DAYS AT THE HOSPITALS.

- MONDAY** Metropolitan 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.—West London, 3 p.m.—National Orthopaedic, 2 p.m.
- TUESDAY** Guy'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, 2 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, 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. Dr. Routh, "A Case of Stone impacted in the Kidney"; Dr. Purcell, "A Specimen of Calculus in the Pelvis of Kidney"; Dr. Symes Thompson, "A Case of Scrofulous Kidney"; Dr. Berkart, "On so-called Bronchial Asthma".
- WEDNESDAY**.—Obstetrical Society of London, 8 p.m. Dr. Wiltsire, "On the Common Skin Diseases of Children"; Mr. Tapson, "Note on the Removal of Intrauterine Tumours"; Dr. McCallum, "A Case of Extrauterine Foetation"; and other communications.—Royal Microscopical Society, 8 p.m. Mr. S. J. McIntire, "Notes on Acarellus"; Rev. W. H. Dollinger and Dr. Drysdale, "Further Researches into the Life-History of Monads".
- THURSDAY**.—Harveian Society, 8 p.m. Mr. H. Cripps Lawrence, "A Case of Congenital Umbilical Hernia"; Dr. J. Hughlings Jackson, "On a Case of Apoplexy."

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.

MR. DAVIS's question was referred to the most eminent authority on the subject for answer. As the answer is worded, it appears to reflect on the inspector, and not on the medical officer. The appointment of detail duty is a matter of no by-law.

A MS. report of cases admitted at the Dundee Royal Infirmary has reached us, without the name of the author.

We beg to call Mr. McSweeney's attention to the constantly repeated notice that letters respecting business matters, such as the addresses of JOURNALS and advertisements, should be addressed to Mr. Fowke, the Manager, and not to the Editor of the JOURNAL.

KAPPA will find that the subject and conditions of the Hastings Prize Essay for next year were advertised last week.

TITLES IN DENTAL SURGERY.

SIR.—I trust that, for the reasons expressed in this letter, you will publish it in reply to the note of M. O. S., which appears in this week's JOURNAL. In my previous communication, I pointed out that four of the six dentists attached to the Dental Hospital of Liverpool added to their names the letters L.R.C.D.S., which do not represent any qualification known in this country. The Dental Hospital of Liverpool is a public institution; it is put forth as a School of Dental Surgery; and its staff comprises several duly qualified medical men. It is, therefore, open to professional criticism; and I am justified in addressing my letter to you rather than—as M. O. S. suggests—to the Secretary of the Hospital, who, it happens, is also one of the dentists using the letters L.R.C.D.S. Your correspondent M. O. S. is probably a member of the Odontological Society, and if he will refer to the official list, he will find that, although in every other case the titles of the members are appended to their names, the letters L.R.C.D.S. are not attached to that of one of the dentists to the Liverpool Dental Hospital who is a M.O.S. It would be well if we were informed whether this omission is a mistake, or whether L.R.C.D.S., whatever it may mean, represents a title really not recognised by the Society.

I am, etc., DENS.

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.

THE ETHICS OF MEMBERSHIP.

We entirely concur in the opinions expressed by an Associate of Thirty Years' Standing, and note with due pleasure his opinion as to "the talent, tact, and temper" displayed in dealing with the question of "Medical Answers to Lay Correspondents", and other ethical questions, which we are occasionally unwillingly compelled to notice, in the way of censuring those who openly infringe professional rules. One class of questions we now invariably refer, in the first instance, to the Councils of Branches—namely, questions of personal difference arising as to professional conduct between medical men. When both are not members of the Association, it is sometimes still our duty to give an opinion, otherwise we prefer that the decision of the Local Branch Council should be taken. This has obviously a salutary effect, and since we have adopted this rule fewer of such questions are brought before us; and this is a great relief. The question of preliminary investigation of the ethical status of members applying for admission to the Association is also an important matter. We are not inclined to think that Branch Councils show any tendency to laxity in admitting objectionable persons. When an Association is designed to include every honourable member of the profession, and already numbers nearly six thousand members, it is not likely that the initials M.B.B.A. (honourable as they are, and we hope always will be, and pleased as we are to see them so often quoted in the *Medical Directory*) should imply any special professional distinction. Whether it is more desirable to elect by ballot or by open voting is of course an open question. We have a decided preference in professional elections for open voting. No undue influence can well be pleaded as an excuse for the ballot: there are, however, the precedents of elections at clubs and at medical societies in favour of the ballot. There has certainly been no relaxation of late in stringency in the mode of election into the Association—rather the contrary. The only recently elected member, however, to whom any noticeable objection has been offered, within our knowledge, was elected upon the strength of a paper, fully and regularly signed, and in the presence of members of his district, who voted for him. "A Member's" letter shall be forwarded to the President of Council, which seems to be a more suitable destination for it than the pages of the JOURNAL.

MEDICAL PORTRAITS.

MESSRS STUART and Co., of the Fine Arts Studio, Highbury, have sent us portraits of Dr. George Burrows and Dr. George Harley. The portraits are executed on a new principle, which they, as the sole patentees, call lytho-type engraving. The portraits are excellent as likenesses, but the process appears to us defective—at least the engravings are coarse and unpleasing in effect. The price seems far too high: they are charged £1 1s. and ten shillings. They are very much inferior to the 7s. 6d. photographs of Fradelle and Marshall, or to many five shilling or shilling prints which one sees in the shops.

MR. W. MAC CORMAC.—We have received previously copies of the pamphlet entitled *A Pure Mind in a Pure Body is Health*, by Dr. Washington Evans. No doubt it is a case in which the London College of Surgeons would and ought to interfere if it could. This case of unprofessional advertising, like that of Mr. Harry Lobb, has been under the consideration of the Council, and some considerable expenses have been incurred in taking legal opinions as to the powers of the College to enforce discipline; but we believe that the opinions of counsel have not been such as to encourage stringent proceedings.

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

Mr. Callender, London; Dr. Rumsey, Cheltenham; Dr. Tilt, London; Dr. George Johnson, London; Mr. Ross, London; Dr. Hayes, Dublin; Dr. J. Ashburton Thompson, London; Dr. Parsons, Dover; Dr. C. Holman, Reigate; Dr. Lombe Atthill, Dublin; Mr. George D. Pollock, London; Dr. W. Ogle, Derby; The Secretary of the Pathological Society; Dr. Henry, Cork; Dr. Burder, Bristol; A Member; Dr. Lanchester, Croydon; Dr. Philimore, Snenton, Gloucestershire; Mr. Sympson, Lincoln; Dr. Mickle, Bow; Mr. Morris, London; Our Dublin Correspondent; Dr. T. Grainger Stewart, Edinburgh; Mr. Davis, Duffryn; An Associate; Mr. Arthur Jackson, Sheffield; Dr. Armstrong, Newcastle-upon-Tyne; Dr. Edis, London; Mr. Eastes, London; Dr. Cayley, London; The Secretary of the Royal Microscopical Society; M. Lautaud, Havre; Sir G. Duncan Gibb, Bart, London; Mr. Priestley Smith, Birmingham; Dr. G. H. Philipson, Newcastle upon-Tyne; Mr. Eassie, London; Mr. Reeves, London; Rev. W. L. Smith, Stratford-on-Avon; Mr. G. H. McSweeney, Liverpool; Dr. J. Matthews Duncan, Edinburgh; Mr. Adams, London; Mr. W. Mac Cormac, London; The Secretary of the Clinical Society; Sir Thomas Watson, Bart., London; M.D.: 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. Farquharson, London; Dr. Laidlaw, Birkenhead; Dr. Trollope, St. Leonard's-on-Sea; The Secretary of the Harveian Society; Dr. Falconer, Bath; Mr. Evans, London; A Correspondent; Mr. Wilders, Birmingham; Dr. Aitken, Rome; Mr. C. G. Wheelhouse, Leeds; Dr. Sisson, London; Dr. Hayem, Paris; Our Birmingham Correspondent; The Secretary of the Obstetrical Society; Dr. Burrows, London; Dr. H. Jackson, London; The Secretary of the South Wales Branch; Mr. King, London; Dr. Stephenson, Edinburgh; etc.