

## SELECTIONS FROM JOURNALS.

## ANATOMY.

**THE GROWTH OF BONE.**—According to Kölliker (*Würzburg. Phys.-Med. Verh.*, 1873), observations on the bones of animals fed with madder give the following results. 1. In the long bones with epiphyses at both ends, that end of the diaphysis grows more rapidly to which the epiphysis remains the longer unattached. 2. The smaller hollow lines (the os calcis, metatarsal and metacarpal bones, and phalanges) which have only one epiphysis, grow most at the end nearest to this. 3. All the free edges and epiphyses of bones of all kinds manifest a great, often remarkably developed growth (*e. g.* the crista ili, the tuber ischii, the spinous and transverse processes, the xiphoid process of the sternum, the base of the scapula, the olecranon, and the styloid process of the ulna). 4. The same is the case with certain ends of long bones which have a large cartilaginous addition, such as the ribs. 5. Short bones, with or without epiphyses, grow nearly equally on all their surfaces that are covered with cartilage and that are in contact with other bones or cartilaginous parts (the bodies of the vertebrae, bones of the tarsus and carpus, and segments of the sternum). 6. All epiphyses near joints grow most at the end next to the joint. 7. The thickness of the layer of proliferating cartilage-cells is generally in relation to the energy of the growth in length of the bone; but there are exceptions (as in the apophyses of the vertebrae).

**ON CERTAIN POINTS IN THE HISTOLOGY OF THE OMENTUM.**—According to Dr. Payne (*Microscopical Journal*, August 1873) the fenestrated portion of the human omentum consists of fibrous bands or trabeculae, in which are embedded connective-tissue corpuscles, and on which is spread a continuous and most uniform layer of endothelial plates. The best mode of examining the latter, that of staining with silver, is generally inapplicable in the human subject, in consequence of the time which elapses before examination is possible; but the structures can be very well seen either without any reagent at all or after staining with carmine. The attention of the author of the paper was first drawn to the subject on examining the omentum in persons dying of acute tuberculosis, with miliary tubercles in the peritoneum. In these cases were found, around the tubercles, epithelial cells in various phases of change: some with nuclei, some almost divided so as to show two cells, and some groups of cells, the shapes of which showed they had been produced by cell-division or multiplication. These have been described by several authors (Rindfleisch, Kundrat, etc.) as showing the origin of tubercle. There were also seen large compound cells, like "myeloid or giant cells," and small masses of adenoid tissue. Similar proliferative changes are seen in acute inflammation, and the appearances in the neighbourhood of small cancerous growths are likewise very similar. In the one case they have been recognised as a source of pus cells; in the other, of new cancerous growth. The important fact, however, is that appearances just like those described above may be found in the normal omentum, viz., evidences of cell-proliferation, many nucleated or giant cells and masses of adenoid tissue. It appears, then, that the morbid changes that accompany inflammation (as well as the formation of tubercle) are not only essentially alike, but are identical with processes that are always going on in the omentum, and not indicative of any special disease. The inflammatory changes or those of specific diseases differ from the normal chiefly in their greater abundance and activity, and are doubtless simply due to hyperæmia and consequent increased nutrition. It is probable that appearances, which are strictly normal, have sometimes been described as those of disease.

**THE ACTION OF ATROPIA, PHYSOSTIGMA, AND CURARE, ON THE COLOURLESS BLOOD CORPUSCLES.**—An account of some researches on this subject, by Dr. Osler, is given in the *Microscopical Journal* for August 1873. The reagents made use of were, a fresh solution of sulphate of atropia, a fresh solution of sulphate of physostigma, one per cent. strength, and a rather stronger solution of curare; a half per cent. saline solution was used to dissolve them. In the case of newt's or frog's blood, about four times as much reagent as blood was made use of, while for human blood the proportion of reagent to blood was 5 : 1. The specimens were examined on a Stricker's stage at a temperature of 39 degs. C. (102.2 degs. F.) The experiments were undertaken to show, if possible, in the corpuscles, the antagonism between the reagents, which had been already demonstrated by Dr. Fraser. A solution of one part of sulphate of atropia to two thousand of water allows the normal amoeboid movements of the corpuscles, while a one to three per cent. solution definitely alters the form and structure of their pro-

cesses; for it is in these that the changes noticed lie. Generally in about ten minutes the corpuscle is seen to throw out processes, bud-like, long and thin, or tuberos; the number of processes being indirectly as their size, while the outline of the corpuscles may change two or three times in a minute. Sometimes the processes are retracted, but not always, and they may remain without any change of shape, while some corpuscles in the field never alter nor move at all; all, however, retain their spherical form. The processes are mostly hyaline, but sometimes granular, and have a sharply defined line where they join the body of the corpuscle; a fusion of the granules which they contain may restore their original transparency. The phenomena described do not always occur upon the addition of the reagent, being at some times more evident than at others. In the experiments on the action of atropia, all motion ceased in the corpuscles, on the application of the reagent, sooner in the blood of the newt and frog than in that of man, and sooner also the stronger the solution used. The blood of frogs and newts poisoned with atropine showed normal amoeboid movements without any modification whatever. The action of physostigma is somewhat different. A solution of the strength of one to one thousand of water stops all motion in two hours; while one of a strength of one to three hundred of water, all but completely prevents the formation of processes, and causes the movement to be of an undulating and heaving character; a rather stronger solution produces changes the same as atropia. As a rule, fewer corpuscles are affected by a given amount of the reagent than in the case of atropia. The red corpuscles are changed by a one to two per cent. solution of the reagents; their surfaces become irregular, from involutions and cuppings of the surface; but scarcely two corpuscles are affected alike. The explanation of the changes above mentioned is difficult: that they are of a vital nature seems certain; the hyaline processes strongly reminding the observer of some of the pseudopods in Rhizopoda. The normal prolongations of a white corpuscle are formed of its hyaline substance (protoplasm), together with the granules it contains: but these resulting from the application of atropia and physostigma are free from granules: similar processes can be seen in the yolk-spherules of the Batrachia. The result of these experiments would show that no antagonism exists between atropia and physostigma, at least as far as their action on blood-corpuscles is concerned: and in proof of this, blood treated with the reagents mixed showed just the same changes as when used separately. Experiments to show the action of curare upon blood-corpuscles produced only negative results; the normal movements going on as usual: yet where a half per cent. solution was used, these ceased in ten minutes.

**DEVELOPMENT OF THE NERVE-CELLS IN THE EMBRYO.**—Dr. Alexis Lubimoff of Moscow has made, in Professor Virchow's physiological institute, a series of researches on the development of the nerve-cells in the cerebro-spinal and sympathetic systems of embryos from two and a half to seven months old. He finds that the cells of the sympathetic nervous system arrive at their full development sooner than those of the central part of the cerebro-spinal system. Further, among the sympathetic nerve-cells those are earliest developed which are connected with cerebro-spinal nerves, such as those of the thoracic ganglia and the celiac ganglion. In the cerebro-spinal system, the cells of the spinal cord (those of the anterior cornua first) are developed before those of the cerebrum and cerebellum. In an embryo about two and a half months old, the sympathetic nerve-cells of the Gasserian ganglion, of the gangliform plexus, and of the intervertebral ganglia, are well developed; they are nearly of the same size—about 0.012 millimeters in diameter. In the cerebrum, cerebellum, and spinal cord, nuclei only are found at this time. In an embryo five months old, the sympathetic nerve-cells are still better developed; those of the gangliform plexus and the intervertebral ganglia measure 0.030 millimeters in diameter, and those of the superior cervical ganglion, the thoracic ganglia, and the celiac ganglion, 0.015 millimeters. The nerve-cells of the anterior cornua of the spinal cord are well developed, and measure 0.024 millimeters; in the posterior cornua of the cord and in the grey matter of the cerebrum and cerebellum, distinctly formed cells cannot be found.—*Centralblatt für der Medicin. Wissenschaften*, September 13th.

## THERAPEUTICS.

**ATROPIA IN PHTHISICAL SWEATING.**—A notice in the *Philadelphia Medical Times* of last year, in which Dr. J. C. Wilson stated that he had successfully used sulphate of atropia in doses of one-eighth of a grain for the relief of profuse sweating in four cases of phthisis, led Dr. Fräntzel to make an extended series of researches in the Charité Hospital in Berlin on the effect of atropia in such cases.

In a paper on the subject published in Virchow's *Archiv*, vol. lxxviii, part I (*Allgemeine Medicin. Central-Zeitung*, August 2), he states that, having given it to seventy-five patients, he has arrived at the conclusion that it is a remedy which he can confidently recommend not only in phthisical sweating, but also in that which attends other diseased conditions, such as acute articular rheumatism and convalescence from trichinosis. Among the 75 patients were 15 cases of more or less recent cheesy pneumonia, of whom all had more or less fever with night-sweats; 48 of distinct pulmonary phthisis, of whom 42 had hectic; 1 of acute articular rheumatism with high fever, 2 of ulcerative endocarditis, and 2 of trichinosis. In the first 15 patients, the sweating was in 6 completely arrested, in 7 much diminished; in 2 there was no change. In the 48 phthisical cases, the medicine had no effect in 5, in 21 the sweating was remarkably abated, and in 22 it disappeared entirely. Several of the patients in whom the atropine failed were near death when it was given. In the eight cases of rheumatism, the atropia gave permanent relief in 5, in 2 it produced a marked diminution of the sweats, in 1 it was useless. In one of the cases of ulcerative endocarditis, it proved useful; not so in the other. In the two cases of trichinosis, the cessation of the acute stage of the disease and of the hectic fever attending it was followed, without any rise of temperature, by profuse night-sweats. Sulphate of atropia, in doses of a milligramme (.015 grain), was given two hours before the expected access of sweating daily, for five days in succession in one case, and for three days in the other; the result being, that the sweats entirely disappeared from the first evening when it was given. In one of the cases of rheumatism, in a man aged 32, nearly all the large joints of the upper and lower limbs had been severely affected during five days; the patient was covered with sudamina, and, when seen by Dr. Fräntzel, was bathed in sweat. A milligramme of sulphate of atropia was given immediately; and very soon there was an abatement of the sweating, which in two hours disappeared. It returned in the night, but ceased the next forenoon after the administration of a similar dose. The atropia was thenceforth given regularly night and morning, with the effect of completely preventing the sweating. The fever lasted fourteen days. In another case of acute articular rheumatism, atropia was given, first in doses of one, then of two milligrammes, with a similar result; and it is remarked that, on two days in the course of the disease on which it was omitted, the sweating returned. The atropia was given according to the following formula: Sulphate of atropia, 6 milligrammes (9-100ths of a grain); extract of gentian, sufficient to make ten pills. Dr. Fräntzel has never given larger doses than 1.2 milligrammes (a little less than one-fiftieth of a grain), from fear of producing toxic symptoms. Even doses of 0.6 and 1.2 milligrammes, though unattended with any mischief, have produced slight symptoms of poisoning. In not a few cases, after taking the medicine, the patients felt itching in the neck, which, however, disappeared in one or two hours; the pupils not unfrequently acted slowly, and were sometimes dilated; and in some cases there were muscæ volitantes. The atropia had to be stopped in four cases on account of diarrhoea; that this was due to the medicine, was proved by the fact that it ceased when the atropia was discontinued, and reappeared when it was resumed. What the physiological action of atropia is in arresting perspiration, Dr. Fräntzel says it is difficult to determine. He is, however, inclined to believe that the profuse sweats arise from relaxation of the walls of the vessels supplied to the sudoriparous glands; and he remarks that the researches of Meuriot, Fleming, Jones, Hayden, and Brown-Séquard, have shown that atropia contracts the smallest vessels. To this are to be ascribed both the diminution of sweat and the dryness of the mouth and skin observed in cases of poisoning with belladonna and with atropia.

**BROMIDE OF POTASSIUM IN CHOLERA.**—Dr. William Pepper (*Philadelphia Medical Times*, July 12th, 1873) recommends the use of bromide of potassium in the collapse of cholera. He advises it given in doses of forty-five grains in three ounces of water every twenty minutes, by mouth or injection. This drug, he thinks, has a wonderful power in quieting irritation of the sympathetic nerve, which irritation he regards as the source of the symptoms of collapse.

**ATROPIA IN CHOLERA.**—Dr. Hodgen (*St. Louis Medical Journal*) states a plan which he had used in treating cholera in 1866. He was so encouraged by its results, as to present it to the St. Louis Medical Society as worthy of their consideration. He injected subcutaneously, during the stage of collapse, from a sixtieth to a thirtieth of a grain of sulphate of atropia. In addition, he injected salt water into the bowels. The action of atropia in paralysing the peripheral extremities of the spinal nerves, in stimulating the contraction of the arterioles, and in increasing the beats of the heart, is well known.

## BRITISH MEDICAL ASSOCIATION: SUBSCRIPTIONS FOR 1873.

SUBSCRIPTIONS to the Association for 1873 became due on January 1st. Members of Branches are requested to pay the same to their respective Secretaries. Members of the Association not belonging to Branches are requested to forward their remittances to Mr. FRANCIS FOWKE, General Secretary, 37, Great Queen Street, London, W.C.

## BRITISH MEDICAL JOURNAL.

SATURDAY, NOVEMBER 29TH, 1873.

### A LIBERAL EDUCATION.

THE addresses delivered by Mr. Brudenell Carter and Mr. Henry Morris, at the opening of their respective medical schools, have received the well merited honour of a reprint, and may be commended to the notice of the enlarged circle of readers. The training of the mind in the study of medicine is, in effect, the subject of both of them. That is a subject which affords to an accomplished rhetorician ample scope for his powers, and we may say at once that, in so far as these addresses are hortatory, they will excite deserved admiration and approval. No sounder advice can be given to a student of medicine than to be told to cultivate the faculty of observation and to discriminate carefully between facts and inferences; to learn to suspend his judgment; to maintain a grasp of principles, so as apply them in any given case; and, in general, to emancipate himself from the dominion of rule of thumb. In this spirit, students are to bring their intellectual powers to bear on the subject-matter of their profession; and it is reassuring to find that Mr. Carter and Mr. Morris were able to congratulate their audiences on their ability, acquired from preliminary studies, to approach the study of medicine in the scientific spirit. Thanks to "a liberal education," says Mr. Carter, you come to the study of medicine with well disciplined minds. It was a happy day for medicine, thinks Mr. Morris, when "a mixed classical and mathematical education" was made the portal to the profession.

In using the expression "a liberal education," Mr. Carter no doubt had in his mind those modernised school studies with which the name has recently come to be associated. After much controversy and much eloquent declamation, we have at length become more or less familiar with the notion that a liberal education is something more than the "mixed classical and mathematical" training of former days. We have even got the length of a series of science primers adapted for the discipline of juvenile intellects. But we doubt very much if the time has already come to congratulate the new generation of students on being in possession of the full fruits of those reformed school duties. Mr. Carter, indeed, did not pass from the subject without expressing politely certain misgivings that he felt as to those well disciplined faculties that were to be applied to the study of medicine. Let students examine themselves, and if, perchance, they were still somewhat deficient in the faculty—for example, of accurate observation—let them make use of the opportunities that were still open to them, and cultivate that faculty in their studies of botany and osteology, and even in the study of diseases of the skin. That is no doubt as good advice as an orator at the opening of the medical session could give.

By means of those preliminary studies that are in this country still retained in the medical curriculum, a student may acquire that scientific training of his faculties which a too exclusive devotion to the humanities had left him unprovided with, and he may consider himself fortunate if he profit by this opportunity. Nay, a student may still be called fortunate if, at the end of all his studies, skin-diseases and all the rest, he have acquired even a modicum of those desirable qualities of the scientific mind which Mr. Carter supposes him to have started with. With a very large number of students, even this consummation is never reached; the shortest road is taken to acquire so much pro-

## MEMORIAL TO THE LATE DR. JOHN MURRAY.

THE following gentlemen are the Committee for instituting Medical foundations in the University of Aberdeen, in memory of Dr. John Murray: William Leslie, Esq., Lord Provost of Aberdeen; the Very Reverend P. C. Campbell, D.D., Principal of the University of Aberdeen; W. D. Fordyce, Esq., of Brucklay, M.P. for East Aberdeenshire; W. McCombie, Esq., of Tillyford, M.P. for West Aberdeenshire; J. F. Leith, Esq., Q.C., M.P. for Aberdeen; John Webster, Esq., Advocate, Assessor to the University Court; A. Walker, Esq., Dean of Guild; J. Macrobain, M.D., Dean of the Faculty of Medicine, University of Aberdeen; W. Pirrie, M.D., Professor of Surgery; J. Nicol, Esq., Professor of Natural History; G. Ogilvie, M.D., Professor of the Institutes of Medicine; J. S. Brazier, Esq., Professor of Chemistry; J. Struthers, M.D., Professor of Anatomy; A. Harvey, M.D., Professor of Materia Medica; F. Ogston, M.D., Professor of Medical Jurisprudence; G. Dickie, M.D., Professor of Botany; J. W. F. Smith Shand, M.D., Physician to the Royal Infirmary, Aberdeen; R. Beveridge, M.B., ditto; A. Fraser, M.D., ditto; A. Ogston, M.D., Surgeon to the Royal Infirmary; A. D. Davidson, M.D., Ophthalmic Surgeon to the Infirmary; John Urquhart, M.D., Aberdeen; Archibald Reith, M.D., Aberdeen; Rev. A. Anderson, Old Aberdeen; James B. Nicolson, Esq., of Glenbervie; W. Littlejohn, Esq., Aberdeen Town and County Bank; W. McCombie, Esq., of Easterslane; R. Lumsden, Esq., North of Scotland Bank; J. F. White, Esq., merchant, Aberdeen; W. Yeats, Esq., of Anquharney; F. Ogston, jun., M.B., Aberdeen; F. M. Moir, M.B., Aberdeen; J. B. McCombie, advocate, Aberdeen, treasurer; Patrick Blaikie Smith, M.B., Aberdeen, secretary. The following are the subscriptions, in addition to those already intimated:

£ s. d.	£ s. d.
Andrew Murray, Esq., advocate ..... 105 0 0	Dr. J. W. F. Smith Shand ..... 3 3 0
J. M. McCombie, Esq., advocate ..... 10 10 0	Dr. Ogilvie ..... 3 3 0
Dr. Macrobain ..... 5 5 0	Dr. Struthers ..... 3 3 0
W. Littlejohn, Esq. .... 5 5 0	R. Lumsden, Esq. .... 2 2 0
A. Walker, Esq., Dean of Guild ..... 5 5 0	Dr. P. Blaikie Smith ... 2 2 0
W. Yeats, Esq., Anquharney ..... 5 5 0	Dr. Urquhart ..... 2 2 0
Dr. Reith ..... 5 5 0	Dr. Angus Fraser ..... 2 2 0
Alexander Watt, Esq. .... 5 5 0	J. S. Brazier, Esq. .... 2 2 0
Dr. F. Ogston ..... 5 5 0	Dr. Pirrie ..... 2 2 0
James Nicol, Esq. .... 3 3 0	John Manson, Esq. .... 2 2 0
Dr. Harvey ..... 3 3 0	Dr. Patrick Manson ... 2 2 0
	Dr. Beveridge ..... 2 2 0
	J. W. Langmore, Esq. ... 1 1 0

The following subscriptions to the London Memorial have been received and promised since the publication of the former lists.

£ s. d.	£ s. d.
Senior Students, Mid- dlesex Hospital ..... 2 12 6	Jas. Worthington, Esq. .... 1 1 0
Dr. Henry Kayner ..... 2 2 0	Mrs. Heckstall Smith... 1 1 0
Sir T. Watson, Bt., M.D. .... 2 2 0	Dr. J. C. Steele ..... 1 1 0
Miss Cath. Jane Wood. .... 2 2 0	Dr. Macpherson ..... 1 1 0
George Critchett, Esq. .... 2 2 0	Claude Rogers, Esq. ... 1 1 0
James S. Turner, Esq. .... 2 2 0	G. Anderson Critchett, Esq. .... 1 1 0
Dr. W. R. Sanders ..... 2 2 0	Wm. Mac Cormac, Esq. ... 1 1 0
G. Lawson, Esq. .... 2 2 0	Dr. T. Henry Green ... 1 1 0
Dr. Alexander Steven. .... 1 1 0	H. Harris, Esq. .... 1 1 0
Horace Basan, Esq. .... 1 1 0	Miss Johnston ..... 1 1 0
Wm. Johnstone Smith, Esq. .... 1 1 0	W. Stamford, Esq. .... 1 1 0
II. Royes Bell, Esq. .... 1 1 0	John R. Morrison, Esq. ... 0 10 6
	C. J. Pyle, Esq. .... 0 10 6

Those gentlemen who have already promised, but have not yet sent in their subscriptions, will oblige by doing so shortly, as it is proposed to close the list before Christmas.

Subscriptions for the Scholarship or Annual Prize will still be received by the London Treasurer and Secretaries; or they may be forwarded direct to James B. McCombie, Esq., Advocate, 103, Union Street, Aberdeen, N.B., who is the Local Treasurer.

## ASSOCIATION INTELLIGENCE.

## SOUTH-EASTERN BRANCH: WEST KENT DISTRICT.

THE second meeting of the Session will be held at the General Hospital, Maidstone, on Friday, December 5th, at 5 P.M.; GEORGE HENRY FURBER, Esq., in the Chair.

Dinner will be provided at the Mitre Hotel, at 7 P.M.

Papers have been promised by John M. Burton, Esq., on Aneurism and on Empyema; by Matthew A. Adams, Esq., on Dewar's and McKendrick's Experiments Demonstrating the Correlation of the Function of the Retina and Galvanic Electricity; by Dr. Monckton, Cases and Commentaries; by William Hoar, Esq., Cases and Commentaries.

A proposition will be made to hold an united meeting of the West Kent and East Sussex Districts, annually, at Tunbridge Wells.

FREDERICK JAMES BROWN, M.D., *Honorary Secretary*.  
Rochester, November 17th, 1873.

## MIDLAND BRANCH: AUTUMNAL MEETING.

THE autumnal meeting of this Branch was held at Leicester, on Tuesday, November 11th; the President, H. LANKESTER, Esq., in the Chair.

*Papers.*—The following papers were read and discussed.

1. The President. Notes of an interesting and peculiar case of Rheumatism.

2. Dr. Barclay. On Cases of Diabetes treated successfully by Arsenic.

3. Mr. Marriott. On a case of Fibroid Disease of the Uterus interfering with Parturition.

4. Mr. Denton. A Case of Uterine Hæmorrhage.

5. Dr. Blunt. Notes on Cases of Small-pox treated by Tepid Baths for the reduction of high temperature.

After the meeting, the members partook of supper at the President's home, and spent a very pleasant and agreeable evening.

## READING BRANCH: ANNUAL MEETING.

THE eighteenth annual meeting of the Reading Branch of the British Medical Association was held on Wednesday, October 8th, 1873; present, Dr. PLAYNE, President, in the Chair, and fifteen members. The President delivered a very able address.

*Officers.*—The following officers were elected. *President-elect*: O. C. Maurice, Esq. *Council*: I. Harrinson, Esq.; G. May, jun., Esq.; R. C. Shettle, M.D.; T. L. Walford, Esq.; E. Wells, M.D.; R. T. Woodhouse, M.D.; J. W. Workman, Esq.; W. B. Young, Esq. *Secretary*: R. C. Shettle, M.D.

Dr. Bateman, M.B. Lond., was elected a member of the Branch.

## SOUTH-EASTERN BRANCH: EAST KENT DISTRICT.

THE fiftieth meeting was held at the Fountain Hotel, Canterbury, on Thursday, November 6th; Mr. H. G. SADLER in the Chair. Eighteen members and visitors were present.

*The Secretary.*—Dr. PARSONS, the Honorary Secretary, tendered his resignation. He regretted being obliged to sever his connection with the district; but, having been elected Secretary to the South-Eastern Branch, no other course was open to him.

It was proposed by Mr. REID, seconded by Dr. KERSEY—"That the members of the East Kent District of the British Medical Association, as represented by this meeting, desire to tender to Dr. Parsons their most cordial thanks for the kind and zealous services he has so persistently rendered to the Society, and which have so materially promoted the scientific character and pleasure of the meetings. They cannot but regret the loss of these services, but at the same time they desire to congratulate Dr. Parsons, that, in consequence of the extensive appreciation of them by other members of the South-Eastern Branch, he has been elected to a wider and more useful sphere of action, where he will enjoy a still larger share of the confidence of his medical brethren."

This was carried unanimously.

It was proposed by Mr. RIGDEN, seconded by Dr. LOCHÉ, and carried unanimously—"That Mr. Thurston of Ashford be elected Honorary Secretary of the East Kent District, in the room of Dr. Parsons."

*Communications.*—I. Dr. KERSEY exhibited a new-born infant pre-

senting features of Insufficient and Irregular Development of the Upper Extremities.

2. Mr. CLEMENT WALTER (Dover) related a case of Ligature of the External Iliac Artery for Femoral Aneurism. The patient was a dissipated man, aged 42. The aneurism was distinctly produced by violent exertion. Proximal and distal pressure by the tourniquet were tried, but both had to be relinquished; flexion also had a good trial, at first with apparent success, but after six weeks it was found necessary to ligature the external iliac artery, as hæmorrhage was hourly expected. All did well till the third day, when symptoms of gangrene supervened, and the patient sank on the following day. At the *post mortem* examination, the kidneys and liver were both found to be enlarged and nodulated. The author considered the want of success in this case to be due to delay in the operation, and considered that the case forced upon him a strong hint as to the discretionary use of conservative surgery.

3. Mr. RIDGEN brought forward some statistics to prove the advantage of the Obstetric Forceps in some cases in which they are not considered absolutely necessary. This produced a warm discussion, and the subject was ultimately adjourned to a future meeting.

4. Dr. ROBINSON, the Medical Officer for East Kent, read a paper on the Carriers of the Contagium of Enteric Fever.

#### SHROPSHIRE SCIENTIFIC BRANCH: ANNUAL MEETING.

THE annual meeting of this Branch was held in the Natural History and Antiquarian Museum, Shrewsbury, on Wednesday, October 8th; GREVILLE THURSFIELD, M.D., President, in the Chair.

*Papers.*—Several papers were received.

Dr. NEALOR THURSFIELD read a paper on the question "Does Diphtheria originate *per se*, or does it depend on deficient sanitary arrangements?" A very animated discussion, which lasted the greater part of an hour, arose, after reading this paper, and much useful information was elicited.

*Officers, etc.*—The Council for the Branch and the Representatives on the General Council were then elected. Mr. William Eddowes, jun., was unanimously elected Vice-President for the ensuing year. Mr. J. D. Harries was re-elected the Representative for this Branch on the Parliamentary Committee. Mr. Samuel Wood, F.S.A., was re-elected Secretary.

*Four New Members* were added to the Branch.

After a vote of thanks to the President and retiring President, the members adjourned to the George Hotel, where thirty-five dined.

#### BIRMINGHAM AND MIDLAND COUNTIES BRANCH: MICROSCOPICAL SECTION.

THE first meeting of the session took place in Queen's College, Birmingham, on November 11th; Dr. WADE in the Chair.

*Ossous Spicular Tumour of the Brain.*—Dr. HINDS read a paper on osseous cerebral tumours, which he believed to be very rare. One case he had found recorded in Reynolds's *System of Medicine* as having occurred to Dr. Bistowe. This tumour occupied the position of the infundibulum and corpora albicantia. It was of the size of a horse-bean, and presented the characters of true osseous tissue, with perfect lacunæ and canaliculi. The small tumour of bone found by Dr. Hinds was loosely connected at one end with the internal surface of a thickened portion of the cerebral membranes. The membranes at this part were matted together by chronic or subacute inflammation. The tumour was about four-tenths of an inch in length, and its free end was in contact with the brain at the vertex and at the longitudinal fissure. The subject whence it was taken had been a confirmed drinker, and was an epileptic of seventeen years' duration. A very curious epileptic he was; for, when the attacks occurred in the street, he had a habit of at once undressing on the spot, in order to go to bed so soon as the paroxysm subsided. He did the same thing when he happened to be at the house of any friend. He died of coma and convulsions in June last. From the tumour a thin section was made and exhibited, and it showed with great distinctness the Haversian canals, as well as the lacunæ and canaliculi. Dr. Hinds discussed the relation of these growths with the epileptic habit, and mentioned a case of death from epilepsy in a young girl of twenty, in whom a bony process projected from the upper border of the petrous portion of the temporal bone. He referred also to a case of depressed bone, mentioned in the BRITISH MEDICAL JOURNAL of November 8th, as being the cause of epilepsy. The case appears to have occurred to Dr. Quinlan of St. Vincent's Hospital, Dublin, and it was proposed to trephine the skull. Dr. Hinds referred to the process of calcification in such unusual situations

as the brain, and considered that the intermediary process of cartilagification must be assumed to be in all probability absent in such cases.

Dr. HINDS also exhibited to the members several beautiful transparent sections of some of the Viscera.

*Tumour of the Breast.*—Mr. LAWSON TAIT showed sections of a tumour of the breast which he had removed from a patient under the care of Dr. Norris, and which had been diagnosed as non-malignant, and was probably proliferating adenoma. The microscopic examination of it confirmed the diagnosis, for it was seen to consist of abortive gland-tissue—loculi which were sections of imperfect tubules lined with epithelium.

Mr. TAIT showed also a series of Gynæcological Preparations for the Microscope made by Dr. Otto Barth of Leipzig, which were of extreme beauty and interest.

#### SOUTH-EASTERN BRANCH: EAST SUSSEX DISTRICT MEETINGS.

THE November meeting was held at the White Hart Hotel, Lewes, on Friday, November 14th; R. GRAVELY, Esq., of Newick, in the Chair. Eighteen members and three visitors were present.

After lunch, hospitably provided by the Chairman, had been partaken of, the treasures of the Museum of the Sussex Archaeological Society at the Castle were duly inspected.

*Papers.*—The following were read.

1. Dr. H. MOON (Brighton) read a paper on Typhoid, or, as he preferred to call it, Pythogenic Fever. The paper was founded on seventy cases of the disease under Dr. Moon's care during the last four years in the Brighton Hospital; and, besides alluding to the origin, progress, diagnosis, and general features of the disease in question, contained some valuable hints on prophylaxis and treatment.

2. Mr. R. GRAVELY (Chairman) detailed the particulars of a Case of Stricture successfully treated by Holt's Method. A discussion followed, shared in by Mr. W. Harris of Worthing and others.

3. Dr. WITHERS MOORE related the history of a case now under his care at the Brighton Hospital, in which the Urinary Secretion presented most anomalous characteristics.

*New Members.*—The following were nominated for membership of the Association and of this Branch: J. G. Braden, Esq., Lewes; D. J. Sherrard, Esq., Hurst Green; S. Brown, Esq., Fletching; G. Lucas, Esq., Uckfield; H. J. Hall, Esq., Mayfield.

The Dinner took place at the White Hart, under the presidency of Mr. Gravely, twenty being present.

*Next Meeting.*—It was decided to hold the next meeting at Tunbridge Wells, in March 1874; Dr. Wardell to be invited to take the Chair.

#### BIRMINGHAM AND MIDLAND COUNTIES BRANCH: GENERAL MEETING.

THE second general meeting of the present session was held at the Midland Institute, Birmingham, on Thursday, November 13th, at 3 P.M.; present, FURNEAUX JORDAN, Esq., President, in the Chair, and forty-five members.

*New Members.*—The following members of the Association were elected members of the Branch: Dr. Gould (Halesowen), Dr. Somerville (Bloxwich), and Mr. Herbert Page (Birmingham).

*Medical Education.*—It was proposed by Mr. OAKES, seconded by Dr. FOWLER BODINGTON, and resolved—"That a Committee be appointed to consider the subject of Medical Education, especially with reference to present Parliamentary legislation, and that the Committee be requested to present a report during the present session." The nomination of the committee was postponed to the next meeting.

*Hour of Meeting.*—It was carried that for the future the Branch meeting be held at 3.30 P.M. instead of 3 P.M.

*Communications.*—The following communications were made.

1. *Pseudo-hypertrophic Paralysis (Duchenne's Paralysis).*—Dr. B. FOSTER brought before the Branch a boy, aged 13, in the third stage of this affection. Early in 1869, he was exhibited at a meeting of the Pathological Section of the Branch, and was at that time a remarkably typical example of the second stage of the disease. His calves and the muscles of his thighs and buttocks were then enormously large, while their muscular power was in striking contrast with their bulk; the boy being unable to walk more than a few yards, and almost unable to raise himself from the ground when on his back. During the four years since, the enlarged muscles have all wasted, the gastrocnemii

alone retaining a little of their former development. The boy is now perfectly unable to stand, and can only sit or lie; the upper extremities, which are greatly wasted, can be but slightly raised from the bed, and he finds the greatest difficulty in conveying his food to his mouth. The extensor surfaces of the limbs have generally suffered less loss of bulk. At present, the boy's position is generally sitting with the legs flexed on the thighs, and the thighs flexed on the trunk. There is most marked talipes equino-varus. The limbs cannot be straightened. The surface of the lower extremities is remarkably mottled and dusky from congestion. Dr. Foster, after speaking of the natural history of the disease as illustrated by this case, pointed out that even now the temperature of the surface of the lower extremities over the affected muscles was higher than normal, as had also been observed four years ago when the boy was in the second stage of the disease. These observations, originally made by Griesinger, Dr. Foster had confirmed in 1869. The electro-muscular contractility was still retained.

2. *Aveling's Midwifery Forceps*.—Dr. BASSETT exhibited the midwifery forceps recently designed by Dr. Aveling, the peculiarity of which is that the handles are curved instead of straight. It was hoped that this would supply an increased tractive power, a want which every one accustomed to the use of the forceps had felt. He also showed the transfusion-apparatus of Dr. Aveling, which had been pronounced to be the best instrument yet invented for this operation.

3. *Sponge-Tents*.—Mr. LAWSON TAIT showed some sponge-tents charged with a 5 per cent. solution of oil of cloves, by which addition they are completely prevented from becoming putrid after remaining in the uterus for twenty-four hours. Mr. Tait stated that he had recently had a fatal case of septic peritonitis from the use of a sponge-tent; and he had little doubt that such accidents were more common than was believed. He had not found that tents charged with any other disinfectant remained free from putridity. He had no doubt that tents which did not become stinking would be safer for the patients, and certainly were more agreeable to the practitioner. The tents were made, according to his formula, by Messrs. Krohne and Sesemann.

4. *Amputation at the Ankle*.—Mr. BARTLETT exhibited a cast, and also the living specimen, of a stump after an amputation at the ankle by Jules Roux's operation. Mr. Bartlett called attention to the advantages of the operation, and stated that an experience of five cases justified him in stating that the stumps were quite as useful and satisfactory as after Syme's amputation.

5. *Post Partum Hemorrhage*.—Dr. BASSETT read a paper on *post partum hæmorrhage*, in which he dwelt upon the causes, prevention, and treatment of this formidable complication of labour.

6. *Apoplectic Effusion into Placenta*.—Mr. TAIT also showed the placenta from a lady whom he had seen in consultation with Dr. Haynes of Malvern. It was an instance of apoplectic effusion into the placenta, resulting in death of the child and its premature birth. In that patient's case, it had occurred many times at a late period of gestation, and he contrasted it with another specimen, which he also showed, of a similar occurrence at a very early period.

## REPORTS OF SOCIETIES.

### OBSTETRICAL SOCIETY OF LONDON.

NOVEMBER 5TH, 1873.

E. J. TILT, M.D., President, in the Chair.

*Malignant Sarcoma*.—Dr. PLAYFAIR exhibited a specimen of malignant sarcoma, apparently originating in the right broad ligament, but which at death nearly filled the whole abdominal cavity. There was great difficulty and obscurity of diagnosis during pregnancy. The extremely rapid growth of the tumour after delivery pointed to the probability of it having been kept in abeyance, as it were, possibly by the presence of the gravid uterus.

*Necrosis of the Pelvic Bones*.—Dr. PLAYFAIR exhibited a specimen of necrosis of the pubic bones following delivery, which, he said, was a form of puerperal disease of extreme rarity. Three weeks after labour, an abscess burst at the anterior portion of the left labium and a highly offensive discharge came from the vagina. The upper part of the thigh became œdematous. An incision was made, from which bad smelling pus was evacuated. The patient soon after died from exhaustion. The ossa pubis were found necrosed, and the symphysis destroyed. Dr. Playfair thought the disease originated in some obscure form of septicæmia rather than in a purely mechanical cause. There was no history of a blow having been received by the patient.

*Loop-Saw*.—Dr. AVELING exhibited a new instrument which he called a "loop-saw," which he believed might be used with ease and

advantage in some cases where the *écraseur* was at present employed. It consisted of two tubes with pulleys at the upper end, over which a loop of whipcord or chain worked. The two tubes were united by a hinge at the handle, and the tumour was divided by drawing alternately upon the ends of the cord. As the loop divided the tissues from below upward, there was no passing of the cord over the tumour as was the case with the *écraseur*.

*Note on the Cure of Flexions of the Uterus by Flexible Stems*.—Dr. C. E. SQUAREY said that he had been induced to try the curative effects of flexible stems, in consequence of his belief that inflammation was sometimes set up by stems which were rigid. His stem speedily cured pain resulting from the retention of the catamenial discharge, and the removal of this pain had a curative effect upon flexions. There seemed a natural tendency to recovery when the most troublesome symptoms were removed.—Dr. AVELING stated that he had exhibited to the Society, in 1866, a flexible intra-uterine stem of coiled wire, and suggested that Dr. Squarey's instrument might be improved by the introduction of a coil inside the india-rubber. It would then have the power of straightening in the uterus, which it at present lacked.—Dr. ROGERS and Dr. GODSON had found great use from the employment of flexible stems.—Dr. PLAYFAIR could not understand how a stem which adapted itself to flexed conditions of the uterus could have a curative effect.

*Case of Spontaneous Salivation Associated with Pregnancy*.—Dr. BLACK communicated for Dr. A. FARRE the case of a mother of four children, pregnant for the fifth time, who suffered from such excessive salivation that it was considered necessary to propose the induction of premature labour. The symptoms, however, suddenly abated upon the occurrence of quickening, and the patient speedily regained strength and required no further medical treatment.

Dr. ALFRED WILTSHIRE read a paper on the Common Skin-diseases of Children.

### MEDICO-CHIRURGICAL SOCIETY OF EDINBURGH.

NOVEMBER 5TH, 1873.

P. D. HANDYSIDE, M.D., President, in the Chair.

*Glioma of the Eyeball*.—Dr. ARGYLL ROBERTSON showed a specimen. The patient was eighteen months old, and, with the exception of a yellow reflection from the pupil soon after birth observed by the mother, nothing was noticed till two months before Dr. Robertson saw the case, when the eye was inflamed and a small projection was noticed at the inferior margin of the cornea. This projection rapidly enlarged; the ocular tension was increased; the pupil was occluded with lymph, and was pushed forwards so as almost to touch the inner surface of the cornea. Enucleation was at once recommended and performed. During the operation, the nerve appeared affected, and was excised quite up to the entrance of the orbit. The patient was seen two months afterwards, and a tumour, evidently a return of the disease, was already visible. The tumour had the structure of a glioma, and numerous particles of calcareous deposit organised its centre. This calcareous degeneration is very rare in so young a subject.

*Exostosis of the Great Toe*.—Mr. JOSEPH BELL showed a specimen of exostosis of the proximal phalanx of the great toe, as large as a small apple, which he had removed by an operation which he had not seen described in any surgical work. It was of four years' standing, but had grown rapidly of late; its neck involved the whole outer side of the phalanx, including both its articulating ends; therefore, instead of merely dividing the neck, Mr. Bell made a longitudinal section of the bone and both its joints, leaving the distal phalanx attached. After three weeks, the movements of both joints were perfect, and the wound had nearly healed.

*Pneumonia in Children*.—Dr. STEPHENSON read a paper on pneumonia as observed in children. The author regarded the clinical chart, *i.e.* the record of temperature, pulse, and respiration, as the true representative of the disease and of higher value, practically and scientifically, than the physical signs. By its means, the different forms of pneumonia could be more readily differentiated, and diagnosis was greatly facilitated. The latter point was of special value in children from the greater frequency of the cases where the physical signs remained latent for a longer period than was usual in adults; the occurrence of cases where the physical signs were very slight, and the greater frequency of the affection attacking and limited to the apex. The acute primary pneumonia was only dealt with in the present paper. It presented in children the same typical chart as in the adult. Cases, the author believed, frequently occurred in which there was absence of chest-symptoms till late in the disease, and such were often mistaken

ment in the neighbourhood of London, where he resided for upwards of eleven years until his decease. Mr. Watts, who had been in failing health for some years prior to his death, was on November 10th seized with apoplexy, and died on the 14th at West Hackney.

#### JAMES MAC MUNN, L.R.C.S.I., WOLVERHAMPTON.

MR. MAC MUNN died at Wolverhampton, on November 16th, aged 62 years. He was born in the county Sligo, Ireland, and at an early age was apprenticed to Mr. Macnamara, father of the present Dr. Rawdon Macnamara. He studied at the Medical School of the Dublin University, and obtained the license of the Royal College of Surgeons, Ireland, 1832. Three years of his student-life were spent as resident surgical pupil in the Meath Hospital, where Drs. Graves and Stokes were then physicians, and the former being at the zenith of his fame, and the surgeons were no less distinguished. The year after his degree was taken, he was elected house-surgeon and pathologist to the hospital. In 1832 he came to Brewood, where he practised for ten years. He then removed to Wolverhampton, and shortly after was unanimously elected honorary surgeon to the South Staffordshire General Hospital, a post which he held for nine years. He was also honorary surgeon to the Wolverhampton Orphan Asylum, up to the time of his death. He was a successful operator, a sound practitioner, and a benevolent and generous friend. He had a high sense of the importance of medical ethics, and never wilfully injured a brother practitioner.

## MEDICAL NEWS.

### DR. CHURCHILL'S SECRET REMEDIES, AND THE PROPOSED COMPANY TO PURCHASE THEM.

It is clear, from the generally angry tone of a letter which we have received from Mr. Bowes, that the proposal to form a company to purchase from Dr. Churchill some secret remedy or remedies, described as his "inhalants," is seriously put forward. Dr. Churchill, the prospectus states, "has asked £20000 cash for the remedy, if it be given to the public absolutely; or, in case a company is formed for the purchase of the remedy and sale of the medicine, he is willing to take £5000 in paid-up shares and £15000 in cash." Mr. Bowes, a gentleman of great respectability and of obviously good motives, assures us that he and others have received great benefit from the "inhalants," and he thinks that our recent observations (BRITISH MEDICAL JOURNAL, November 22nd, page 621) involve "terrorism" and "unwarrantable interference." We are content to request that it may be reperused. We have only to add, that we learn with grief and surprise that any legally qualified medical practitioner is willing to become the proprietor of a secret remedy for disease, and to be a party to the formation of a company which proposes to vend it. To do the first, is to violate the Hippocratic oath; to do the second, is to incur the most fearful responsibilities of injuring ignorant purchasers. Dr. Churchill must know so well in what light the conduct of a medical man who is a proprietor and vendor of secret remedies is regarded by his profession, that it is unnecessary that we should re-state it. Thus much for Dr. Churchill's part of the affair. For that of Mr. Bowes and his copartners, who are, no doubt, as respectable and well-intentioned as he states, we have only to say that, if they choose to throw away any sum of money in the purchase of a secret remedy and to make known its composition and uses, there is no one who will claim any right to interfere with them. They run a great risk, according to the past experience of secret remedies, of egregiously wasting their money; but they may possibly contribute to useful knowledge. If they place themselves in the position of purchasers and vendors of a secret remedy, they place themselves in a very different position. They enter into a very unsatisfactory category of public traders; and we must tell them that, in our profession, their trade is a very objectionable one, and one which almost inevitably inflicts considerable public injury, no one can say how much. It might be well if Mr. Bowes, whose motives we believe to be really honourable and generous, would ponder over this aspect of the question and bring it under the consideration of his copartners in the business.

**APOTHECARIES' HALL.**—The following gentleman passed his examination in the science and practice of medicine, and received a certificate to practise, on Thursday, November 20th, 1873.

Verden, Henry Walter, Manchester

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

Hay, William Alfred Edward, Guy's Hospital  
Richardson, Joseph Berridge, Guy's Hospital

## MEDICAL VACANCIES.

The following vacancies are announced:—  
**AMPTHILL RURAL SANITARY DISTRICT**—Medical Officer of Health: £70 for one year. Applications, 3rd December, to John Wright, Clerk.  
**BALLYMENA UNION**, co. Antrim—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Ahoghill Dispensary District: £90 per annum, and fees. Applications, 1st Dec., to Wm. Millar, Hon. Sec.  
**BARNET UNION**—Medical Officer for District No. 3: £60: 10 per annum.  
**BEDFORD GENERAL INFIRMARY**—House-Surgeon: £100 per annum, board, rooms, etc. Applications, 10th December, to the Chairman of the Weekly Board.  
**BIRKENHEAD BOROUGH HOSPITAL**—Surgeon.  
**BIRKENHEAD**—Certifying Factory Surgeon.  
**BIRMINGHAM**—Surgeon to the Borough Prison: £200 per annum. Applications, 29th instant, to Messrs. Gem and Hebbert.  
**BIRMINGHAM AND MIDLAND EYE HOSPITAL**—House-Surgeon: £100 per annum, apartments, board, and attendance.  
**BRISTOL ROYAL INFIRMARY**—Assistant House-Surgeon.  
**CENTRAL LONDON OPHTHALMIC HOSPITAL**—Two Assistant Surgeons. Applications, 9th Dec.  
**CITY OF DUBLIN HOSPITAL**—Surgeon.  
**CLUTTON RURAL SANITARY DISTRICT**—Medical Officer of Health: £230 per annum for three years. Applications, 11th December, to E. H. Perrin, Clerk, Temple-Cloud, Bristol.  
**CONWAY UNION**—Medical Officer for the Creuddyn District: £75 per annum, and fees. Applications, 10th Dec., to Wm. Hughes, Clerk.  
**DROITWICH UNION**—Medical Officer and Public Vaccinator, Droitwich District: £85 per annum, and fees. Applications, 2nd December, to Henry Bearcroft, Clerk.  
**DURHAM**—Public Analyst: £10: 10 per annum, and 21s. per analysis for first hundred, 10s. 6d. per analysis for second hundred, and 6s. per analysis beyond, in each year.  
**FROME UNION**—Medical Officer for District No. 2: £90: 5 per annum.  
**GAINSBOROUGH RURAL SANITARY DISTRICT**—Medical Officer of Health: £150 for one year. Applications, 8th Dec., to T. H. Oldman, Clerk.  
**HOSPITAL FOR WOMEN, SOHO SQUARE**—House-Physician. Applications, 29th instant, to John Ray, R.N., Sec.  
**KENT COUNTY LUNATIC ASYLUM**—Two Assistant Medical Officers: £130 per annum each, furnished apartments, etc. Applications, 10th December, to Messrs. Beale and Hoar, Maidstone.  
**MANCHESTER ROYAL EYE HOSPITAL**—Three Assistant-Surgeons. Applications, 15th December, to P. Goldschmidt, Chairman of the Board.  
**METROPOLITAN FREE HOSPITAL**—Physician.  
**MOUNTMELICK UNION**, Queen's County—Medical Officer and Public Vaccinator for the Maryborough Dispensary District: £100 per annum, and fees. Applications, 1st Dec., to John Gaze, Hon. Sec.  
**NAVAL MEDICAL DEPARTMENT**—Assistant-Surgeons.  
**NEWTON ABBOTT UNION**—Medical Officers for the Manaton and Moreton Districts: £17 and £24 per annum.  
**QUEEN ADELAIDE DISPENSARY**, Bethnal Green Road—House-Surgeon: £100 per annum, furnished apartments, etc. Applications, 5th Dec., to Rev. Thos. Peckston, 260, Cambridge Road.  
**RIPON DISPENSARY AND HOUSE OF RECOVERY**—Resident Medical Officer: £100 per annum, furnished apartments, etc. Applications, 5th Dec., to the Honorary Secretaries.  
**SAMARITAN FREE HOSPITAL FOR WOMEN AND CHILDREN**—Surgeon to Out-department. Applications, 2nd Dec., to G. Scudamore, Sec.  
**SOUTH SHIELDS**—Medical Officer to the Borough Police.  
**SUNDERLAND AND BISHOP WEARMOUTH INFIRMARY AND DISPENSARY**—Senior House-Surgeon: £80 per annum, board and residence. Applications, 25th December, to John Kitts, Secretary.  
**TEWKESBURY UNION**—Medical Officer and Public Vaccinator for the Northampton District: £55 per annum, and fees. Applications, 16th Dec., to George Badham, Clerk.  
**TETFORD URBAN SANITARY DISTRICT**—Medical Officer of Health: £10 for one year. Applications, 4th December, to John Houchen, Town Clerk.  
**TIPPERARY COUNTY GAOL**, Nenagh—Surgeon: £53 per annum.  
**UNIVERSITY OF DUBLIN**—King's Professor of the Institutes of Medicine: £100 per annum, and fees. Applications 1st February, to J. Magee Finny M.B., or Joseph Carson, D.D.  
**WYCOMBE UNION**—Medical Officer for District No. 8: £29 per annum, and fees. Applications, 29th inst., to T. J. Reynolds, Clerk, High Wycombe.

## MEDICAL APPOINTMENTS.

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

\*BRAINE, Woodhouse, Esq., appointed Chloroformist to Charing Cross Hospital  
 EDWARDS, Alfred, M.B., C.M. Edin., appointed House-Surgeon to the Salop Infirmary, *vice* H. J. Rope, Esq., resigned.  
 \*SPENCER, W. H., M.B. Cantab., elected Physician to the Bristol Royal Infirmary, *vice* \*F. Brittan, M.D., resigned.  
 WALDO, Henry, M.D., appointed Assistant Physician to the Bristol Royal Infirmary, *vice* \*W. H. Spencer, M.B., promoted.

## 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.

ADAMS.—On November 23rd, at North Lodge, St. Matthew's Infirmary, Victoria Park, the wife of E. J. Adams, M.R.C.S.E., L.M., L.S.A., L.R.C.P.E., L.M., Coll. Phys., of a son.  
 ELLISTON.—At Ipswich, on November 11th, the wife of \*W. A. Elliston, M.D., of a daughter.

### DEATHS.

NOSWORTHY, John Ley, Esq., Surgeon, at Moretonhampstead, Devon, on Nov. 16.  
 TAYLOR, A. D., M.D., Deputy Inspector-General of Hospitals, at Bootle, aged 62, on November 19th.



## 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.

**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, 1 P.M.—Central London Ophthalmic, 1 P.M.—Royal Orthopaedic, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Hospital for Diseases of the Throat, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.

**FRIDAY** ..... Royal Westminster Ophthalmic, 1.30 P.M.—Royal London Ophthalmic, 11 A.M.—Central London Ophthalmic, 2 P.M.—Royal South London Ophthalmic, 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. Malcolm M. Hardy, "Preparation of Double Intussusception"; Mr. W. D. Napier, "Instruments for the Detection and Removal of Calculus"; Mr. Cripps Lawrence, "A Case of Intestinal Obstruction from Faecal Accumulation"; Dr. Habershon (the President) will make some remarks on "Some Complications met with during the recent Prevalence of Rheumatism"; Dr. Wiltshire, "Particulars of a Case of Inflammation of the Sciatic and Tracheal Plexuses, associated with Articular and other Communications."

**TUESDAY**.—Pathological Society of London, 8 P.M. Report on Dr. Dowse's Specimen of Foreign Body in the Crico-thyroid Pouch. Dr. Moxon: Two Cases of Osteoid Cancer of Lung. Mr. Andrew Clark: Lymphoma infiltrating Trachea: Tracheotomy performed twice. Dr. Payne: Pouches in Peritoneum giving occasion to Hernia. Dr. Payne: Thickening of Pulmonary Artery. Dr. Lockhart Clarke: Sclerosis of the Spinal Cord. Dr. R. King: Large Abscess of Liver without Ulceration of Intestine. Mr. Arnott: Sarcoma of Omentum in a Child. Mr. Morrant Baker: Rare form of Oxalate of Lime Calculus. Mr. Tay: Necrosis of Lower Jaw. Mr. Coupland: Disseminated Nodular Growths in Liver, with Tuberculosis of the Lungs. Dr. Fred. Taylor: Leucocythæmia, with Lymphadenoma. Dr. Crisp: Imperforate Anus. Mr. Godlee: Ossifying Enchondroma. Dr. Dowse: Renal Calculi.

**WEDNESDAY**.—Obstetrical Society of London, 7 P.M.: Meeting of Council. 8 P.M.: Mr. Tapson, "Note on the Removal of Intrauterine Tumours"; Dr. M'Callum, "On a Case of Extrauterine Fœtation"; Dr. Routh, "On the Use of Intrauterine Pessaries in Uterine Disease"; and other papers.—Royal Microscopical Society, 8 P.M.

**THURSDAY**.—Harveian Society of London. 7.15 P.M.: Special Meeting of Council. 8 P.M.: Mr. Balmanno Squire, "On Lupus and its Treatment."

## 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.

We can give Mr. Lawson Tait no promise which will fetter our discretion. He may naturally feel inclined to question our impartiality: we as confidently maintain it.

**DR. ELLIOTT**.—Duly received; and will be published, if possible.

**DR. H. F. PARSONS** (Beckington).—Next week.

**DR. BROWN** (Sheffield).—We should like to know a little more of the circumstances.

The fee named by "A Country Practitioner" seems to us quite moderate. He cannot, however, when called upon, refuse to give particulars of the dates and number of his visits.

SIR JAMES SIMPSON'S STATISTICS.

**DR. LAUCHLAN AITKEN** (Rome).—We think the particulars which Dr. Aitken could furnish with regard to Simpson's schedules might be interesting; but as they seem to take up, at any rate partly, the same ground as Mr. Lawson Tait, it would be better for Dr. Aitken to communicate with the latter gentleman, and combine their information.

**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 LONDON HOSPITAL.

MR. NIXON writes to us to say that the income of the London Hospital is £14,600. Its expenditure is, we believe, £30,000.

## HOMOEOPATHY.

SIR,—*Apud* your recent article upon Homeopathy, the following anecdote, narrated to me many years since by an Edinburgh physician, is amusing. Professor Henderson of the Edinburgh University, who had become a convert to the then new faith, was continually trying to win over his brother professor, Christison, and at length made him a present of a handsome case of globules, wherewith to experiment. Christison, after leaving the case for some weeks in a lumber-room, sent it back to his friend with the intimation that he could not bring his mind to make use of its contents. Some time afterwards, at a dinner party, Dr. and Mrs. Christison, Professor Henderson, and my friend, were amongst the guests. Henderson alluded to the return of the globules, at the same time stating that he had since used up the whole of them. Christison asked, "With what result?" "Oh, the usual success, the usual success," was the prompt reply. At this Mrs. Christison, an interested listener, unable to restrain her feelings, to the surprise of the company, burst into a fit of laughter. An explanation was demanded, when it was elicited that the elegant case had been used as a nursery plaything, and that every morning the children had been accustomed to empty all the globules out on a tray, and when they were well mixed, fill the bottles up again. Henderson failed of his "usual success" for that evening.

I am, etc.,

Faversham, November 1873.

EDWARD GARRAWAY.

T. D. S.—We cannot concur in considering the *Pharmaceutical Journal* as an "obscure trade journal", or that the editor cannot be expected to be cognisant of the feeling which happily subsists.

HIBERNICUS.—All our accredited correspondents are, we believe, careful to inquire into the accuracy of the information which they forward to our columns. They are of course not free from ordinary human fallibility, but the imputation of personal malice is one which we shall always be very loth to credit; it is not uncommonly found to represent the subjective mental condition of the person who makes it; it is a charge which should never be made, except with the gravest sense of responsibility and ample evidence, which certainly does not exist in this case.

J. R. B.—We have received your enclosure relating to the prosecution of McDermott, and consider the statements therein contained are completely disposed of in our number of November 8th.

DR. McEWEN (Chester) is reminded that all communications relating to the business department of the JOURNAL should be addressed to Mr. Francis Fowke, the Manager, and not to the Editor.

We are indebted to correspondents for the following periodicals, containing news, reports, and other matters of medical interest:—The Manchester Examiner and Times; The Birmingham Daily Post; The Australian and New Zealand Gazette; The Temperance Record; The Bath Express and County Herald; The Birmingham Gazette; The Dublin Morning Mail; The Derbyshire Journal; Saunders's News-Letter; The Glasgow News; The Derby and Chesterfield Reporter; The City Press; The Southampton Times, and Winchester, Portsmouth, Isle of Wight, and Hampshire Express; The Lincoln Gazette; The Stroud News; 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, Nov. 19th; The Anti-Game-Law Circular, Nov. 15th; The Northern Echo, Nov. 21st; The Daily Post, Nov. 24th; The Bedfordshire Mercury, Nov. 22nd; The Eastern Daily Press, Nov. 22nd; The South Durham and Cleveland Mercury; The Manchester Evening News; The Australasian; The Cumberland Packet; The New York Evening Post; The West Country Lantern; The Aberdare Times; The Dublin Express; The Aberdeen Free Press; The Belfast Evening Telegraph; The Carlisle Journal; The Daily Courier; The Melbourne Age; The Malton Messenger; The Altrincham and Bowden Guardian; The Stafford and Gloucester Advertiser; The Edinburgh Courant, Nov. 15th; The Gloucester Mercury, Nov. 11th; The Carlisle Express and Examiner, Nov. 18th; etc.

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

Dr. J. Matthews Duncan, Edinburgh; Dr. Rumsey, Cheltenham; Dr. Charlton Bastian, London; Dr. Dobell, London; Mr. W. H. Michael, London; Mr. G. E. Norton, London; Dr. Young, Malton; Mr. Vincent Jackson, Wolverhampton; Mr. G. W. Callender, London; Dr. Thorowgood, London; Dr. Crichton Browne, Wakefield; Mr. H. C. Smith, Maidstone; Mr. J. T. Jones, Llanfyllin; Dr. C. Radclyffe Hall, Torquay; Dr. R. Payne Cotton, London; Mr. Bradley, Manchester; Dr. McEwen, Chester; Dr. Munro, Cupar Fife; Dr. George Johnson, London; Dr. C. Bell Taylor, Nottingham; Mr. Eastes, London; An Associate; Dr. Althaus, London; Dr. R. Barnes, London; Mr. Holmes, London; 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; Dr. Edis, London; Mr. J. W. Langmore, London; Dr. Farquharson, London; Dr. King, Camberwell; Dr. Spencer, Bristol; The Secretary of the Harveian Society; Mr. Braine, London; Mr. G. S. Payne, Plymouth; Dr. Bodington, Sutton Coldfield; Dr. Elliott, Bristol; Dr. Joseph Bell, Edinburgh; Mr. Okell, Winsford; Mr. Walter Reeves, London; Mr. T. E. Jones, London; Mr. Garraway, Faversham; Mr. Nelson Hardy, London; Dr. Bigelow, Boston; Mr. J. Quicke, Birmingham; Dr. Swaby Smith, Seaford; Dr. H. F. Parsons, Beckington; Dr. J. Brown, Sheffield; Mr. Waren Tay, London; Dr. Carl Bott, Boston; Mr. Trestrail, Houston; Mr. Ashburton Thompson, London; Dr. A. B. Steele, Liverpool; Dr. Trollope, St. Leonards-on-Sea; Mr. H. J. Knight, Rotherham; Dr. Crichton Browne, Wakefield; Our Dublin Correspondent; Dr. Lombe Athill, Dublin; Mr. Woodman, Exeter; Mr. Lawson Tait, Birmingham; Dr. Handyside, Edinburgh; Mr. Wheelhouse, Leeds; etc.