

proposed Bill would not interfere with any of the present examining bodies. He moved the adoption of the Bill.

Dr. A. SMITH seconded the motion.

Dr. STORRAR opposed the proposal. He could not support any plan which would tend to retard the schemes of conjoint examinations which he hoped to see carried into effect. The Bill of Sir D. Corrigan would, moreover, interfere with the autonomy of the existing examining bodies.

Dr. ANDREW WOOD said that Sir D. Corrigan had withdrawn the only clause which gave the proposed Bill any title to the support of the Council. The present Medical Act already fully provided for what was described in the second clause of the proposed Bill. He thought that the Bill was one of the most revolutionary measures that had been brought before the Council. In what was the proposed new examination to differ from those which the candidates had already undergone?

Mr. QUAIN pointed out that, according to Sir D. Corrigan's proposal, the medical officers of such hospitals as Guy's or St. Bartholomew's would have to undergo a separate examination, while those of many of the smaller hospitals, supported by voluntary contributions, would not. Again, the medical man attending the poor in a district, holding the title of "C.M.B.," would be of a higher grade than the medical man in private practice who attended the families of the same district.

The hour of six having arrived, the debate was adjourned on the motion of Sir D. Corrigan.

Wednesday, July 15th.

The President took the Chair at 2 P.M.

Proposed Amendment of the Medical Act.—The discussion on Sir Dominic Corrigan's motion was resumed.

Dr. STOKES said that the proposal must be considered with reference to a question that had long occupied the Irish bodies—the formation of a conjoint examining board. He thought it scarcely consistent to consider any new plan until the fate of the first series of propositions—for the formation of a conjoint board—should be determined. The new board proposed by Sir D. Corrigan would, if the measure were approved of, be superior to all the other examining boards.

Sir DOMINIC CORRIGAN having replied, the votes were taken, when there appeared—for the motion, 2; against, 19; and not vote, 3.

Class Examinations.—Dr. HUMPHRY moved:

"That the Council recommend that, in the case of the certificates presented before admission to the examinations of the several licensing bodies, each should include a statement from the teacher or teachers that the candidate had satisfactorily attended the examinations from time to time held on the subject of study to which the certificate relates."

Dr. PARKES seconded the motion, which, after discussion, was carried, 14 voting for and 6 against it.

Limitation of Subjects of Examination.—Dr. ANDREW WOOD moved:

"That it is desirable that, in the examinations on several of the subjects of the curriculum—such, for example, as botany, zoology, chemistry, and materia medica—the area of examination should be limited and defined."

Dr. BEGIE seconded the motion, which was carried.

Conduct of Examinations.—Dr. HUMPHRY proposed, Sir W. GULL seconded, and it was resolved:

"That it is important that two examiners, or an examiner and assessor, should be present at every clinical and every oral examination."

[To be concluded.]

SELECTIONS FROM JOURNALS.

PATHOLOGY.

THE CHANGES PRODUCED IN THE TRACHEA AND LUNGS BY AMMONIA.—In order to test the statement of Reitz and Oertel, that true croupous inflammation can be excited by dropping ammonia into the air-passages of animals, H. Meyer (Pflüger's *Archiv*, 1873, vol. xiv) introduced into the air-tubes of dogs and rabbits a solution containing in each 100 cubic centimetres 8.96 grammes of ammonia; eight to ten drops being used for dogs, and from three to six for rabbits. He then investigated the changes found either on killing the animals, or on their spontaneous death, which took place generally within a period varying from forty-eight to seventy-two hours. From two to five hours after the injection, the mucous membrane became swollen and red, and studded with numerous ecchymoses; colourless blood-corpuscles lay around the vessels. From the surface, a fine membrane could be raised, consisting essentially of epithelial cells; under it, the basement-

membrane lay exposed. The epithelial cells had undergone very various changes of form, being partly cup-shaped, with an opaque granular protoplasm, without cilia; most of them, however, were reduced to fragments. Along with them were a few pus-corpuscles, and a few fungous growths of the most various forms. The whole was imbedded in a mass of mucus, which, under the action of alcohol, formed a fine network, or ran into nuclei. The trachea was filled with bloody mucus as far as the larger bronchial tubes; the mucous membrane of the larynx was pale and cedematous. After ten hours, the frothy secretion was replaced by a muco-purulent one, becoming purely purulent in the deeper part; the false membrane was yellowish, and consisted almost exclusively of round cells, nucleated adipose cells, free nuclei, fat-nuclei, cryptogamic growths, and mucus. Under the action of hardening materials, the latter formed a delicate trellis-work, which, with its enclosed cells, closely resembled the network present in croup. The mucous membrane was enormously hypertrophied, and presented an increased infiltration of proliferating cells. The mucous membrane of the larynx was pale and remarkably swollen; the epithelium was in part fatty. If the animal died or were killed when the disease was at its highest point, the air-tubes were found to be lined with a nearly tubular membrane, from half a centimetre to a millimetre in thickness, extending nearly as far as the bifurcation, and ending here in a dirty yellow puriform mass. The membrane could be drawn off easily, was of a yellow colour, and sometimes thinner, sometimes thicker; it was never elastic like croupous membrane. As in the previous stage, it consisted of round cells with one or more nuclei, fat-nuclei in masses and isolated, fungi, mucus, etc.; there was not a trace of fibrine. Carmine stained it of a dirty reddish brown, the pus-corpuscles only becoming red. There was no trace of epithelium remaining. The tissue of the mucous membrane, especially on the inner layer, was studded with proliferating cells. The laryngeal mucous membrane was swollen, and covered either with a muco-purulent secretion, or in spots with similar small membranous deposits. In the lungs, hæmorrhagic deposits arising from hæmorrhage from ruptured capillaries were met with in the earlier stages; afterwards, changes took place in the non-hæmorrhagic parts, having the character of catarrhal pneumonia; changes like those in croupous pneumonia were never met with. Meyer therefore concludes, contrary to the opinion of Reitz and Oertel, that the introduction of ammonia into the air-tubes of animals does not produce an affection identical with croup in man; that, on the other hand, small quantities of ammonia only produce a catarrhal inflammation, large quantities a destruction of the epithelium with infiltration of the mucous membrane with small round cells; and, finally, that severe catarrhal inflammation and hæmorrhage in the alveolar spaces of the lungs take place.—*Centralblatt für die Medicinischen Wissenschaften*, April 18th, 1874.

OBSTETRICS.

NEW-BORN INFANTS.—In a lecture lately delivered at the Hospice des Enfants Assistés in Paris, M. Parrot said that the differences between the definitions given of the term new-born infant, due for the most part to medical legists, showed the difficulty of establishing definite and invariable limits. All the limits hitherto set forth are too near the time of birth, and the result is, that their first period of infancy embraces too short a space of time. M. Parrot thinks that the length of this period may be fixed at six weeks, but that it may vary according to certain conditions of the health and strength of the child. To this first period succeeds infancy, properly so called. At the moment when the child passes from intrauterine to extrauterine life, three very important modifications occur in relation to (1) the falling off of the cord and the obliteration of the umbilical vein and arteries; 2. The occlusion of the foramen ovale, and the disappearance of that interauricular communication; 3. The obliteration of the ductus arteriosus. The fall of the cord occurs at the end of a quite special inflammatory process, which goes on at the level of its point of attachment to the abdominal wall; it shows itself from the third to the sixth day, and is somewhat frequently accompanied by lesions of the umbilical vein, especially by thromboses. These thromboses give rise to secondary lesions of the liver and peritoneum. The occlusion of the foramen ovale is due to the development of a valve, which progresses from behind forwards in a semi-lunar shape, leaving an oval orifice at the end, at first of a moderate size, narrowing by degrees. According to Alvarenga's researches, the occlusion does not become complete, and at the anterior part the valve is only adherent to the isthmus Vieusseni, and even then would very rarely be found adherent. M. Parrot has not arrived at the same result, and has not met with this free communication so frequently as has Dr. Alvarenga. In adults, he has only met with it in 50 per cent. of the cases. At the same time, it appeared to him that this communi-

cation became more apparent and more easy to demonstrate without being more frequent, in proportion to the increased age of the individual. The third important change in the conditions of the circulation is the obliteration of the ductus arteriosus. This canal has always been found obliterated after three years of age, except in one case. Cases of congenital lesions of the pulmonary artery are not taken into consideration, for under those circumstances the canal always remains permeable. Out of eighty-six children at one month old, M. Parrot found it open in thirty instances, retracted in two, obliterated in one, and filled up by a thrombus in three. This canal becomes obliterated, not as the result of mechanical conditions, as Chevers admitted, nor in consequence of the formation of a clot, according to Longet's opinion. It becomes closed in consequence of a process of proliferation which goes on in the internal tunic and the internal half of the median tunic. These two membranes revert to the embryonic state, especially at the median portion of the canal. It is this embryonic condition which accounts for the appearances presented by the arterial canal filled up by a thrombus; it has assumed an oval form at its median portion. The walls have given away under the internal pressure, and the vessel has become dilated at this level. In fact, the activity of the proliferating process, particularly at this point, has deprived the walls of a portion of their elasticity and of their power of resistance.—*Gazette Médicale de Paris*, No. 19, 1874.

REPORTS AND ANALYSES

AND

DESCRIPTIONS OF NEW INVENTIONS

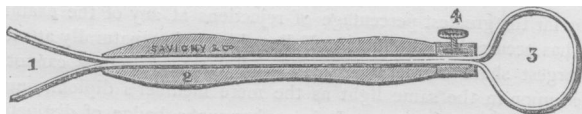
IN MEDICINE, SURGERY, DIETETICS, AND THE ALLIED SCIENCES.

MINOR SURGERY CLAMP.

By RICHARD DAVY, F.R.C.S., Surgeon to the Westminster Hospital.

THE drawing represents in section a very handy clamp for the elastic ligature (made for me by Blaise and Co., 67, St. James Street, S.W.), and has been used successfully for operations on the phalanges, circumcision, removal of warts from penis, etc. The same mechanism may be readily adapted for major operations.

The ends (1) of the elastic band are placed at one aperture of the



tunneled handle (2); the loop (3) occupies the other. The surgeon, having made sufficient traction on the elastic loop around the phalanx or penis, turns the screw (4) on, and fixes the bands. The assistant's hold on the handle is very conveniently out of the way of the operator.

TAPERING METALLIC TUBULAR SPECULUM (REGISTERED).

THE advantages which this speculum presents over Ferguson's glass silvered speculum are its non-fragility and its tapering form. It is easier of introduction, and the reflective and illuminating power is greatly increased; the opening being much wider, there is considerably more room for operations. The speculum has a trumpet-shaped external opening, the



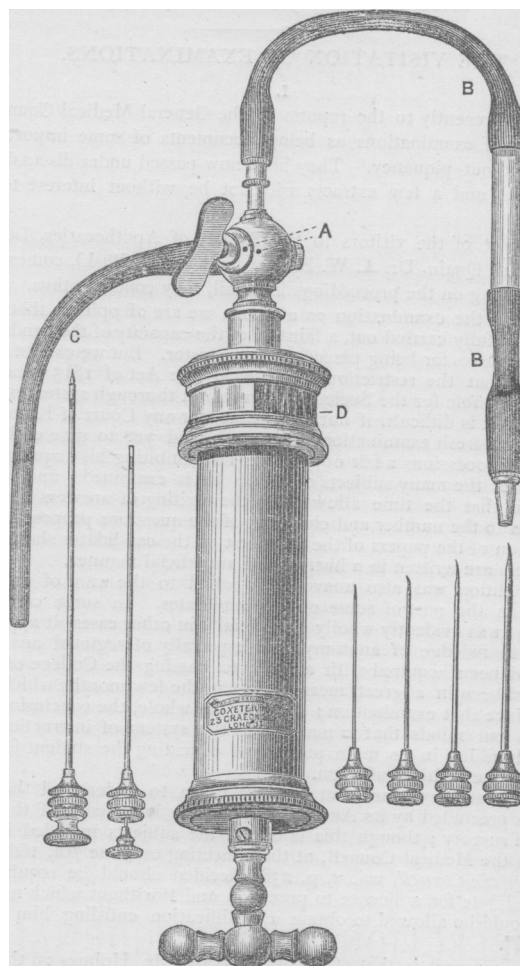
width of the instrument gradually diminishing from this to its smaller uterine aperture. The tube is suitably bevelled off at its uterine end, and the edges carefully rounded. It is made in three most useful sizes, and produced in two combinations of metals—one electro silver-plated and gilt at uterine end, and the other nickel silver-plated, which resists the action of acid, and will not tarnish. They are considerably lighter than any metal speculum hitherto introduced, and much cheaper. The

price of a set of three, electro-plated and gilt, in morocco case, lined with silk, is thirty-five shillings.

This modification of Ferguson's speculum was suggested by Dr. J. Hall Davis, and is made by Messrs. Arnold and Sons, Smithfield.

COXETER AND SON'S ASPIRATOR.

SINCE the publication of Dr. Dieulafoy's treatise on Pneumatic Aspiration (Suction) as a method of diagnosis and treatment of collections of fluid in the cavities and tissues of the body, the aspirator has become a necessary weapon in the *armamentum* of every practitioner. By its use, the treatment of many serious diseases is simplified, and their mortality is lessened. Not only is diagnosis made more secure, but its results are more effective. Few surgeons can rise from reading that admirable treatise without the conviction that no surgeon is justified in treating strangulated hernia, pleural effusion, empyema, cystic disease, retention



of urine, without correcting with the aspirator before resorting to the ultimate methods. In surgery, paradoxical as it may sound, operations are *opprobria*. The object of the surgeon is to avoid wounding; and, if cut he must, then to adopt the least harmful methods of wounding. Among these, the subcutaneous methods rank first. Aspiration by a suitably constructed instrument is a means by which pathological collections of fluid, pus, serum, urine, and collections of gas and fluid mixed, may be removed by a subcutaneous method, and with the least amount of traumatism. No one who has not read Dieulafoy's treatise can say how great this advance is; and its value at present is not fully recognised, in our opinion, mainly because not every one has yet mastered the clinical history of Dieulafoy's cases and results, and comparatively few possess an aspirator. When we have not read a book, and when we do not possess an instrument, how little are we disposed to appreciate the merits of the one and the capabilities of usefulness of the

at the unnatural exhibitions to be witnessed at the circuses of children being placed in the most unheard of attitudes, their limbs being in many instances subjected to a series of permanent or incurable dislocations, another law has just been voted, prohibiting parents from exposing their children to these inhuman practices under the age of twelve; and other exhibitors are not allowed to enlist children in their service under the age of sixteen. This, it is to be hoped, will in some measure put a stop to the cruelties to which these unfortunate children are subjected. *A propos* of this new law, I have heard it remarked that it has not been voted a day too soon, as laws for the protection of animals have long been in existence in all civilised countries.

ASSOCIATION INTELLIGENCE.

BRITISH MEDICAL ASSOCIATION: FORTY-SECOND ANNUAL MEETING.

THE Annual Meeting of the British Medical Association will be held at Norwich, on Tuesday, Wednesday, Thursday, and Friday, August 11th, 12th, 13th, and 14th, 1874.

President—Sir WILLIAM FERGUSSON, Bart., F.R.S., Surgeon to King's College Hospital, London.

President-elect—EDWARD COPEMAN, M.D., Senior Physician to the Norfolk and Norwich Hospital.

An Address in Medicine will be given by J. RUSSELL REYNOLDS, M.D., F.R.S., Physician to University College Hospital.

An Address in Surgery will be given by W. CADGE, Esq., Surgeon to the Norfolk and Norwich Hospital.

An Address in Obstetric Medicine will be given by JAMES MATTHEWS DUNCAN, M.D., F.R.S. Edin., Lecturer on Midwifery and Diseases of Women and Children in the School of Medicine, Edinburgh.

The business of the Association will be transacted in four Sections, viz.:—

SECTION A. MEDICINE.—*President*: Dr. Eade, Norwich. *Vice-Presidents*: Dr. Sydney Ringer, London; Dr. Durrant, Ipswich. *Secretaries*: Dr. Bradbury, 59, Corpus Buildings, Cambridge; Dr. Lowe, King Street, King's Lynn.

SECTION B. SURGERY.—*President*: Sir James Paget, Bart., F.R.S., London. *Vice-Presidents*: T. W. Crosse, Esq., Norwich; Dr. Macnamara, Dublin. *Secretaries*: F. Worthington, Esq., Lowestoft; Reginald Harrison, Esq., 38, Rodney Street, Liverpool.

SECTION C. OBSTETRIC MEDICINE.—*President*: Dr. Churchill, Dublin. *Vice-Presidents*: Dr. W. S. Playfair, London; Dr. Steele, Liverpool. *Secretaries*: Dr. Edis, 23, Sackville Street, London; F. Image, Esq., Westgate Street, Bury St. Edmunds.

SECTION D. PUBLIC MEDICINE.—*President*: W. H. Michael, Esq., London; *Vice-Presidents*: Dr. Bateman, Norwich; Dr. Ransome, Bowden. *Secretaries*: Dr. Bond, Gloucester; Dr. Leech, Manchester.

The Honorary Local Secretaries are:

Dr. J. B. PITT, Norwich.

H. S. ROBINSON, Esq., Norwich.

Dr. BEVERLEY, Norwich.

TUESDAY, August 11th.

10.30 A.M.—CATHEDRAL SERVICE.

1 P.M.—MEETING OF COMMITTEE OF COUNCIL.

3 P.M.—MEETING OF THE COUNCIL, 1873-74.

8 P.M.—GENERAL MEETING—President's Address, Annual Report of Council, and other business.

WEDNESDAY, August 12th.

9.30 A.M.—MEETING OF COUNCIL, 1874-75.

11.30 A.M.—SECOND GENERAL MEETING.

11.30 A.M.—ADDRESS IN MEDICINE, by Dr. RUSSELL REYNOLDS, F.R.S.

2 to 5 P.M.—SECTIONAL MEETINGS.

9 P.M.—SOIRÉE AT ST. ANDREW'S HALL.

THURSDAY, August 13th.

9 A.M.—MEETING OF THE COMMITTEE OF COUNCIL.

10 A.M.—THIRD GENERAL MEETING—Reports of Committees.

11 A.M.—ADDRESS IN SURGERY, by WILLIAM CADGE, Esq.

2 to 5 P.M.—SECTIONAL MEETINGS.

6.30 P.M.—PUBLIC DINNER.

FRIDAY, August 14th.

10 A.M.—ADDRESS IN OBSTETRIC MEDICINE, by Dr. MATTHEWS DUNCAN.

11 A.M.—SECTIONAL MEETINGS.

1.30 P.M.—CONCLUDING GENERAL MEETING.

EXCURSIONS.—The Excursion Committee will make arrangements for the convenience of members and their friends wishing to visit the factories and places of interest in the city and neighbourhood during the meeting, and for parties of ladies and gentlemen to do so on Friday afternoon.

On Saturday, there will be excursions to geological and botanical stations and places of antiquarian and general interest in Norfolk and Suffolk.

The Honorary Secretary will endeavour to arrange for gentlemen well acquainted with the locality to accompany the parties on Friday and Saturday.

Any information will be given by Mr. H. B. FRANCIS, St. Clement's, Norwich, Honorary Secretary to the Excursion Committee.

Members of the Association will receive cards for the above proceedings, evening meetings, etc., at the Reception Room, Assembly Rooms, Norwich.

ANNUAL MUSEUM.

The seventh annual Museum of the British Medical Association will be held at the Assembly Rooms, and will be open daily from 10 A.M. till 6 P.M., on August 11th, 12th, 13th, and 14th, for the exhibition of the following objects.

1. Latest inventions in medical and surgical instruments and appliances of all kinds.

2. New chemicals and apparatus; new drugs and their preparations; and new articles of diet for invalids.

3. General pathological specimens; with photographic models, drawings, etc., illustrating disease.

4. Urinary calculi; with drawings or diagrams of urinary disease, and of operations on the urinary organs. Also instruments with diagrams, etc., illustrating the history of the operation of lithotomy from the earliest periods up to the present day.

5. Drawings, diagrams, or models illustrating the ventilation of hospitals and private dwellings.

6. Microscopic pathological specimens.

The following is a list of the Museum Committee; to any member of which communications, etc., may be addressed—Mr. William Cadge, *Chairman*, 24, St. Giles' Street, Norwich; Mr. Francis Sutton, London Street, Norwich; Mr. Jonathan Hutchinson, 4, Finsbury Circus, London, E.C.; Mr. Joseph Allen, Tombland, Norwich; Mr. Francis Fowke, 37, Great Queen Street, London, W.C.; Mr. Chas. Williams, 9, Prince of Wales' Road, Norwich; Mr. J. R. Baumgartner, Norfolk and Norwich Hospital; Mr. Charles Firth, *Hon. Sec.*, 65, St. Giles' Street, Norwich.

NOTICE TO EXHIBITORS.—Application to be made as soon as possible, at the same time giving a list of objects, and mentioning the space required. Each object to be accompanied by a printed or written description, or reference, for insertion in the Catalogue; and it is important that these descriptions should be sent *as early as possible*—viz., not later than July 28th.

All parcels to be delivered on or before August 4th, and to be removed within three days after August 14th. They must be addressed "British Medical Association, care of C. Firth, Esq., Assembly Rooms, Norwich". All expenses of carriage and all risk to be borne by the exhibitors. A card bearing the name and address of the exhibitor to be enclosed in each package, ready to be fixed on the outside.

N.B.—Specimens of disease and calculi which have been exhibited at former meetings cannot be received on this occasion.

Communications to be addressed to CHARLES FIRTH, Esq., St. Giles' Street, Norwich, the Secretary for the Museum Department.

Papers.—The following papers have been promised.

Ogle, J. W., M.D. 1. Cases of Tumour of the Cerebellum; 2. Cases of Adenomatous Tumours within the Thorax.

Fothergill, J. Milner, M.D. The Systemic Indications of Chronic Bright's Disease.

Gowers, W. R., M.D. Cases of Convulsions from Organic Brain-Disease.

Ferrier, D., M.D. The Localisation of Function in the Brain.

Eade, Peter, M.D. A Disease of Carpenters.

Mackenzie, Morell, M.D. On the Ætiology of Bronchocele.

Anningson, Bushell, M.B. On the Ætiology of Infectious Diseases.

Thompson, J. Ashburton, Esq. General Remarks on the Internal Administration of Free Phosphorus.

Bradbury, J. B., M.D. Notes of Six Cases of Hydatids of the Liver treated by Puncture.

Hicks, J. Braxton, M.D., F.R.S. On the Adaptation of the Galvanic Caution to Gynaecology.

Wright, Frederick W., M.D. On Decoliation as a Mode of Delivery in Arm-Presentations.

Ross, James, M.D. On the Action of Mercury.
 Smart, W. R. E., M.D., C.B., Inspector-General of Hospitals and Fleets. On the Relative Frequency, the Causes, and Modes of Suicidal Attempts in the Navy and Army.
 Fox, Cornelius B., M.D. Water-Analysis; as it should and as it should not be performed by the Medical Officer of Health.
 Thornton, W. Pugin, Esq. On the Indications for Tracheotomy afforded by the Laryngoscope.
 Baker, J. Wright, Esq. Case of Lithotomy: the Nucleus of the Stone being a Broken Piece of Elastic Catheter.
 Thorowgood, J. C., M.D. On the Nature of the Asthmatic Paroxysm.
 Matthews, J. Duncan, M.D. Laboratory Note: On the Tensile Strength of the Fœtus.
 Cormack, Sir John Rose, M.D. Diphtheritic Paralysis.
 Cormack, Sir John Rose, M.D. Successful Resection of the Shoulder-joint in Case of Gunshot Wound.
 Althaus, J., M.D. On some Forms of Spinal Exhaustion, and their Treatment by the Constant Galvanic Current.
 Drysdale, Charles R., M.D. On Dysmenorrhœa.
 Braidwood, P. M., M.D. On Cerebro-Spinal Concussion.
 Clapperton, James, Esq. Maternal Impressions.
 Buchanan, George, M.D. Some Points in the Anatomy and Surgery of Talipes Varus.

Barwell, Richard, Esq. A New Method of treating Chronic Strumous Synovitis, more especially of the Knee.
 Harrison, Reginald, Esq. When, and for how long, should Mercury be used in the treatment of Syphilis?
 Beverley, M., M.D. Hospital Hygiene, illustrated by references to the Norfolk and Norwich Hospital in the past, present, and future.
 Rumsey, H. W., M.D., F.R.S. The Correlation of Sick Poor Relief and Public Health Administration.
 Haviland, Alfred, Esq. The Geographical Distribution of Disease within the area of the combined Sanitary Authorities of the Counties of Northampton, Leicester, Rutland, and Berks.
 Bond, Francis T., M.D. 1. On a New Form of Disinfectant; 2. On an Improved Form of Dry Closet; 3. On a New Method of dealing with House-Slops in rural districts.
 Higgins, Charles, Esq. On Muscular Asthenopia.

Gentlemen desirous of reading papers, cases, or other communications, are requested to forward the titles to the General Secretary, or to one of the Secretaries of the Section in which the paper is to be read. All papers should be forwarded to one of the above-named officers *on or before the 1st of August*.

No paper must exceed *twenty* minutes in reading; and no subsequent speech must exceed *ten* minutes.

All speeches at the General Meeting must not exceed *ten* minutes each.

FRANCIS FOWKE, *General Secretary*.

General Secretary's Office, 37, Great Queen Street, W.C.,
 June 25th, 1874.

METROPOLITAN COUNTIES BRANCH.

THE twenty-second annual meeting of this Branch will be held at the Banqueting Hall, Alexandra Park, on Monday, July 20th, at 4 P.M.: President for 1873-74, RICHARD QUAIN, M.D., F.R.S.; President-elect for 1874-75, T. B. CURLING, Esq., F.R.S.

At 5.30 P.M. precisely, the members will dine together; T. B. CURLING, Esq., F.R.S., in the Chair. Tickets, fifteen shillings each (including ices, tea, coffee, and attendance, but exclusive of wine).

A. P. STEWART, M.D.,
 ALEXANDER HENRY, M.D., } *Hon. Secretaries*.

London, June 24th, 1874.

ABERDEEN, BANFF, AND KINCARDINE BRANCH.

THE annual general meeting of the above Branch will be held at Aberdeen, on Saturday, July 18th, at 2 o'clock.

Intimation of particulars will be made to the members by circular.

ALEXANDER OGSTON, *Honorary Secretary*.

CUMBERLAND AND WESTMORLAND BRANCH.

THE annual meeting of the above Branch will be held at Carlisle, on Wednesday, July 29th, 1874.

Gentlemen intending to bring forward communications, are requested to give immediate notice.

HENRY BARNES, M.D., *Honorary Secretary*.

Carlisle, June 30th, 1874.

NOTICE OF SPECIAL GENERAL MEETING.

NOTICE is hereby given that, in accordance with Law 20, a Special General Meeting of the Association will be held at Norwich on Thursday, the 13th day of August next, immediately on conclusion of the Address in Surgery, for the purpose of considering the resolutions necessary for the incorporation of the Association.

FRANCIS FOWKE, *General Secretary*.

37, Great Queen Street, London, July 9th, 1874.

WEST SOMERSET BRANCH.

THE annual meeting of this Branch will be held at the White Hart Hotel, Milverton, on Thursday, July 23rd, at 2.30 P.M., under the presidency of H. W. RANDOLPH, Esq.

The President will be happy to see gentlemen, and offer them refreshments, at his house before the business of the meeting commences.

The Chair will be taken at 2.30 P.M.

Dinner at the White Hart Hotel will be served at 5 o'clock.

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

Taunton, July 7th, 1874.

CUMBERLAND AND WESTMORLAND BRANCH: SPRING MEETING.

THE Spring meeting of this Branch was held at the Keswick Hotel, Keswick, on Thursday, June 4th. The President of the Branch, Dr. TIFFEN of Wigton, took the Chair at half-past twelve o'clock.

New Member.—James Irving Lau, L.R.C.P.Ed., L.F.P.S.Glasg., was elected a member of the Association and Branch.

Extension of the Branch.—The acting Secretary, Dr. MACLAREN, read the report of the Branch Extension Committee as follows.

The Committee appointed at a meeting of this Society held at Penrith on October 29th, 1873, to make the necessary preliminary inquiries regarding the feasibility of extending the limits of the Branch so as to include members of the profession residing in the adjoining Border Counties, beg to report as follows.

1. That, in reference to the accompanying circular, twenty members of the medical profession residing within the adjoining Border Counties, will be glad to join the proposed Border Counties Branch of the British Medical Association.

2. That, in the opinion of your Committee, this response is a sufficient justification for them to give notice of certain alterations in the rules of the Branch which will enable the Society to extend its limits. Robert Tiffen, *President*; J. A. Campbell, M.D.; Roderick Maclaren, M.D.; Henry Barnes, M.D., *Secretary*.

The PRESIDENT moved that the report be adopted and entered upon the minutes. Dr. KNIGHT seconded the motion, and it was agreed to unanimously.

The PRESIDENT gave notice of certain alterations of rules necessary for extending the limits of the Branch.

On the motion of Dr. HENRY, seconded by Dr. TAYLOR, the Branch Extension Committee was reappointed, to consider the alteration in the rules and to report.

Report on Public Health Section.—A letter on this subject was read from Dr. Page, Kendal; and, after some discussion, it was agreed to defer the consideration thereof until the annual meeting.

Papers.—The following papers were read.

1. Dr. MICHAEL TAYLOR (Penrith) related a case of Extrauterine Pregnancy, which was illustrated by the preparation and by a coloured drawing. A young woman died after twelve hours illness from rupture of the sac of a tubal foetation, and consequent internal hæmorrhage. The interest of the case lay in their being a simultaneous uterine and extrauterine pregnancy, the foetus in the former case showing a development of three months; that in the Fallopian tube answering to eight weeks. The question was, whether the smaller size arose from want of vascular supply and tight packing, or whether it was not an instance of superfœtation at a second ovulation period.

2. Dr. GREEN (Kendal) contributed Further Observations on the Treatment of Diphtheria. The paper was read by Dr. MACLAREN. Five years ago, the author brought before the notice of the Society a few cases of diphtheria treated by rest in bed, light diet, hot linseed poultices externally, and a mixture of carbonate of ammonia and chlorate of potash internally, without any local application whatever to the affected surfaces. The present paper gave a record of seven cases treated in the same way and with satisfactory results. The author claimed for the carbonate of ammonia and chlorate of potash mixture a distinctly curative power over diphtheria, cutting it short and rendering the pa-

tient less liable to sequelæ. The improvement was generally manifest on the second day, but the treatment must be continued until every shred of membrane has disappeared. Relapses were apt to occur unless this was done, and they generally proved more obstinate than the first attack. The doses varied according to age, from two and a half to five grains of the carbonate of ammonia, and five to ten grains of chlorate of potash every two hours.

Dr. KNIGHT (Keswick) read a note of a Case of Enlarged Glands simulating Hernia. A woman, aged 43, in usual health, was suddenly seized with severe pain in the bowels and groin, with sickness and vomiting, thirst and quick pulse. The bowels were usually regular, but had not responded to a dose of castor-oil, and had not acted for thirty-six hours. On examination, a small tense and painful tumour was found at the femoral opening on the left side; careful manipulation afterwards, under chloroform, produced no change in the swelling, and disclosed the existence of an enlarged gland at the inner side. Attention was directed to an old standing ulcer over the left ulna, and faint red lines were traceable downwards from the tumour. There was some tenderness in the popliteal space. An enema relieved the bowels. An opiate was administered, and warm fomentations ordered to the groin. At the next visit, the symptoms of intestinal irritation were gone, while the tumour was larger and more brawny, and the signs of adenitis quite distinct. The diagnosis in such cases might be cleared up by exploratory incision if symptoms of strangulation of bowels persisted for many hours. In this case, the local symptoms were so evidently inflammatory from the first, that operation did not seem called for. An interesting point was that lymphatic glands did suddenly inflame, and if in this situation might produce all the symptoms of a strangulated hernia. This was mentioned by some authorities as a possible element of difficulty in diagnosis.

Dr. MACLAREN read notes of a case which had been admitted into the Carlisle Fever Hospital under the care of Dr. Barnes, and which during life closely simulated enteric fever in temperature, pulse, and the condition of the bowels. In addition to the symptoms of enteric fever, the patient complained of most acute pain in his groins, thighs, and knees, which was aggravated by an attempt to straighten the legs. He died on what was believed to be the thirty-third day of his disease, and the following was the condition ascertained to exist on *post mortem* examination. The intervertebral substance between the fourth and last lumbar vertebræ was gone; the bodies of each of these bones was hollowed out, and contained loose sequestra; communicating with this cavity were two abscesses containing dark brown fluid; these lay over each psoas muscle, and extended from the lower ends of the kidneys to the insertion of the muscles; the iliac vessels and sciatic nerves were dissected from their connections by the matter. The pelvic bones and the head of each femur were blackened, and the periosteum could be separated with extreme ease. The large bowel had some small ulcers near the cæcum, but Peyer's patches were quite healthy. A preparation of the fourth and fifth lumbar vertebræ, of the bones of the pelvis, and of the head of each femur, was exhibited to the meeting.

Dinner.—At the conclusion of the meeting, the members and their friends dined together.

SOUTH-EASTERN BRANCH: ANNUAL MEETING.

The annual meeting of this Branch was held in the Music Room of the Pavilion, Brighton, on Thursday, June 25th. More than sixty members were present.

The chair was taken by the retiring President, E. GARRAWAY, Esq., of Faversham, who, after a few remarks, introduced his successor, G. F. HODGSON, Esq., of Brighton.

President's Address.—The PRESIDENT, in taking the chair, delivered an address, in which he referred to the improvements which had taken place in Brighton since the meeting of the Branch there in 1864: to medical charity and its abuses; to the water-supply and drainage of Brighton; to the former abuse of mercury; to the advances in medical electricity; and to the prosperous condition of the Branch and the Parent Association.

Votes of Thanks.—Mr. W. WALLIS moved that the best thanks of the meeting be given to the President and Vice-Presidents for their valuable services during the past year. He had not had the pleasure of attending their last annual meeting, but, from what he had heard, he was assured that the carrying out of the duties of President could not have been put into better hands than those of Mr. Garraway; and he was sure they would all heartily join in thanking him, especially for the great deal of valuable time which he had sacrificed in their behalf. They were highly delighted that his mantle had fallen upon such shoulders as those of their old friend Mr. Hodgson, and had to congratulate him upon his succession to the office. [*Applause.*]

Mr. R. INNES NISBETT seconded the motion, which was unanimously carried.

Dr. TYACKE proposed that the best thanks of the meeting should be given to the President for his able, interesting, and instructive address. Mr. Hodgson was known among them as one of the hardest working men belonging to their Society, and they were glad that in his successor to the secretaryship they had got a gentleman competent to maintain the reputation of that office.

Mr. R. BRANWELL seconded the proposition. Having known Mr. Hodgson for many years and enjoyed his intimate friendship, he could say that the mantle of Mr. Garraway could not have fallen upon more excellent shoulders than his. He hoped that the remarks which fell from his lips with reference to indiscriminate charity, unpaid medical appointments, and the insufficient payment of parish medical officers would make an impression upon that meeting, and not only so, but through the press upon the public. It was not generally known that the medical officers of their charities were, as a rule, entirely unpaid for their services; and it was also, perhaps, unknown, although it might be very well known by those who took the trouble to inquire, that parish medical officers were shamefully ill-paid.

Dr. CONSTANTINE HOLMAN, in supporting the motion, remarked that the present satisfactory financial condition of the Association was due to the indomitable perseverance of their President. [*Hear, hear.*]

The proposition was put to the meeting by the Honorary Secretary, and carried unanimously.

Report of Council.—Dr. PARSONS, Honorary Secretary, read the annual report. The Council again congratulated the members upon the continued prosperity and usefulness of the South-Eastern Branch. Last year the list at the annual meeting numbered 338 members; of these, 13 had since withdrawn from the Branch, 3 had been removed by death, and 1 had been struck off the list as a defaulter, thus reducing numbers to 321. On the other hand, 50 new members had been enrolled, and of these one had died, leaving a total of 370. Since the last annual meeting, the Council had specially to deplore the loss of the valuable services of the honorary secretary, Mr. Hodgson, who for the past five years had devoted his best energies to the affairs of the Branch, and had contributed in no small degree to its welfare and development. The Council had appointed as his successor Dr. Parsons of Dover, late secretary of the East Kent District. The vacancy thus created had been filled up by the appointment of Mr. E. W. Thurston of Ashford to the East Kent District. Dr. Lanchester, after being honorary secretary of the East Surrey District for eight years, had been also compelled by increasing engagements to resign his office; and the Council expressed their cordial acknowledgment of the valuable services he had rendered the Branch. Most of the districts showed signs of life and energy as well by their frequent meetings as by the new members which they from time to time added to the Branch. The Council were glad to welcome as new members of the South-Eastern Branch the medical officers of health of two large and important combined districts in Kent; the officer for the combined district in Sussex already belonged to its ranks. It was hoped that the Surrey sanitary district would also be represented during the current year. For several years, the Association had increased at the rate of 400 or 500 members *per annum*; last year, 1,000 new members joined. It was satisfactory to add that upwards of 90 per cent. of these had remained permanent members of the Association. New Branches of importance had been formed in South Hants and the North of Scotland, and one was in process of formation in North Staffordshire. The report then gave a summary of the Parliamentary Bills Committee of the Association with regard to—1. The position of the medical officers of the army and navy; 2. The Registration of Births and Deaths, and the Protection of Infant Life; 3. The amelioration of the Education of Midwives, and the best means of subjecting them to control. Another subject which required attention was the disposition of the surplus. The balance in hand in 1872 was £52:14:3; in 1873, it had reached £60:16:9; and this year it attained to £79:13:8. It would be for this meeting to determine to what purposes, if any, it should be applied. The average growth of income over expenditure during the last six years was about £6 *per annum*. From observations made at the last annual meeting, the Council gathered that several plans for the disposal of the surplus found varying degrees of favour with the members. After giving each scheme most careful consideration, the Council had decided to recommend this meeting to subscribe the sum of £25 to the British Medical Benevolent Fund. This would leave the sum of £54:13:8 to be carried to the credit of the Branch for the ensuing year.

Dr. W. WITHERS MOORE moved that the report of the Council should be adopted. All were anxious that their brethren in the army and navy should have their interests properly attended to; and with such a military and naval Parliamentary representation as they had,

these would doubtless be cared for. The circumstance that they had a large surplus would be matter for discussion; but, viewing this Association as one numbering many members and having for its great object the interest of the profession, he felt strongly that in the report there was a great want of interest shown in the provincial medical man. [*Hear, hear.*] He thought that his interests had been overlooked. The question of gratuitous medical advice, the question of provident dispensaries, the present charges, recollecting the high rise of all the necessities of life, were subjects worthy of consideration. It was useless, he thought, for them to talk about Parliamentary reforms; let their reforms begin at home. All gratuitous medical advice should, he maintained, be done away with. They had only to be true to themselves. There was no other profession, no other trade which was not; not that he wished this Society to descend to the position of a trade union, but he did think that they were bound to look after those who had not the time, position, and money to look after themselves. He held that they should consider in the future how they could better the position of their poorer brethren. [*Applause.*]

Mr. WALTER seconded the motion, which was agreed to.

Financial Statement.—The HONORARY SECRETARY then read the financial statement, of which the following is an abstract:—Receipts: Balance in hand, June 23rd, 1873, £60:16:9; subscriptions, £78:4:4; total, £139:0:9. Expenditure: Expenses of last annual meeting, £9:9:6; printing, stationery, stamps, etc., £17:16:3; East Kent District expenses, £5:0:9; West Kent, £2:10:7; East Sussex, £3:4:2; West Sussex, £1:15:6; East Surrey, £2:18:6; West Surrey, *nil*; honorary secretary's expenses for journeys, etc., £14:11:3; sundries, £2:2:4; total, £59:7:1; leaving a balance in hand of £79:13:8.

Mr. W. J. HARRIS moved that the financial statement be received and passed. He regarded it as most satisfactory, and he could not see that there could be any objection to £25 of the balance being handed over to the Benevolent Fund. It was for the benefit of those who belonged to the members of the medical profession, and from his own knowledge he knew that much good had been accomplished by means of the fund.

Mr. JOSEPH DIXON seconded, and the motion was carried.

The Medical Benevolent Fund.—The PRESIDENT moved that £25 be handed over to the Benevolent Fund. The Fund, though not now under the direction of the officers of the Association, was administered in the most economical manner, while the persons who benefited by it were spared the expense of canvassing.

Dr. W. WITHERS MOORE seconded, and suggested whether it would not be for the benefit of the Association if the annual subscriptions were reduced from 25s. to 21s. With many young practitioners, who had a hard struggle to fight their way, the question of the additional 4s. would, perhaps, prevent them from becoming members, and it was desirable that they should get as many members as possible.

Dr. C. HOLMAN said that he originally opposed the proposition to increase the subscription from £1:1 to £1:5; but it now appeared that the increase of members had been greater since the subscription had been enlarged; and it should be recollected that the larger sum placed more money at their disposal for such purposes as assisting the Benevolent Fund, etc. Knowing something of the manner in which this fund was dispensed, he heartily supported the proposed motion to add to it; what was given from it was given as quietly and unostentatiously as possible, and only the initials of the recipients were allowed to transpire, the greatest delicacy being shown for their feelings.

The PRESIDENT said that the increase in the numbers only brought in about £6 more *per annum*, so that it would not be advisable for them to reduce the subscription.

Mr. WALTER was most willing that they should help the Fund all they could, but he believed that the original subscription of £1:1 was better than £1:5, and moved that it be reduced to the first-named amount.

The PRESIDENT, however, after referring to the rules, decided that Mr. Walter's motion was not in order.

Mr. NAPPER thought the surplus money they had could best be applied in enlarging the BRITISH MEDICAL JOURNAL, the space of which was frequently insufficient for the material at the disposal of the editor.

The motion having been supported by another member, was unanimously agreed to.

Representatives in the General Council.—The HONORARY SECRETARY reported that the following members had been elected representatives in the General Council of the Association for the ensuing year:—John Armstrong, M.D. (Gravesend), James H. Aveling, M.D. (London), R. L. Bowles, Esq. (Folkestone), Sir J. Cordy Burrows (Brighton), John M. Burton, Esq. (Lee), Alfred Carpenter, M.D. (Croydon), W. Carr, M.D. (Lee), Edward Clapton, M.D. (Southwark), Edward Garraway, Esq. (Faversham), G. F. Hodgson, Esq. (Brighton), Alfred Hall, M.D.

Brighton), J. Braxton Hicks, M.D., F.R.S. (London), Constantine Holman, M.D. (Reigate), W. Withers Moore, M.D. (Brighton), Albert Napper, Esq. (Cranleigh), Thomas Heckstall Smith, Esq. (St. Mary Cray), Nicholas Tyacke, M.D. (Chichester), J. R. Wardell, M.D. (Tunbridge Wells), and Charles Parsons, M.D., Honorary Secretary.

Vote of Thanks to Council.—Mr. MARTIN proposed, Dr. CUNNINGHAM seconded, and it was unanimously resolved, that the thanks of the meeting be given to the Council, the Auditors, and the Scrutineers, for their efficient services during the past year.

Secretary.—Mr. E. GARRAWAY proposed the re-election of Dr. Charles Parsons as Secretary. When Mr. Hodgson resigned that office, he began to think that the Branch would almost fall to pieces; but he was pleased to find that in Dr. Parsons they had a most able and energetic Secretary, who carried out his duties to their entire satisfaction.

The proposition was seconded, and carried unanimously; and Dr. PARSONS, in responding, expressed a hope that the members would look over his shortcomings, and credit him with every desire to carry out his duties efficiently.

Place of Meeting for 1875: Election of Officers.—Mr. NAPPER moved that the place of meeting next year should be Guildford; and that Dr. Stedman (Guildford) should be President-elect, and Dr. Brushfield (Brookwood Asylum) and Mr. Butler (Guildford) should be the Vice-Presidents.

Dr. AVELING seconded; and the motion was agreed to.

Council of the Branch.—The following gentlemen were elected members of the Branch Council for 1874-75: C. O. Baylis, M.D. (Tunbridge Wells), John Bostock, Esq. (Horsham), Thos. M. Butler, Esq. (Guildford), Thos. S. Byass, Esq. (Cuckfield), J. M. Cunningham, M.D. (Hailsham), J. Cooper Foster, Esq. (London), Richard Gravely, Esq. (Newick), G. W. Grahham, M.D. (Earlswood), Chas. C. Hayman, M.D. (Eastbourne), John Lee Jardine, Esq. (Capel), Horace Jeaffreson, M.D. (Wandsworth), H. T. Lanchester, M.D. (Croydon), Blackall Marsack, Esq. (Tunbridge Wells), S. Monckton, M.D. (Maidstone), Major K. Robinson, Esq. (Dover); J. S. Turner, Esq. (Anerley Road), W. Wallis, Esq. (Hartfield), Edw. F. Fussell, M.B. (Brighton).

Visit to the Aquarium, etc.—By the kindness of their respective directors, the Aquarium and the Suspension Pier were opened to the members of the Association free of charge, and between forty and fifty of them visited the former place, Mr. Henry Lee having kindly undertaken to explain to them the habits and characteristics of the fish, etc. The Town Free Library, Museum, and Picture Gallery, the County Hospital, and the Workhouse were also recommended for inspection, and many of the members availed themselves of the opportunity of going over those establishments.

Dinner.—The members, to the number of between sixty and seventy, afterwards dined together in the Music Room; Mr. Hodgson, President of the Branch, in the chair.

CORRESPONDENCE.

THE PATHOLOGICAL EXAMINATIONS AT THE COLLEGE OF SURGEONS.

SIR.—A small work has lately been published, entitled *A Guide to the Examinations at the Royal College of Surgeons of England*, the intention of which appears to be to frustrate, as far as lies in its power, the main object for which the Council of the College has long been striving in instituting practical examinations. During the past and present week, I have observed in the pathological galleries of the museum many students industriously "reading up" in this work the descriptions of certain preparations, stated to constitute the "examination series" used at the pass examinations for the membership and fellowship of the College.

It is naturally a source of satisfaction to me to see so much diligence bestowed upon any portion of the collection; but I think it right to give a friendly warning to the gentlemen referred to, that it would be wise to extend their studies beyond the range of the ninety-five specimens described in the book, as the choice of the Court of Examiners is by no means restricted to them. It has been hitherto, and probably will be in future, the practice of the Court to change from time to time the material used for testing the practical acquaintance of candidates with the appearance of morbid structures; and the 4,600 preparations in the museum afford ample variety for this purpose.

I am, etc.,

W. H. FLOWER.

OBITUARY.

JOHN H. BROXHOLM, M.D.

On June 22nd, at Sunbury, Middlesex, died John Horton Broxholm, M.D. Aberdeen, and L.S.A., third surviving son of the late Robert Broxholm, surgeon, aged 48. He studied at Guy's Hospital. His late father practised at Sunbury between forty and fifty years, and was succeeded by his eldest son Mr. Robert George Broxholm, who died eighteen years ago, when his brother Dr. J. H. Broxholm took the practice, succeeding also as medical officer to the union. His loss is deeply regretted in the neighbourhood.

THOMAS EDWARD BOWKETT, L.S.A.

Mr. T. E. BOWKETT was born January 29th, 1804; left early in life to his own resources, he managed, by hardwork and untiring perseverance, to pursue a course of study, and qualify himself to practise medicine. He commenced practice in Poplar, about the year 1833, and soon acquired a considerable practice, but his passion for politics, and a desire to interest himself in the welfare of the working classes, engaged a large share of his attention. He was the originator of building societies bearing his name. He was a man of considerable mental capacity, and a good linguist. He had a slight attack of pneumonia about a week before his death; this was followed by choleraic diarrhoea, which resulted in his death on June 15th.

MEDICO-PARLIAMENTARY.

HOUSE OF COMMONS.—Friday, July 10th, 1874.

Militia Medical Officers.—Sir E. WILMOT asked the Secretary of State for War whether he was prepared to state what were the intentions of Her Majesty's Government with regard to the filling up of vacancies in the medical staff of militia regiments, seeing that, according to the *Army List* for June, there are six surgeoncies and twenty-four assistant-surgeoncies vacant? and whether the Government was prepared to compensate those surgeons who can show up to the present time any loss or hardship, as promised by Lord Cardwell, that individual cases of such should be "fairly considered"?—Mr. HARDY said that all appointments had been suspended until the regulations with respect to the *status* and pay of militia medical officers were issued. Those regulations were now in preparation, and would shortly be issued. He had the opportunity the other day of seeing a deputation of those officers, and gave them the same information as he now gave to his hon. friend. As to the question of compensation, he could only repeat what he had said before, that each case would be considered carefully on its own merits.

MEDICAL NEWS.

APOTHECARIES' HALL.—The following gentlemen passed their examination in the science and practice of medicine, and received certificates to practise, on Thursday, July 9th, 1874.

Davies, John, Westminster Hospital
Hay, William Alfred Edward, Bridport, Dorset
Heald, George Henry, Leeds
Hitchins, Thomas John, Plymouth
Lyddon, William Reeks, Clapham
Newton, William Thomas, Lakenhall, Suffolk

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

Cotton, Herbert, Guy's Hospital
Kyngdon, Frederick Henry, London Hospital

ERRATUM.—In the list of successful candidates at the primary examination at Apothecaries' Hall, published in the *JOURNAL* of July 11, "Edward Manley Rodwell" should be "Edward Manby Rodwell".

MEDICAL VACANCIES.

THE following vacancies are announced:—

ARMY MEDICAL DEPARTMENT—Surgeons. Applications, 10th August, to Sir W. M. Muir, Director-General.
ASYLUM FOR IDIOTS, Earlwood—Assistant Medical Officer: £150 per annum, board, and apartments. Applications, 29th instant, to the Secretary, 36, King William Street, E.C.
BARNWOOD HOUSE LUNATIC ASYLUM, Gloucester—Medical Superintendent: £500 per annum, house, and board. Applications, 22nd instant, to A. J. Wood, M.D., Superintendent.
BRIGHTON AND HOVE DISPENSARY—Physician-Extraordinary. Applications, 3rd August, to Somers Clarke, Honorary Secretary.
BRISTOL GENERAL HOSPITAL—Physician.
BUCKINGHAMSHIRE GENERAL INFIRMARY, Aylesbury—Resident Surgeon and Apothecary: £80 per annum, increasing to £100, board, lodging, etc. Applications, 4th August, to George Fell, Solicitor.

BURNLEY RURAL SANITARY DISTRICT, combined with several others—Medical Officer of Health: £500 per annum. Applications, 27th instant, to A. S. Dean, Clerk to the Burnley Rural Sanitary Authority.
CANCER HOSPITAL—Resident House-Surgeon and Registrar: 75 guineas for one year, board, and residence. Applications, 22nd instant, to Chairman of Weekly Board, 107, Piccadilly.
CERES, Fifeshire—Parochial Medical Officer and Public Vaccinator: £23 per annum, and fees; and £42 per annum as Medical Officer of the Adamson Institution. Applications, 31st instant, to Mr. Younger, Inspector of Poor.
CROOM UNION, co. Limerick—Apothecary to the Workhouse: £60 per annum; and to the Croom Dispensary District: £30 per annum. Applications, 23rd instant, to J. D. Fitzgerald, Clerk.
DOWNPATRICK UNION, co. Down—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Strangford Dispensary District: £100 per annum, and fees. Applications, 13th August, to Samuel Seed, Assistant Secretary, Ballylena, Strangford.
DURHAM UNIVERSITY COLLEGES OF MEDICINE and PHYSICAL SCIENCE, Newcastle-upon-Tyne—Professor of Biology combined with Physiology: £450 per annum, and a portion of fees. Applications, 15th August, to T. Wood Bunning, Secretary to College of Physical Science.
EAST LONDON HOSPITAL FOR CHILDREN, Ratcliff Cross—Assistant Visiting Physician. Applications, 30th instant, to Ashton Warner, Secretary.
EVELINA HOSPITAL, Southwark Bridge Road—Registrar: £20 per annum.
GENERAL HOSPITAL, Nottingham—Assistant House-Surgeon: £80 per ann., board, and residence. Applications, 2nd instant, to E. M. Kidd, Secretary.
GENERAL INFIRMARY, Northampton—House-Surgeon and Assistant House-Surgeon: £125 and £30 per annum, furnished apartments, board, etc., respectively. Applications, 18th instant, to S. P. Bennett, Secretary.
GLENTIES UNION, co. Donegal—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Carrick Dispensary District: £100 per annum, and fees. Applications, 28th instant, to Samuel Cassidy, Honorary Secretary, Bruckless House, Donegal.
HENDON UNION, Middlesex—Medical Officer and Public Vaccinator for the Weald District: £30 per annum, and fees. Applications, 29th instant, to W. A. Tootell, Clerk, Edgware.
HUNGERFORD UNION—Medical Officer for the Great Bedwin District: £83.3 per annum.
INDIAN MEDICAL SERVICE—Fourteen Surgeons. Applications, 10th August, to T. P. Pears, Major-General, Military Secretary.
KENMARE UNION, co. Kerry—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Sneem Dispensary District: £100 per annum, and fees. Applications, 21st inst., to Thomas M. Jermyn, Hon. Sec., Less Cottage.
KING'S COLLEGE, London—Demonstrator of Practical Physiology.
KINGTON UNION, Herefordshire—Medical Officer and Public Vaccinator for the New Radnor District: £80 per annum, and fees. Applications, 24th inst., to Anthony Temple, Clerk.
LAMBETH PARISH—Medical Officer for No. 1 District: £80 per annum.
LEEDS PUBLIC DISPENSARY—Surgeon.
LIVERPOOL ROYAL SOUTHERN HOSPITAL—Junior House-Surgeon: £84 per annum, board and lodging. Applications, 22nd instant, to James Houghton, Treasurer.
METROPOLITAN FREE HOSPITAL—Assistant-Physician.
MOHILL UNION, co. Leitrim—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Rynn Dispensary District: £120 per annum, and fees. Applications, 27th instant, to Francis Gearty, Honorary Secretary, Finaulougha, Dromod.
NORTH STAFFORDSHIRE INFIRMARY, Hartshill—House Physician for six months: £80 per annum, board, lodging, etc. Applications, 22nd instant, to Ralph Hordley, Secretary.
OWENS COLLEGE, Manchester—Professor of Anatomy: minimum emoluments, £500 per annum. Applications, 1st August, to the Council, under cover to J. Holme Nicholson, Registrar.
PEMBROKE RURAL SANITARY DISTRICT—Medical Officer of Health.
ROYAL ALBERT HOSPITAL, Devonport—Junior Surgeon.
ROYAL LONDON OPHTHALMIC HOSPITAL, Moorfields—Curator: £100 per annum.—Assistant House-Surgeon: £50 per annum, board, and lodging.
ROYAL NAVAL MEDICAL SERVICE—Surgeons. Applications, 6th August, to A. Armstrong, Director-General.
ROYAL ORTHOPÆDIC HOSPITAL—Surgeon. Applications, 22nd instant, to the Secretary.
RYE: Prince of Wales Lodge of Manchester Unity Independent Order of Odd Fellows—Medical Officer. Applications to the Secretary, 5, Magdala Terrace, Rye.
STOCKPORT INFIRMARY—Assistant House-Surgeon: £60 per annum, board, and apartments. Applications, 22nd instant, to S. W. Wilkinson, Hon. Sec.
SUSSEX COUNTY HOSPITAL, Brighton—Dispenser: £100 per annum, and meat luncheon. Applications, 20th instant, to Arthur Veysey, Secretary.
TORBAY INFIRMARY, Torquay—Dispenser: £50 per ann., board and lodging.
UNIVERSITY OF EDINBURGH—Professor of the Institutes of Medicine.
WEMYSS, Fifeshire—Parochial Medical Officer, East District.
WESTERN GENERAL DISPENSARY—Dentist.
WESTMINSTER HOSPITAL—House-Surgeon. Applications, 24th instant, to F. J. Wilson, Secretary.
WEST NORFOLK and LYNN HOSPITAL—House-Surgeon and Secretary: £80 per annum, board, and apartments. Applications, 18th instant, to the Weekly Board.

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.

DEATHS.

CRIGHTON, Thomas, Esq., Surgeon, at Morpeth, aged 34, on June 4th.
LYON, David Mitchell, Physician and Surgeon, at St. Helier's, aged 37, lately.
*STEELE, Henry Charles Brown, M.R.C.S., L.S.A., at Stoke Ferry, Norfolk, aged 66, on July 11th.

At the Staffordshire Quarter Sessions, held on Monday, Samuel F. Gosling, Esq., of Lee House, Biddulph, qualified as a magistrate for the county, and took his seat upon the Bench.

OPERATION DAYS AT THE HOSPITALS.

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

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

WEDNESDAY ..St. Bartholomew's, 1.30 P.M.—St. Mary's, 1.30 P.M.—Middlesex, 1 P.M.—University College, 2 P.M.—St. Thomas's, 1.30 P.M.—London, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Great Northern, 2 P.M.—Samaritan Free Hospital for Women and Children, 2.30 P.M.—Cancer Hospital, Brompton, 3 P.M.—King's College, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.

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

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

SATURDAYSt. 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.

FRIDAY, July 17th.—Medical Microscopical Society, 8 P.M. (St. Bartholomew's Hospital.) Mr. Jabez Hogg, "On Mycetoma".

NOTICES TO CORRESPONDENTS.

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

PUBLIC HEALTH DEPARTMENT.—We shall be much obliged to Medical Officers of Health if they will, in forwarding their Annual and other Reports, favour us with *Duplicate Copies*.

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.

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

WE CANNOT UNDERTAKE TO RETURN MANUSCRIPTS NOT USED.

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

DR. FOX (Chelmsford).—The correspondence is important, and shall be discussed next week.

ARMY SURGEON is thanked. It will now be proper to take further steps; especially the state of matters should be made known in the schools. We shall take further counsel with members of the service on the subject.

NOTWITHSTANDING that nearly every number of the BRITISH MEDICAL JOURNAL published this year has included a supplement of eight pages, and that one-third more of original matter has been published this year in the BRITISH MEDICAL JOURNAL up to the present date than in any former year, we have still a considerable accumulation of manuscripts from town and country contributors. We would therefore especially ask our correspondents to compress, as much as possible, any communications with which they may favour us, with a view to their publication with the least possible delay.

TREATMENT OF PROLONGED SLEEPLESSNESS.

SIR,—Having seen a letter from one of your correspondents, over the signature "Exhausted Brain", I beg to state that I have lately met with two or three cases of prolonged sleeplessness, which have succumbed to nightly doses of chloral hydrate and bromide of potassium, ten grains of each, in orange-flower water.

I am, etc.,

L. LEWIS, M.D.

73, Albert Street, Regent's Park, July 1874.

PURPURA versus FLEA-BITES.

SIR,—In Liverpool there has lately been much discussion, both at the Society's meetings and out of doors, as to the correct diagnosis of that petechial condition which is so rife amongst the children of the poor. Dr. Lewis, who originated the discussion, considers it to be purpura, caused by want of animal food, and the party opposed hold that it is simply flea-bites. So far, nothing definite has resulted from the discussion. My opinion is, that both parties are in the right, as far as they go: that the petechial condition, in the majority of cases, is purpura, excited by flea-bites; that its subjects are predisposed to purpura by under-feeding; and that without an exciting cause it would not exist. I do not doubt that if the systems of those who suffer were further deteriorated through want of proper food, that purpura would result without any external influence. I look upon this petechial condition as an indication that the sufferer's health is below par; and I am convinced that the number of those cases would be very greatly diminished by applying a proper diet to the children of the poor.

Liverpool, July 4th, 1874.

I am, etc.,

J. ARMSTRONG, M.B.

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.

AIDE-TOI, ET DIEU T'AIDERA.

SIR,—In my letter with the above heading, which you were so obliging as to publish last week, there is an error, which I would thank you to correct; it is where I am made to write, "some forty forms of petition have been sent out". It should have been some four hundred; of this number, about forty to forty-five only have been filled in, in accordance with the advice given by the Council of the Poor-law Medical Officers' Association.

I am, etc.,

JOSEPH ROGERS.

33, Dean Street, Soho, July 14th, 1874.

CONTAGIOUS DISEASES ACTS.

SIR,—In the June number of your JOURNAL, you bestow special honour upon "a sensible little leaflet" celebrating the praises of the Contagious Diseases (Women's) Acts, and denouncing the opponents of these Acts.

As it is of the greatest consequence that those who take antagonistic positions understand each other, and it seems to me that, in your notice and in the approved leaflet, the opponents of these Acts are not understood, I crave a few words of explanation.

The opponents of the Contagious Diseases Acts agree with the supporters of the Acts in deploring "the fearful ravages of disease resulting from illegitimate prostitution", though they would be at a loss to know what the writer of the leaflet means by "illegitimate prostitution". They fully agree also in describing it as a "horrible disease" which "is visited equally upon the pure and innocent wife and children" of the impure and guilty husband.

The opponents of the Contagious Diseases Acts agree with the supporters of the Acts in desiring that everything which medical skill can do should be done to cure the guilty sufferers; and that everything which Government can do should be done to protect the health of "the pure and innocent wife and children" of the man who is unfaithful to his marriage vow.

But the opponents of the Contagious Diseases Acts are misunderstood when they are represented as pleading "the rights of harlotry". They do not recognise "rights of harlotry", and to plead such "rights" they would regard as immoral. What we do plead is "the rights of womanhood", which it is an essential part of the duty of manhood to protect.

The leaflet says, "Just as surely as drunkenness increases or decreases in the same proportion as public-houses increase or decrease, so prostitution *must* increase or decrease as prostitutes increase or decrease". The opponents of the Acts agree with this statement, while they think that an additional question needs answering—What leads to the increase of prostitutes? Allowing, however, the truth of the statement made, we say, as the friends of temperance seek the decrease of public-houses, so the friends of virtue must seek the decrease of prostitutes. But the Acts neither provide for, nor contemplate the diminution of, prostitutes.

To the charge that the Acts "legalise an enormous vice", the leaflet replies that "the effect and result of the enactment is assuredly not to legalise vice, but to put strict restrictions upon it, and thus to bring it into smaller compass". We answer, an Act may both legalise and restrict, as in the case of public-houses; and the Contagious Diseases Acts do both. The terms on which women are detained involve restriction; the terms on which they are liberated are such as to imply legal fitness for prostitution. The certificate of the surgeon is the legal warrant for prostitution without police interference.

As to the charge that the Acts are framed to protect men while in the pursuance of vice, the leaflet says: "There can be no doubt that the Act would protect the sensual man from receiving disease; but would it therefore encourage him in his wickedness? We believe not." A man's belief must be taken at its worth, but belief is not what is required in this case. We need either argument or evidence, and there is neither here. If the writer means to argue that a sensual man is not influenced by a promise of safety in his sensuality, the weakness of such argument is self-evident. If facts are of more consequence than a belief spun from a man's "inner consciousness", the opponents of the Acts have facts to support their charge.

Finally, the supporters of the Acts should understand that the opposition to the Acts rests wholly on moral grounds. It is determined opposition, in proportion as the conviction is strong that morality is the only possible basis of national prosperity. The hatred of the Acts is bitter, because they legalise immorality, and form a public opinion which makes light of social vice. The head and front of their offending against morality are found in the periodical examination. In appointing this, the law ordains an immorality. In executing the requirements of the Acts, the surgeon pursues an immoral practice, but a legalised practice, and a practice publicly salaried, in order to shelter the guilty patrons of the lowest vice. Those who wish to understand the opposition to these Acts can succeed only by turning attention on the moral questions involved. To talk of science, in neglect of morality, is unworthy of the intelligence of a civilised people.

I am, etc., H. CALDERWOOD,

Professor of Moral Philosophy, University of Edinburgh.

*. Here are several bold assertions without one tittle of support in fact. "The certificate of the surgeon is the legal warrant for prostitution without police interference", says our correspondent. The prostitute has no certificate, and there is no such thing as "legal fitness" for prostitution. Prostitutes in the "subjected districts" have no more legal warrant than in any others: they are tolerated everywhere. If Professor Calderwood see his way to remove that toleration everywhere, he will have the earnest support of the whole body of the medical profession. If he do not, it is obvious that his statement, that the prostitutes in the subjected districts have a legal warrant which they have not elsewhere, is wholly without foundation. That the supporters of the Contagious Diseases Prevention Acts believe that they have a moral ground of opposition we are aware. But, so long as their opposition is not extended to prostitution as it is practised in great cities, but solely to the prevention of disease amongst prostitutes, they cannot hope to gain the sympathy of those who believe that moral evils are to be met by moral remedies, and physical diseases treated and prevented by physical means. The repression and prevention of venereal disease is one thing; the repression of prostitution is another. But Professor Calderwood confounds the two; he does not propose any means of effecting the latter, and aims only at favouring the extension of the former. Having, however, inserted, and briefly answered, this communication, we cannot consent to prolong the discussion, which is in truth exhausted on both sides long since.

NOTICE TO ADVERTISERS.—Advertisements for insertion in the **BRITISH MEDICAL JOURNAL**, 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 SOHO HOSPITAL FOR WOMEN.

SIR,—I am not in a position to state whether any of the out-patients of the Soho Hospital for Women pay for the advice and medicine they receive at that institution, but, judging from the dress and general appearance of those who alight from cabs, etc., I can confidently assert that they ought, and that handsomely too. Many of those I have seen go there were evidently of such social status that, if they had consulted me instead, I should have felt myself fully justified in charging a fee of five shillings, if not more.

Dean Street, June 29th, 1874.

I am, etc.,

JOSEPH ROGERS.

THE SOHO HOSPITAL FOR WOMEN.

SIR,—About a month ago, I called your attention to what I described as "a flagrant abuse of charity" at the Soho Hospital for Women. The Committee of that Hospital have, however, offered no explanation of the facts stated by me, or of the conclusions deduced from them, and it is therefore fair to suppose that they have none to offer; in other words, they admit the truth of my allegations against them, and acknowledge that they did, in the particular instance alluded to, make an arrangement with the patient, by which the services of the medical officers were obtained, and the funds of the institution benefited at their expense. They admit this; and they therefore accept it as a principle that this is a legitimate method of obtaining funds for their hospital; and if so, the same plan may be, and, for anything I know to the contrary, *is now*, adopted by the Committees of other hospitals. Such a system, however, cannot continue if once exposed; and I ask you, sir, to use your powerful influence in calling the attention of the whole profession to this matter.

Other gross cases of abuse at the same hospital have been alluded to by Dr. Rogers and your correspondent "Inquirer", and seem to show the necessity of a thorough investigation into the management of this institution.

I am, etc.,

W. SPENCER WATSON.

7, Henrietta Street, Cavendish Square.

THE SOHO HOSPITAL FOR WOMEN.

SIR,—In your JOURNAL of June 13th, a letter appears, signed "W. Spencer Watson", referring to the receipt of "ten guineas from a grateful patient", which I had announced. The sum in question was brought to the hospital by the patient many months after her discharge. Whether she may have collected it for the benefit of the hospital, or been in circumstances at that date to show her gratitude in this way, I have no information; but the Committee direct me to say that in any case the invidious imputation of arrangements being made with patients to cheat the medical officers does not deserve further notice or refutation on their part.

In your issue of June 20th another letter is published, signed "Joseph Rogers", conveying an equally injurious imputation against one of the medical officers (not named), of endeavouring to secure future practice with the paying patients. Such charges as these, without names or dates, do not admit of any but a general repudiation of the acts and motives imputed; but the animus and tendency of such repeated attacks, published in your JOURNAL, cannot be mistaken, and the Committee must leave it to your own judgment how far a public journal can fairly open its pages to correspondence of this character, with a view to damage a medical charity, or disparage its staff management.

Finally, in your issue of June 27th, under the head of "Notices to Correspondents", an anonymous letter, signed "Inquirer", is published, alleging that a patient of the writer's had been an out-patient at the hospital, and that she had paid five shillings there for each visit.

I am only to state in reply, that the Committee have no knowledge of any such irregular proceeding; but if your correspondent will give names and dates, they will take steps at once to verify the facts, and let the inquirer know the result.

I am, etc.,

EDWARD D. STEAD, Secretary.

London, July 15th, 1874.

THE OLD PRACTICE AND THE NEW.

SIR,—Are we not constantly searching for new remedies, and neglecting to ascertain the value of many simple means which are always at hand? Some years ago, I was called up in the middle of the night to visit a man about four miles distant, who at eight o'clock the previous morning had swallowed two ounces of laudanum. As sixteen hours had elapsed since he had taken the poison, I had little hope of being of any service; but, being parish doctor, of course I went. I had heard that two medical men had been with him all the day, but had left him, considering the case hopeless. The stomach was empty when the poison was swallowed, and several hours elapsed before the medical men arrived, when the stomach-pump was used and the stomach well washed. I considered, therefore, that the poison must have been absorbed, or have passed into the intestines; however, I took with me a powerful syringe and four ounces of sulphate of magnesia. On arriving at the house, I found the man's friends and a number of the inhabitants surrounding the bed. They apologised for troubling me, stating they were quite satisfied that nothing more could be done for him; but, as he appeared to be dying so many hours, the inhabitants were anxious that some medical man should see him. The man lay in bed on his back, and the only sign of life was, that about once in a minute he drew a deep stertorous inspiration. The body was cold: no pulse was perceptible; the pupils were quite insensible; the action of the heart could not be felt.

I ordered a large four-gallon watering-pot to be filled with cold water and a small wash-tub to be placed by the side of the bed. Two men took the head and shoulders and held them over the tub. I now got on a chair and poured a full stream of water over the head and face for an hour. He did not show the slightest sensation or feeling; but on rubbing him well and placing him back in bed, the breathing was quieter and less stertorous. After resting, another douche was given for an hour, without producing the slightest sign of feeling or sensation; still, I fancied the breathing improved. Thinking that perhaps a portion of the opium was still in the intestines, I by degrees injected into the bowels the salts, dissolved in three pints of cold water. This did not appear to produce the slightest sensation or feeling. We then replaced him in bed and covered him with blankets: the breathing was evidently much improved. After resting some time, we gave him another douche. I now requested the men to turn him round, with his face upward, with his head lying back and mouth open. I poured the full force of the stream into his mouth. The water no sooner touched the larynx than he made a sudden spluttering noise, and showed the first sign of feeling. A teaspoonful of brandy was put into his mouth, but was not swallowed. We had him over the bed again, and gave

him another dash on the face and mouth. This excited a loud exclamation of irritation and a slight patch of colour on the cheek. We rubbed him dry, and applied warm flannel to his feet. His breathing was quiet and more natural. I now observed, from the motions of the body, that the bowels were about to act. We placed him on the night-chair, and in a few minutes a large evacuation took place, smelling strongly of opium. Sensibility now began to return: and we ordered some strong coffee, of which he drank a few cups: but, on replacing him in bed, he fell into a deep sleep. Fearing he would again fall into a comatose state, we had him dressed, carried him down stairs, and two men led him about in the open air until tired; they then took him into the house by a good fire, gave him some coffee, bread and butter, and put him to bed. I saw him again in the evening. He had slept soundly all day, and was perspiring copiously. He was much excited, complained of the treatment he had received, and did not thank me for restoring him to life; so that, after six hours' hard and anxious labour,

The man did not thank me;

The wife cursed me;

And no one paid me.

I am, etc.,

SENEX (Sixty Years in Practice).

DYSPEPSIA AND DECAYED TEETH.

SIR,—Your correspondent Mr. Ashburton Thompson is rather severe in last week's impression on "two notes that have recently appeared in the JOURNAL on dyspepsia and its connection with decayed or deficient teeth". There is no doubt that decayed teeth are a cause of dyspepsia, which is very much on the increase; but I should like to advance a step backwards, and inquire why it is that the rising generation so early find their teeth decay from softening of the enamel? In the President's (Mr. Skaife's) address, delivered at the annual meeting of the Lancashire and Cheshire Branch, held at Blackburn on the 17th June, he attributes the early decay of the factory operatives' teeth to their having discontinued oatmeal-porridge for breakfast. This I think very likely to be the case, as oatmeal contains the constituents of bone, muscle, and the enamel of the teeth. An eminent London dentist and lecturer at one of our large hospitals was lately lamenting the early decay of the teeth of the young people of the present age, and attributed it to their having been brought up on food consisting principally of starch, and deficient in the phosphates.

I am upwards of sixty years of age, and have lost some of my upper teeth, which have dropped out from absorption of the alveolar process of the jaw; all my lower teeth are as sound as they were fifty years ago. I was brought up on old-fashioned pap, made by boiling homemade bread in water, and then mixing it with milk. It is true that when the bread was made with sour stale yeast, or baker's bread was used, we suffered from flatulence, gripes, and diarrhoea; but this casualty may be avoided, according to your correspondent M.R.C.S., by using arated bread.

I have for a long time ordered for sickly limp children, lacking muscular strength and activity, oatmeal-porridge for breakfast. We feed our race-horses, hunters, and fox-hounds on oats and oatmeal to make them muscular, energetic, and enduring; and if the rising generation were fed often on oatmeal-porridge and whole meal-bread, they would be more muscular, have harder bones, be less effeminate, more courageous, and not afraid to show their teeth.

I am, etc.,

F.R.S.

We are indebted to correspondents for the following periodicals, containing news, reports, and other matters of medical interest:—The Birmingham Daily Gazette, July 13th; The Lincoln Gazette; The Lincoln, Rutland, and Stamford Mercury; The Leeds Mercury; The Blackburn Times; The Leicester Advertiser; The Cork Constitution; The Lincolnshire Chronicle; The Carlisle Patriot; The Macclesfield Advertiser; The Auckland Times and Herald; etc.

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

Dr. A. B. Steele, Liverpool; Dr. H. Calderwood, Edinburgh; Mr. Lawson Tait, Birmingham; Mr. A. R. Grant, London; Dr. Wells, Reading; Dr. George Johnson, London; Mr. Gravely, Lewes; Mr. R. S. Fowler, Bath; Mr. T. J. Jefferson, Market Weighton; Mrs. Blennerhassett, Kerry; Mr. Wm. Fairlie Clarke, London; Dr. Fitzgerald, Dublin; Dr. N. G. Mercer, Beverley; Our Paris Correspondent; Dr. McDonnell, Dublin; Dr. Hughes Bennett, Spa; An Associate; Dr. Francis Hawkins, London; Mr. E. M. Rodwell, London; The Secretary of the Medical Microscopical Society; Dr. C. Cooper, Randon; Our Dublin Correspondent; Mr. W. G. Bennett, Manchester; Mr. Wm. L'Heureux Blenkarne, London; Dr. Marcet, Yvoire; Mr. G. C. Coles, London; Dr. Crichton Browne, Wakefield; Mr. Clement Gosdon, London; Dr. Farquharson, 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; M.D.; Dr. Joseph Bell, Edinburgh; Mr. Pugin Thornton, London; Dr. Lewis, London; Mr. Henry Bowen, Kineton; Mr. James Hughes, Middlewich; A. B.; Mr. Henry Greenway, Plymouth; Dr. Alexander Macdonald, Woburn; Mrs. Tomlinson, St. Helier's; Dr. Günther, Munich; Our Glasgow Correspondent; Mr. Eastes, London; Litmus; Dr. Urquhart, London; Dr. John Williams, Penygroes; Mr. F. Baden Bengel, London; Dr. Cornelius Fox, Chelmsford; Dr. Grigg, London; Surgeon A., M.D.; Mr. Cowell, London; Dr. Thomas Diver, Southsea; Sir A. Taylor, M.D., Pau; Dr. Balthazar Foster, Birmingham; Dr. Paul, London; Miss Wolstenholme, London; Mr. A. Baker, Birmingham; Dr. Bateman, Norwich; Mr. D. K. Jones, Beaumaris; A Member; Mr. H. Nelson Hardy, London; Dr. Rutherford, London; Mr. W. W. Wagstaffe, London; T. B., Stockport; Mr. John Simon, London; A Correspondent; Dr. J. W. Ogle, London; Mr. T. Holmes, London; Dr. Edwards Crisp, London; Dr. Desmond, Liverpool; Dr. Lush, M.P., London; Mr. Richard Davy, London; Mr. Gosling, Biddulph; Mr. William Bird, York; Dr. T. W. Blackshaw, Southport; Dr. Phillips, Reading; Dr. Whitmore, London; Dr. J. Armstrong, Liverpool.

BOOKS, ETC., RECEIVED.

Report of the Chester County Lunatic Asylum. 1874.
An Introduction to the Science of Heat. By Temple A. Orme. Third edition. London: Groombridge and Sons. 1874.