

gutta-percha splints. We miss instructions in the use of the thermometer, administration of enemata, dressing blisters, subcutaneous injections, application of leeches, etc.

CLINICAL ATLAS OF SKIN-DISEASES; BEING DELINEATIONS OF CASES AS THEY ACTUALLY OCCUR. By H. STANLEY GALE, M.B.Lond., Physician to the Manchester Skin Hospital. London: H. Kimpton, High Holborn. 1874.

WE thought that Mr. Pennefather had struck the lowest depth of caricature in the daubs which he appended to a little book on ear-disease. Dr. STANLEY GALE has contrived to find a depth lower still. The headings of penny chap-books are in a higher style of art than these scrawls, which Dr. Gale labels with the names of skin-diseases. The author is partly conscious of the character of these drawings, for in his few lines of preface he writes, "I feel it necessary to say that any little skill as a draughtsman which I may have had has long since disappeared"; and, again, he pleads on behalf of his sketches (for which, however, he wrongly claims verisimilitude), that they are, like the dog of Dickens's toy-maker, "as near nature as you can expect for sixpence". Nothing, however, could well be further from nature. They would disgrace the notebook of a student, and we are very sorry to see the name of a graduate of the University of London prefixed to productions of such badness. The title might possibly mislead a practitioner or a student into thinking the book suitable for his use; otherwise it would be unworthy of notice.

NOTES ON BOOKS.

THE eleventh number of the *Birmingham Medical Review* (July 1874) is a very good one. It contains a paper on Removal of the Eyeball, by Mr. A. Bracey; Notes of a Case of Double Optic Neuritis, with Remarks, by Mr. Lloyd Owen; a paper on the Treatment of Non-Suppurative Catarrh of the Ear, by Mr. John St. J. Wilders; one on Localism or Non-Localism in Cancer, by Mr. Furneaux Jordan, etc.; with a serviceable Periscope, and unusually good reviews and notices of books.

SELECTIONS FROM JOURNALS.

SURGERY.

DRAINAGE IN OBSTINATE CHRONIC INFLAMMATION OF THE BLADDER.—Dr. Hunter McGuire reports (*Virginia Medical Monthly*) a case of "chronic inflammation, and probably ulceration of the bladder", of eight years' duration, successfully treated by drainage. Instead of effecting this by opening the vesico-vaginal septum, as done by Simpson, Emmet, and Parvin, he introduced a piece of gum-tubing, the portion of which to be introduced into the bladder was perforated by a shoemaker's punch, with holes half an inch apart. A straight silver tube was first passed into the bladder, and the gum-tubing introduced through it; the silver tube was then withdrawn, and the gum one secured in place, and the free end put into a bottle to catch the urine. A vaginal suppository of morphia and belladonna was introduced. The catheter was removed and cleaned, a new one substituted whenever necessary, and the vaginal suppository was also repeated every twelve hours. Afterwards Dr. McGuire substituted a large silver catheter, nearly straight, with a large vesical opening for the gum-tube. At the end of six weeks a gum-bag was attached to the free end of the silver catheter, so as to allow the patient to get up and walk about. This treatment was continued for four months, when the tube was removed from the bladder. There was for some time afterwards incontinence of urine, but the bladder gradually regained its healthy power, and eight months after the commencement of the treatment the patient could retain her urine for about three hours, and void it without pain; and, except the increased frequency of micturition, which was growing less, the patient was reported to be well.

TRAUMATIC ANEURISM OF NECK: LEFT COMMON CAROTID TIED WITH PERMANENT SILVER WIRE LIGATURE.—Dr. R. W. Gibbes, late Professor of Anatomy and Surgery in the University of South Carolina, reports (*Charleston Medical Journal and Review*, January, 1874) the case of a coloured man, aged 40, who was shot in the chin, November 19th, 1872. On December 16th, there existed no doubt of the formation of a consecutive diffused aneurism. The left arm was almost completely paralysed. On December 9th, the patient was operated upon, the usual incision being made along the anterior border

of the sterno-mastoid muscle. The artery was raised on a grooved director, and the aneurism-needle, armed with a small double silver wire, passed under it. The *bruit* heard under the stethoscope ceased immediately when the wire was drawn upon so as to occlude the anal. It was tied in a common reef knot, the ends being cut off close, without having constricted the vessel sufficiently to divide either coat. The ends were turned against the vessel, or rather upon the constricting noose, and the wound closed by four silver wire stitches, including the thickness of the platysma myoides in each. Two strips of isinglass plaster were applied, and the upper part of the wound covered with collodion. Close behind the upper end of the incision, Dr. Gibbes found and removed a small piece of the conical ball. The rest of it could not be found, having injured not only the artery, but a part of the brachial plexus. One year after the operation, the patient was examined. The paralysis of the right leg was much diminished, but still quite perceptible, and he walked well with a cane. The loss of power in the left arm (caused by the wound) was somewhat improved. He used it in eating, and in cutting wood, and could grasp one's hand pretty firmly in his palm, but not with the ends of his fingers. On applying the stethoscope, a loud bellows sound was heard, occupying the whole left carotid region from the sterno-clavicular junction to the angle of the jaw; it ceased the instant that his head was extended, or his face slightly turned to the right, and also as soon as slight pressure was made on the vessel pulsating immediately behind the corner of the os hyoides. Whether this was the lingual or the superior thyroid, Dr. Gibbes could not determine, but thought it was the latter. The carotid was felt pulsating strongly above the point of ligation, but below it appeared as a firm cord, with only a slight impulse communicated from the arch of the aorta. Dr. Gibbes said he could not feel the double constricting wire, but, when the finger pressed firmly on the spot, the patient said he felt it.

OBSTETRICS.

THE MISUSE OF WARM BATHS FOR NEW-BORN INFANTS.—M. Jules Simon, in an article in the *Lyon Medical*, deprecates the use of warm baths for new-born infants, when repeated too frequently at intervals of five or six minutes. It emaciates them and predisposes them to coryza. Warm baths are useful to children of a nervous temperament, with constipated bowels when attacked by acute colic, but they are sometimes just the cause of the persistence of that intertrigo, for which it is thought necessary to continue them, which, however, disappear so soon as astringent lotions are substituted for the baths. M. Simon has but little confidence in baths of sublimate of mercury for infantile syphilis, and prefers mercurial frictions in conjunction with internal administration of Van Swieten's liquor.

HYDRATE OF CHLORAL BY THE RECTUM IN THE VOMITING OF PREGNANCY.—Dr. D. B. Simmons, Chief Surgeon to Ken Hospital, Yokohama, Japan, reports (*New York Medical Record*, June 1st, 1874) four cases of excessive vomiting of pregnancy in which thirty-grain doses of chloral morning and evening, administered in mucilage by the rectum, afforded marked relief. Should another opportunity offer, writes Dr. Simmons, for a trial of this plan of treatment, we have decided to commence with larger doses, being convinced that a decided impression, produced by the medicine at first, will require its repetition but two or three times to put an end to the disease, for the time at least.

INVERSION OF UTERUS: PROMPT REPLACEMENT.—Dr. G. W. H. Kemper reports (*Indiana Journal of Medicine*, March, 1874) an example of this in a woman, aged 33, in her sixth labour. Fifteen minutes after the birth of the child, a violent pain came on which expelled the placenta beyond the vulva, and completely inverted the uterus. His first suspicion of an inversion was caused by the uterus escaping his grasp above the pubes, and disappearing into the pelvis. There was no unusual amount of hæmorrhage, and her pulse was good. There was not the least tendency to shock, and the woman was not aware that anything unusual had occurred. Dr. Kemper hastily separated the placenta, which was adherent to the fundus. Pushing his right hand through the vulva into the vagina, while steadying the tissues above the pubes with his left, he indented the fundus with the tips of his fingers, and maintained a constant steady pressure in the direction of the axis of the pelvis. In about five minutes, his efforts were rewarded with success. He kept the hand in the uterus for a few moments and satisfied himself that every portion had been fully restored, and the outlines of the organ distinctly perceptible through the abdominal walls. Dr. Kemper states that he had made but slight traction on the cord, not sufficient to cause the inversion.—*American Journal of Medical Sciences*, July, 1874.

Clinical Midwifery: Prize, Mr. T. Johnson. On the motion of Mr. C. B. Cooper, seconded by Mr. Gamgee, a vote of thanks was passed to the Chairman, and the proceedings terminated.

On the following day, Dr. Fletcher, who has acted as Chairman of the Clinical Board for the last twelve months, and has recently been re-elected, was entertained at a dinner by the members of the united staffs as a cordial and friendly recognition of his services in the chair.

At the annual meeting of the Midland Medical Society, Mr. Wilders retired from the Presidentship, receiving many acknowledgments of his services; and Mr. Pemberton has accepted the honourable office for the coming year. Mr. Priestley Smith has been elected Librarian; and Mr. Harmar remains Treasurer. Professor Humphry has honoured the Society by consenting to deliver the address at the annual *soirée*, which will be held on the 21st instant. The subject of the address will be, we understand, Early British Skulls.

The Children's Hospital has lost a valuable and valued honorary surgeon by the resignation of Mr. Charles Bracey. Dr. Thomas and Mr. Mann are candidates for the vacant office.

With regard to matters of Public Health, the epidemics of scarlatina and variola are still prevalent. Of the former, the majority of cases are mild, but of the latter many are severe. The new cases had gone down to 66 last week; but this, they have risen again to 82; weekly mortality, 10, being 12.20 of total cases. The only small-pox wards available up to the present have been connected with the workhouse, but they have now at last been purchased and taken charge of by the Corporation as the sanitary authority. Bearing upon this matter, is a case recently decided at Banbury, where a Revising Barrister struck off his list the name of a man who had been treated in the Small-pox Hospital of the Board of Health. It appeared that he had consented, on urgent request, to his own removal, and had been attended then by "his own doctor". For this reason, he was considered "not a pauper", and allowed as a voter. Dr. Buchanan has recommended in his report a Hospital for Infectious Diseases at each end of the borough boundary, but no steps have at present been taken towards fresh buildings. At Harborne, a hospital has been extemporised out of railway postal carriages.

The charge against a Nuneaton surgeon of causing the death of a woman during confinement, came again before the magistrates yesterday, having been adjourned from July last. The defendant was committed for trial at the next Warwick assizes, heavy bail being required and accepted.

GLASGOW.

[FROM OUR OWN CORRESPONDENT.]

Opening of the New Western Infirmary.—Dispute between the Managers of the Old Infirmary and the New.—Recognition of Lectures.

THE New Western Infirmary will be opened for the reception of patients on October 29th, and clinical instruction during the ensuing session will be given there. It must be acknowledged that the opening is too near the beginning of the session, and some inconvenience will necessarily result. It would have been better if the wards could have been opened in the month of August, as was originally intended, and then the general arrangements would have been advanced before the students began to attend. This has been found impossible, however, and students and teachers must accommodate themselves to the inevitable inconveniences incident to the period of transition. We believe it was expected that the connection with the Royal Infirmary would have been continued during this winter, and that the new hospital would have been left for six months to develop its internal arrangements. Some disagreement has, however, arisen between the old infirmary and the new, the outcome of which was, that the professors in the university acting in the old infirmary were threatened with non-election. Under these circumstances, it was necessary for the university to go on with the new hospital, which is all but finished.

It must seem strange that a body of directors in the infirmary should threaten the dismissal of such men as Dr. Gairdner, Dr. George Buchanan, Dr. McLeod, and Dr. McCall Anderson, who have for many years been actively engaged in the hospital. And it will be counted all the more strange when it is considered that no official communication has (if our information be correct) passed between the university and the infirmary on the matter in dispute. The infirmary directors say that the university does not intend to recognise their courses of clinical lectures after the new infirmary has been put into working order, and, on this footing, they dismiss the university professors. But the university has never refused to recognise their lectures, and the infirmary has never asked whether they intend to refuse recognition. It seems to be a pure assumption on the part of the infirmary

directors, and, on the basis of this assumption, they will dismiss old and tried officers. The dispute is unfortunate; but, if it lead to the ventilation of the whole question of recognition of lectures in Glasgow, it cannot but do good. This question has only an indirect bearing on the present disagreement. But, if at some early date the Andersonian University agree to give up its misleading name, or, as was suggested some time ago in our pages, if the medical staff would agree to leave Anderson's Institution and form a Royal Infirmary School of Medicine, then the university would be forced to recognise the classes, and that healthy competition would be inaugurated, which is so great a desideratum in Glasgow. We are glad to find that one of the daily newspapers of Glasgow has taken up the question and speaks plainly out. In our opinion, an infirmary school of medicine would be a much more efficient thing than one connected with an institution which has no direct connection with medicine; but, if Anderson's University should get a short Act of Parliament passed, ridding them of this anomalous title, there seems no reason to doubt that Glasgow University would willingly recognise their classes, or at least would recognise the lecturers as individuals.

ASSOCIATION INTELLIGENCE.

COMMITTEE OF COUNCIL.

NOTICE OF MEETING.

A MEETING of the Committee of Council will be held at the Queen's Hotel, Birmingham, on Wednesday, the 4th day of November next, at a quarter past 3 o'clock in the afternoon.

FRANCIS FOWKE,
General Secretary.

36, Great Queen Street, London, October 8th, 1874.

YORKSHIRE BRANCH.

THE autumnal meeting of this Branch will be held at the Royal Hotel, Scarborough, on Wednesday, October 21st.

The members will dine together after the meeting. Tickets, 6s. 6d. each.

Any member intending to dine, or bring forward any communication, is requested to communicate with the Secretary.

W. PROCTER, M.D., Local Secretary.

York, October 12th, 1874.

BATH AND BRISTOL BRANCH.

THE first ordinary meeting of the session will be held at the College Green Hotel, Bristol, on Thursday, October 22nd; FREDERICK MASON, Esq., President, in the Chair.

EDMUND C. BOARD, Honorary Secretary.

Clifton, October 1874.

SOUTH-EASTERN BRANCH: EAST SURREY DISTRICT.

A MEETING will be held at the White Hart Hotel, Reigate, on Thursday, October 22nd, at 4.30 P.M.; CONSTANTINE HOLMAN, M.D., in the Chair.

Papers will be read by Dr. G. W. Grabham (Earlswood), Remarks on the Origin, Varieties, and Termination of Idiocy; by Dr. P. H. Pye-Smith, on some cases of Abdominal Tumour; by Dr. C. Holman; by Dr. J. Walters, on a case of large Naso-Pharyngeal Polypus successfully removed, on a case of Poisoning by Arsenic, and on a case of Poisoning by Hydrocyanic Acid.

The Chairman kindly invites members and their friends to lunch at 1.30 P.M., at "The Barons", Reigate.

Dinner will be served at the White Hart Hotel, at 6.15 P.M. Tickets, including wine, 14s. After dinner, the presentation of the testimonial to Dr. Lanchester will take place.

JOHN H. GALTON, M.D., Honorary Secretary.

Woodside, Anerley Road, S.E., September 30th, 1874.

BORDER COUNTIES BRANCH.

A MEETING of the above Branch will be held at Dumfries on Friday, October 30th, under the Presidency of Dr. GREEN of Kendal.

Gentlemen intending to read papers or take part in the proceedings are requested to give early notice to the Secretary of their intention.

HENRY BARNES, M.D., Honorary Secretary.

Carlisle, October 14th, 1874.

BIRMINGHAM AND MIDLAND COUNTIES BRANCH.

A SPECIAL meeting of the Branch will be held in the Council Room of the Midland Institute, on Thursday, October 22nd, 1874; the Chair to be taken at half-past three o'clock P.M. precisely.

Business.—Further Consideration of the Report of the Committee on Medical Education.

BALTHAZAR FOSTER, M.D., } *Honorary Secretaries.*
JAMES SAWYER, M.D., }

Birmingham, October 13th, 1874.

SOUTH-EASTERN BRANCH: WEST SUSSEX DISTRICT MEETING.

THE autumn meeting of the above District will be held at the Board Room of the Infirmary, Chichester, on Tuesday, October 27th, at 3 P.M.; Dr. TYACKE in the Chair.

The dinner will take place at the Dolphin Hotel, at 4.45 P.M. precisely. Charge 5s., exclusive of wine.

WM. J. HARRIS, *Honorary Secretary.*

Worthing, October 10th, 1874.

WEST SOMERSET BRANCH.

THE autumnal meeting of this Branch will be held at the Railway Hotel, Taunton, on Thursday, October 29th, at 5 o'clock.

The following question has been settled by the Council as the one on which each member should be asked to express his opinion at the meeting after dinner: "What is your opinion as to the best treatment of whooping-cough?"

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

Taunton, September 29th, 1874.

READING BRANCH: ANNUAL MEETING.

THE nineteenth annual meeting of the Reading Branch was held in the Athenæum, on Wednesday, September 23rd. Seventeen members were present.

President's Address.—Mr. MAURICE, President, delivered a very able address, for which he received the thanks of the members present.

President-elect.—Mr. May was nominated as President-elect.

Dinner.—The members subsequently dined, and spent a very agreeable evening at the Queen's Hotel.

SOUTH MIDLAND BRANCH: AUTUMNAL MEETING.

THE eighteenth autumnal meeting of this Branch was held at Tickford Lodge, Newport Pagnell, the residence of Hammett Hailey, Esq., on Tuesday, October 6th. Mr. Hailey entertained the members at luncheon previously to the meeting. The chair was taken at 2.30 P.M. Present: ROBERT DE'ATH, Esq., President, and ten other gentlemen.

Cases.—Mr. HAILEY read a short paper on a singular case of Gunshot Wound of the Forearm. The case terminated favourably, and the success was attributed to constant irrigation. The man was exhibited; he suffered from contraction of the flexor tendons.

Dr. MACKAY related a case of Gunshot Wound of the Elbow. Two years after the accident, a piece of the stock of the gun was discharged through a fistulous opening. The wound then soon healed.

Dr. LAWFORD related a case of Gunshot Wound, in which wadding was taken out of the wound some months after the accident.

Votes of Thanks.—Mr. TERRY proposed a vote of thanks to Mr. Hailey for his kind hospitality, which was seconded by Mr. MOXON, and carried.

Mr. HEYGATE proposed a vote of thanks to the President. This was seconded by Mr. GRINDON, and carried.

The meeting then separated.

SOUTH-EASTERN BRANCH: EAST KENT DISTRICT MEETING.

THE fifty-third meeting was held at the "Granville", Ramsgate, on September 24th, J. B. THOMSON, Esq., in the Chair. Fifteen members and their friends were present. The admirable baths attached to the "Granville" were examined and thoroughly approved of and admired.

Papers, etc.—1. Mr. HICKS read a paper on Manual and Instrumental Interference in Labour. He thought that the old doctrine that "meddlesome midwifery is bad" might be carried too far. He preferred the long forceps to any other instrument. If the expulsion of the placenta

were delayed, he advised its early removal, seeing no harm in the introduction of the hand into the uterus, if it were done slowly and gently. Out of 605 cases of midwifery, he had had 27 cases of forceps, with no maternal death.

2. Mr. TEEVAN made some remarks on the Treatment of Retention of Urine. He spoke most highly of the use of ice *per rectum* in those cases due to stricture or gonorrhœa, though it was of little use when the cause was an enlarged prostate. He recommended aspiration above the pubes in preference to puncture *per rectum*. He also exhibited and explained the use of many ingenious and useful elastic instruments for the relief of retention and other urinary disorders.

3. Mr. WOODMAN narrated a case, which, for want of a more definite name, was described as a fatal case of Spontaneous Hemorrhage, in which a healthy little girl died within forty-eight hours, with no other symptom during life than slight hæmaturia and a general yellow colour of skin. At a *post mortem* examination, all the abdominal viscera were found intensely congested; the other organs were healthy.

4. Mr. RAVEN related two instances of Aphasia occurring after Enteric Fever, and made references to various authors with regard to the affection. It was shown that aphasia never occurs without serious premonitory symptoms, indicating some profound impression on the nervous system; and further that, in all recorded cases, albuminuria had been a prominent symptom in the progress of the fever. Hence it was inferred that the condition of aphasia, and the seizure preceding it, were the result of uræmic poisoning. The importance of regular chemical examination of the urine in continued fever was insisted on; and, in cases where albuminuria is present, it was shown that a most careful watch should be kept over the patient, especially about the termination of the third week, and if the disease had occurred in a young person. The prognosis of this form of aphasia was shown to be quite favourable.

NORTHERN COUNTIES (SCOTLAND) BRANCH: ANNUAL MEETING.

THE annual meeting of this Branch was held in the Caledonian Hotel, Inverness, on Saturday, September 12th; present, Dr. ROSS, of Inverness, President-elect, and fifteen members. Professor Liston Paul, M.D., of Madras, and Dr. Brotherston of Alloa, being present by invitation, were requested to consider themselves members for the day. The Secretary apologised for the unavoidable absence of Dr. Duff, the President; and Dr. Ross, President-elect, took the chair, and delivered an address, which was followed by an interesting discussion.

Communications.—1. Dr. J. W. N. MACKAY (Secretary) showed a number of Calculi, vesical and renal, and read a description of, and comments upon, them, by Dr. Robert S. Turner of Keith, who was prevented from being present. 2. Dr. Vass showed and commented upon several Renal Calculi.

Report of Council.—The Secretary gave in the report of the Council, which was adopted.

Officers and Council.—The following office-bearers were elected for 1874-75. *President:* J. J. Ross, M.D., Inverness. *President-elect:* J. Vass, M.D., Tain. *Vice-Presidents:* J. Wilson, M.D., Inverness; G. Duff, M.D., Elgin. *Secretary and Treasurer:* J. W. N. Mackay, M.D., Elgin. *Members of Council:* Drs. T. Aitken, Bruce, Cameron, Craig, Macdonald, Macnee. *Representatives in the General Council of the Association:* The President and Secretary.

Drs. Duguid and Turner were appointed delegates to the North of Scotland Medical Association.

Dinner.—The members and their friends afterwards dined together.

MIDLAND BRANCH: SPECIAL GENERAL MEETING.

A SPECIAL general meeting of the above Branch was held in the Assembly Rooms, Boston, on Thursday, September 24th. In the absence of the President, Dr. MORRIS (Spalding) took the Chair.

New Rules.—After briefly addressing the members, Dr. MORRIS proposed a code of rules for the guidance of the Branch. The rules, after a little discussion, were unanimously adopted.

Papers.—The following papers were read.

1. On Tobacco. By Francis Snaith, M.D.

2. On some New Remedies for producing Sleep. By A. Mercer Adam, M.D.

3. On Venesection. By Walter Clegg, Esq.

New Members.—The following gentlemen were elected members of the Association: Thomas Nixon, L.R.C.P.Ed., Kirton; James A.

Storey, L.R.C.P.Ed., Sutterton; W. J. H. Wood, L.R.C.P.Ed., Boston; Frederick H. Atkinson, L.F.P.S.Glasg., Benington, Boston.

Dinner.—The members, with the Mayor and the Vicar of Boston, afterwards dined together at the Peacock Hotel.

SOUTH-EASTERN BRANCH: WEST KENT DISTRICT.

THE first meeting of the eighteenth session (1874-75) was held at Rochester on September 25th; ADAM RAE MARTIN, Esq., in the Chair.

The next meeting was appointed to be held at Maidstone, on November 20th; to be presided over by H. Cecil Smith, Esq.

New Members.—Two gentlemen were elected members of the Association without Branch membership; viz.: William Redmond, Esq., R.N.; and George Roper, M.D., of West Street, Finsbury Circus, E.C.

Paper.—A paper was read on Modes of Death in Hernia after Operation, by Frederick H. Edmonds, Esq.

The meeting discussed the subject of Provident Dispensaries. The principle of self-help was approved, but no resolution was passed on the subject.

Dinner.—The members and visitors dined at the Bull Hotel.

NORTH OF ENGLAND BRANCH: AUTUMNAL MEETING.

THE autumnal meeting of this Branch was held at the Convalescent Home, Saltburn-by-the-Sea, on Thursday, September 17th; the President, Dr. A. LEGAT, in the Chair. Twenty-two members and five visitors were present. Six new members were elected.

Letters.—A letter was read from Henry Pease, Esq., of Stanhope Castle, expressive of regret at being unable to be present to welcome the Branch to Saltburn-by-the-Sea. A letter was read from Mrs. Edward Charlton, acknowledging the receipt of the resolution of condolence upon the death of Edward Charlton, M.D., and thanking the members for their kind sympathy.

Papers.—The following were read.

1. Dr. H. J. YELD: The Health and Mortality of Towns and Villages, as affected by Sanitary Legislation. Dr. Yeld in the first place pointed out the various agencies at work which deteriorate the health of the people, increase the infant mortality, and produce that class of diseases termed zymotic, from which so many thousands of our countrymen and women die annually; and, secondly, showed how modern legislation tended either to stamp out such agencies or counteract the evil effects produced by them. By way of illustration, the reports on the sanitary condition of the borough of Newcastle-upon-Tyne and Sunderland were contrasted. In respect of the death-rate, it was stated that in Newcastle during 1873 it was 30.1 per 1,000 of the population, and in Sunderland 22.7 per 1,000. The total number of deaths in these two towns from preventable diseases of the zymotic class was 975 and 337 respectively, or rates equal to 7.4 and 3.2 per 1,000. The rates of mortality in children under one year were 7.8 and 7.2. The influence of density of population in increasing the general mortality of a district, and also producing and propagating zymotic disease, was unmistakably illustrated. To improper, unwholesome, and adulterated food, much of the infant mortality was attributed. The habit of feeding children on anything and everything was strongly condemned. Respecting intemperance as a cause of deterioration of health, it was affirmed that not only was it the means, directly and indirectly, of causing great loss of life among all classes of society, but it affected future generations by so retarding the mental and physical development of the children of the intemperate, that many grew up to manhood imbeciles and idiots, while others had to suffer for the sins of their forefathers by passing through life with enfeebled constitutions. The means provided by the legislature with a view of removing such agencies, or of counteracting the ill effects likely to be produced by them, in the various Acts of Parliament, were stated to be of little use, unless the responsible person at the head of affairs, whose duty it was to inquire into the various causes affecting the health of any particular locality or district, had power given him to compel the removal of the same. Such a responsible person was found in the medical officer of health, whose appointment was made compulsory by the Public Health Act of 1872. Accordingly, the appointments had been made by sanitary authorities throughout the country in a variety of ways and from different motives; those authorities which had the public interest at heart having appointed officers at fair salaries, who were not allowed to engage in private practice, so as to be able to devote their individual attention to the important duties connected with the office; while others had been

appointed at most contemptible salaries, merely to comply with the Act, and not with the intention of any good sanitary work being done. For a medical officer of health to carry out the duties of his office to his own satisfaction and that of his brother medical men and the public, it was much to be preferred that he should be free from the trammels and worries of practice, and other influences which would have a tendency to interfere with his carrying into effect many provisions of Local Government and other Acts, which, if put into operation, might injuriously affect his own private interests.—Dr. EASTWOOD, as Chairman of the Rural Sanitary District of Darlington, expressed himself in strong terms against the Public Health Act, with especial reference to the clashing of the rural and urban authorities. He thought it was an absurdity for each to appoint its own officers. He was in favour of large areas, especially in country districts, and chiefly in the disposal of the sewage. The great difficulty, as influencing the constitution of the rural boards, was the position in society from which the members were taken.—Dr. BYROM BRAMWELL, as an ex-officer of health, was in favour of medical officers of health being all independent of private practice. He advocated one medical officer of health with a wide area, and the Poor-law surgeons of the district as subordinate officers of health.—Dr. FOTHERGILL and Mr. HEDLEY also took part in the discussion.

2. Dr. J. W. EASTWOOD: A Case of Insanity, complicated with Partial Paralysis.

3. Mr. J. T. PARKINSON: A Case of Chronic Bright's Disease of the Kidneys (Small Contracted Variety).

4. Mr. J. T. PARKINSON: A Case of Paracentesis Thoracis.

5. Dr. G. H. PHILIPSON: A Case of Hydatid Disease of the Liver treated by Puncture.

Votes of Thanks.—Dr. BARKER moved, and it was carried, "That the best thanks of the meeting be given to the readers of the papers."

The PRESIDENT moved, "That the warmest thanks of the meeting be given to Henry Pease, Esq., Stanhope Castle, for his kindness in granting the use of the Convalescent Home for the purposes of the meeting." The resolution was carried.

Dinner.—The members and their friends dined together afterwards at the Alexandra Hotel, Saltburn; the President in the chair; and Dr. Philipson, Honorary Secretary of the Branch, in the vice-chair.

REPORTS OF SOCIETIES.

CLINICAL SOCIETY OF LONDON.

FRIDAY, OCTOBER 9TH, 1874.

! PRESCOTT HEWETT, F.R.C.S., President, in the Chair.

THE PRESIDENT exhibited a copy of the new volume of *Transactions*, and stated that all the gentlemen, British and foreign, who were elected Honorary Members of the Society at the last meeting, had written to acknowledge and accept the distinction thereby conferred.

Traumatic Stricture of Trachea.—Mr. HENRY LEE showed a patient from whom he had removed the upper ring of the trachea for traumatic stricture. The case had been already related in the proceedings of the Society just published. The patient had twice narrowly escaped suffocation, and had been relieved on each occasion by tracheotomy. The third operation, that of removing the upper ring of the trachea, which had been the cause of the stricture, was performed after the patient had lost his voice for six months. The patient was still obliged to wear a tube, and through the opening the second ring of the trachea could be seen encroaching somewhat on its cavity, illustrating the way in which the stricture had been produced. His speech was entirely restored by the operation. Mr. Lee remarked that, as far as he knew, this was the only case in which such an operation had been performed.

Bloodless Surgery.—Professor ESMARCH (of Kiel) read a paper on bloodless surgery, which will be found at p. 491 of this day's JOURNAL.

The PRESIDENT remarked that all the members were greatly obliged to Professor Esmarch for his communication, which he had read in such very admirable English; and he regretted that it was not known sufficiently early that the paper was to be read, or assuredly most of the hospital surgeons of London would have been present to join in the discussion.—Mr. MAC CORMAC, although one of the first in England to bring the method of Professor Esmarch into general notice, had not yet had sufficient cases to enable him to affirm or contradict the Professor's assertions respecting the decreased mortality after operations done according to his plan. He could substantiate the statement that no ill effects followed its adoption. It had been said that at one of the metropolitan hospitals gangrene of the margins of the flaps in

labours and the sympathetic expressions of his colleagues and friends. The College, however, which had thrice elected him their President, refused to be thus prevented from expressing its regard for the man and gratitude for his services. A warmly phrased vote of thanks, an order for the execution of his portrait, and a vote of one hundred guineas for the purchase of a testimonial gift, recorded the unanimous feeling of the Council; and the universal sorrow of the profession at his death gives witness that these kind feelings have not lost their force during the years which have since elapsed.

Of Arthur Jacob, the worst which can be said is that those objects which were nearest his heart he loved "not wisely but too well". On more than one occasion, the strength of his feeling and the vigour with which he went forward to his object gave him the appearance of intolerance in opinion and violence in action; and his unhesitating candour made for him antagonists, whom a more cautious and disingenuous diplomatist would have conciliated.

PATRICK M. MACKENZIE, M.D.

DR. PATRICK M. MACKENZIE was the youngest son of the late Kincaid Mackenzie, Esq., who was Lord Provost of Edinburgh in 1817-19, and was born in that city in 1821. He was educated at the academy and university of his native city, and graduated as M.D. in 1844. He proceeded to the Island of Tobago in 1847, and has since practised there, with the exception of two years, when he was home, in 1864-5 and 1871-2. For several years he has been a partner in several large sugar estates, and has been a member of the legislative council of the island.

Dr. Mackenzie had often been subject to attacks of fever, from exposure in the discharge of his duties; but his health continued pretty good till about the beginning of this year. A visit to Barbadoes in the spring failed to restore his health, and he delayed too long in coming home to a temperate climate. He was obliged to leave Tobago in the end of August in shattered health. He suffered much from diarrhoea during the voyage home in the *Tagus*, and his spleen was greatly enlarged. When he reached London on September 14th, he was much exhausted, and died at Upper Woburn Place, Tavistock Square, on the 19th. Dr. Mackenzie was a bachelor. He was much respected and beloved in the island of Tobago, being of a most kind and humane disposition.

MEDICAL NEWS.

APOTHECARIES' HALL.—The following gentlemen passed their examination in the science and practice of medicine, and received certificates to practise, on Thursday, October 8th, 1874.

Beatty, Thomas Carlyle, Seaham Harbour, Durham
Sewell, William, 6, Wilton Road West, Uxbridge Road

MEDICAL VACANCIES.

THE following vacancies are announced:—

BIRMINGHAM AND MIDLAND FREE HOSPITAL FOR SICK CHILDREN.—Surgeon.
BRENTFORD UNION.—Medical Officer and Public Vaccinator for No. 10 District, being the Workhouse: £140 per annum, and fees. Applications, 20th instant, to Wm. Ruston, Clerk, New Brentford.
BRIDGNORTH INFIRMARY AND DISPENSARY.—House-Surgeon: £100 per annum, furnished apartments, etc. Application, 24th instant, to the Honorary Secretaries.
BUILTH UNION.—Medical Officer for the Builth District: £55 per annum.
COUNTY AND COUNTY OF THE BOROUGH OF CARMARTHEN INFIRMARY.—Resident Medical Officer: £100 per annum, board, etc., or £120 per annum, lodging, etc., without board. Application to Howell Howells, Sec.
CRICHTON ROYAL INSTITUTION.—Dumfries—Assistant Medical Officer.
GATESHEAD DISPENSARY.—Assistant-Surgeon: £120 per annum. Application, 21st instant, to Joseph Jordan, Honorary Secretary, 25, Close, Newcastle-upon-Tyne.
DERBY AMALGAMATED FRIENDLY SOCIETIES' MEDICAL ASSOCIATION.—Surgeon: £150 per annum.
JERSEY GENERAL DISPENSARY.—Resident Visiting and Dispensing Medical Officer: £120 per annum, furnished rooms, etc. Applications to the Rev. P. A. Le Feuvre, Honorary Secretary.
KENT LUNATIC ASYLUM, Chatham, near Canterbury—Medical Superintendent: £600 per annum, house, etc. Application, 28th instant, to John Calaway, Clerk to the Committee, Canterbury.
KING'S COLLEGE HOSPITAL.—Assistant-Physician.
KING'S COLLEGE, London—Professor of Physiology.
LANCASHIRE GAOL, Lancaster Castle—Surgeon. Application, 31st instant, to Messrs. Birchall and Co., Deputy Clerks of the Peace, Preston.
LUTON UNION.—Medical Officer for the Barton District: £40 per annum.
MAGHERAFELT UNION, co. Londonderry—Medical Officer for the Magherafelt Dispensary District: £100 per annum.
METROPOLITAN FREE HOSPITAL.—Assistant-Physician. Applications, 21st instant, to the Committee.

MOHILL UNION, co. Leitrim—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Rynn Dispensary District: £120 per annum, and fees. Application, 20th instant, to Francis Gearty, Honorary Secretary, Furnalougha, Dromod.
NEWCASTLE-UPON-TYNE UNION.—Medical Officer for No. 3 District: £85 per annum.
NEWMARKET UNION.—Medical Officer for the Workhouse: £50 per annum and midwifery fees. Applications, 26th instant, to Thomas Ennon, Clerk.
NORTH RIDING LUNATIC ASYLUM, Clifton, York—Assistant Medical Officer.
NORTH STAFFORDSHIRE INFIRMARY, Hartshill—Junior Resident Medical Officer during remaining stay of present Senior, and Senior Resident Medical Officer afterwards, and Wife as Superintendent of Nurses: £250 first year, £300 a year afterwards, board, rooms, etc. Applications, 21st instant, to Ralph Hordley, Secretary.
RAMSGATE AND ST. LAWRENCE ROYAL DISPENSARY.—Resident Medical Officer: £100 per annum, furnished apartments, etc. Application, 20th instant, to A. R. Emmerson, Secretary.
ROYAL FREE HOSPITAL, Gray's Inn Road—Junior House-Surgeon.
SEAMEN'S HOSPITAL (late *Dreadnought*), Greenwich—Visiting Surgeon.
SOLIHULL UNION, Warwickshire—Medical Officer for the Knowle District: £34 per annum and fees. Medical Officer and Public Vaccinator for the Yardley District: £17 per annum and fees. Applications, 26th instant, to E. O. Smith, Clerk.
STAMFORD UNION, Lincolnshire—Medical Officer for the Wansford District: £25 per annum.
TOWCESTER UNION.—Medical Officer for the Blakesley District. £60 per annum and fees. Apply to W. Whitton, Clerk.
UNIVERSITY COLLEGE, London—Professor of Comparative Anatomy and Zoology. Applications, 31st inst., to John Robson, B.A., Secretary to Council.
WESTERN GENERAL DISPENSARY.—Resident Dispenser: £84 per annum to commence, furnished apartments, etc. Application, 19th instant, to William Kimpton, Secretary.
WESTMINSTER GENERAL DISPENSARY, Gerrard Street, Soho—Honorary Surgeon.
YORK COUNTY HOSPITAL.—House-Surgeon: £100 per annum, board, and lodging.

MEDICAL APPOINTMENTS.

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

ALLARDYCE, James, M.B., appointed Resident Assistant Medical Officer to the Durham Lunatic Asylum.
ANDREWS, R. J., M.R.C.S. Eng., appointed Resident Assistant Medical Officer to the Fisherton House Lunatic Asylum, Salisbury.
ATKINS, George P., L.R.C.P. Ed., appointed Resident Medical Officer to the Cork Street Fever Hospital, Dublin.
BAKER, Edward L., L.R.C.S. Ed., appointed a Resident Medical Officer to the York Dispensary, *vice* W. H. Spurgin, M.R.C.S. Eng., resigned.
BEATSON, George Thomas, M.B., appointed Senior House-Surgeon to the Newcastle-upon-Tyne Infirmary, *vice* F. Page, M.D.
BISHOP, Sydney O., L.R.C.P. Ed., appointed Resident Assistant Medical Officer to the Durham Lunatic Asylum.
CAMERON, John, M.B., appointed Medical Superintendent of the Argyll and Bute District Lunatic Asylum, *vice* James Rutherford, M.D.
CHAPMAN, Frederick R., M.B., appointed House-Surgeon to the Hull and Sculcoats Dispensary, *vice* R. Atkinson, L.S.A., deceased.
COSHAM, Wm. Raymond, M.B., appointed House-Surgeon and Secretary to the Stourbridge Dispensary, *vice* J. P. Oates, M.R.C.S., resigned.
COTTON, Holland J., M.B., appointed a House-Surgeon to the Edinburgh Royal Maternity Hospital.
HAMILTON, Francis G., M.R.C.S. Eng., appointed House-Surgeon to the Queen's Hospital, Birmingham.
HARVEY, Charles A., M.D., appointed Resident Apothecary and House-Surgeon to the South Charitable Infirmary and County Hospital, Cork, *vice* W. R. Tolerton, M.B., resigned.
JOHNSTON, John, M.B., C.M., appointed House-Surgeon to the West Bromwich District Hospital.
LEYS, P., M.B., appointed House-Surgeon to the Perth County and City Infirmary.
MURPHY, James, M.B., appointed Junior House-Surgeon to the Sunderland and Bishopwearmouth Infirmary.
NORMAN, Conolly, L.K.Q.C.P., appointed Assistant Medical Officer to the East Dispensary, Liverpool.
RABAGLIATI, Andrea C. F., M.D., appointed Assistant-Surgeon to the Bradford Eye and Ear Infirmary.
RUTHERFORD, James, M.D., appointed Medical Superintendent of the New Asylum for the Barony District of Glasgow.
SCHOLES, Richard E., M.B., appointed Assistant House-Surgeon to the Stockport Infirmary.
SMYTH, Frederick H., M.D., appointed Physician to the Cork Fever Hospital, *vice* H. M. Jones, M.D., resigned.
SWAIN, Edward, L.R.C.P. Ed., Assistant Medical Officer to the Surrey County Asylum, appointed Medical Superintendent of the Three Counties Asylum at Arlesey, *vice* Wm. Denne, F.R.C.S. Eng., resigned.
WADDELL, J. Craig, M.D., appointed an Honorary Medical Officer to the County Dispensary, Norwich.

SCHOLARSHIPS AT ST. MARY'S HOSPITAL.—The scholarships and exhibitions at St. Mary's Hospital Medical School have been awarded as follows: The scholarship in natural science to Mr. W. Pearce; the exhibition in natural science to Mr. F. A. Cox; the extra scholarship in natural science to Mr. C. M. Handfield Jones; the scholarship in classics and mathematics to Mr. H. N. Seager; the exhibition in classics and mathematics to Mr. C. M. Handfield Jones. The examiners were Dr. Cobbold, F.R.S., C. W. Heaton, Esq., Lecturer on Chemistry at the Charing Cross Hospital, and the Rev. Dr. West, Head Master of Epsom College.

OPERATION DAYS AT THE HOSPITALS.

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

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

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

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

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. Address by the President, Mr. Victor de Méric; also, a paper by him on "Ricord and his School". Dr. Theodore Williams, "On a Case of Ulcer of the Stomach successfully treated by Nutritive Injections".

FRIDAY.—Clinical Society of London, 8.30 P.M. Mr. Curtis, "Case of Vertigo, simulating Brain-disease, from fatigue of Internal Rectus Muscle of Eye"; Dr. Southey, "Case of Scirrhus Cancer of Pylorus, with Encephaloid Infiltration of Left Lung and Suprarenal Capsules".—Quekett Microscopical Club, 8 P.M. Mr. R. P. Williams, "On cutting Sections of the Eyes of Insects; and on a New Instrument for that purpose".

SATURDAY, October 17th.—Society of Medical Officers of Health, 7.30 P.M. Dr. Letheby (President), "Address on the Estimation of the Sanitary Condition of Communities and the Comparative Salubrity of Towns".

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, 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, 36, Great Queen Street, W.C.

Z. O.—There are obvious reasons for declining to furnish vaccine matter to unskilled hands. The error appears to have arisen from the carelessness of an individual, and not from any defect in the regulations.

BRONCHITIS, ASTHMA, ETC.

SIR,—I think it is only fair that Mr. Spurgin, who details in a letter to your JOURNAL his great success in the treatment of the above disease by iodide of potassium, should, in reply to his interrogators, name the doses of this medicine he uses in a more specific manner than "the usual doses of the various drugs mentioned". His friend, in a subsequent letter to your JOURNAL, does not carry the matter much further by referring to Tanner's *Index of Diseases*, where the dose ranges from two to thirty grains! The drug for such diseases has been well known to the profession through Dr. Headlam Greenhow's book; but if Mr. Spurgin have an improved mode of using it to that gentleman, and refuse to say what it is, of what value is his communication to the profession?

October 10th, 1874.

I am, etc.,

INQUIRER.

A BOTANIC SURGEON.

SIR,—The following is an advertisement, taken from the *Birmingham Daily Post* of September 29th.

"*Notice*.—The Botanic Dispensary, 34, Worcester Street, Birmingham. (Established more than thirty years).—Geo. Caldwell, Surgeon (Sole Proprietor), wishes to inform his numerous patients and customers in this district and throughout England, that, having changed his Assistant, he has resumed the management himself, and attends for prescribing and consultation from 10 o'clock in the morning. All orders and consultation letters to be addressed to Geo. Caldwell. He is the only practitioner who can give legal certificates.—Mark the Address: 34, Worcester street (near the bottom of street)."

Mr. Caldwell's name appears in the *Medical Register*, and also in the *Medical Directory*.

Birmingham, Sept. 30th, 1874.

I am, etc.,

M.D. Lond.

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, 36, Great Queen Street, W.C., and not to the Editor.

EMIGRATION CERTIFICATES.

SIR,—A short time ago, a labouring man brought to me certain printed documents from the New Zealand Emigration Society, at 7, Westminster Chambers, London, with a request that I would sign a certificate of health, for the information of this Society, respecting himself, his wife, and seven children. The following is a copy.

"I hereby certify that I have examined the above-named applicant (and his wife and children); that, to the best of my knowledge and belief, he (she, they) are in good health, free from any bodily deformity or mental defect likely to impair his (her, their) efficiency as labourers. I also certify that he (she, they) have all had the small-pox, or been vaccinated, and is (are) entirely free from any disorder usually considered infectious or contagious."

Putting the applicant off for a few days, I wrote to and received from the "Agent-General for New Zealand" letters, of which the following are copies.

"Sir,—A man has this morning brought to me your form of certificates for your emigration society, with a request that I should certify, according to a very searching and inclusive form, to the state of health of himself, his wife, and seven children. As this, if honestly done, would involve at least a couple of hours' close work and serious responsibility, I shall be glad to be informed, before I undertake all this, what fee is offered, and to whom I am to look for the same.—I am, etc.—To the Agent-General, etc."

Reply.—"7, Westminster Chambers, etc., September 24th, 1874.—Sir, I have received your letter of the 21st instant, and, in reply, have to state that intending emigrants are themselves required to defray the expense of the medical examination required by the regulations of this office.—I am, etc., for E. J. FEATHERSTON.—To G. S. Symmons, Esq."

As I, in common with some medical brethren, who highly estimate the value of their medical opinion, am inclined to feel my dignity offended by the offer of a ros. 6d. fee from an insurance office—as so comprehensive a certificate as this Society requires is worth £1 is., if it be worth a penny—and as it is out of the question that a labouring man, on starvation wages, should be able to pay even the fee of an insurance office, nothing is left for me but to decline the responsibility and honour of serving gratuitously the Agent-General of New Zealand, whose important functions, I judge, are not exercised at the same generous rate as that which the Society offers for the services of medical men. If what is worth having be worth paying for, it is a pity that emigration societies should seek to impose upon those from whom they need valuable assistance, by throwing the burden of the cost upon individuals whose very poverty induces their desire to emigrate, rather than take upon themselves to provide, out of the abundance of their own funds, and in the honourable and straightforward way one expects from men of business, for the due payment for advantages, for the want of which the Society must and ought to suffer, so far as medical men are concerned, if they be not paid for.

I am, etc.,

G. S. SYMMONS.

Ledbury, October 6th, 1874.

READING AT MEALS.

SIR,—To know whether "reading at meals" is injurious to health, and prone to cause indigestion, would be interesting to bachelors, as well as to "Bachelor", who asks the question in your last issue. In my opinion, light reading at meals is not injurious; still I should be sorry to say that, like conversation, it is beneficial and promotes digestion. Unlike conversation, there is that want of tone and cheerfulness derived from the pleasure we have in the company of others. The mere fact of some one being present with us, partaking of the same fare, gives us a certain amount of pleasure and comfort which no book, however interesting, can bestow. The cause of reading being injurious is not so much the diversion of blood from the stomach as the imperfect mastication of food; hence we see the same results to men of business who partake of their meals hurriedly, having only a limited time for each meal, which is altogether insufficient for the proper performance of mastication. When one reads during a meal, he is apt to bolt his food; mastication is then improperly or imperfectly accomplished. The same, of course, often takes place when one does not read during meals, if alone; but, should he be fortunate enough to have an agreeable companion, he is in no hurry to finish, has pleasure in interchanging ideas, masticates his food thoroughly, and thus digestion is promoted.

One, of course, would naturally think that reading would have the tendency to prolong mastication; but the reverse, as a rule, is the case: the eagerness to get to the next part, or finish an interesting part of a story, together with the pre-occupation of the mind, causes one to eat with greater rapidity, neglecting the first process of digestion, and forgetting that we are engaged in supplying materials proper for our existence.

Wigan, Oct. 3rd, 1874.

I am, etc.,

WM. BERRY, M.R.C.S.

LEAD-POISONING.

SIR,—In answer to Medicus's question in the JOURNAL of Sept. 17th, I may relate the following. An elderly lady, who had been advised to use a hair-wash to cool her head, came under my notice, complaining constantly of gripping pain in the bowels, for which no cause could be assigned. I was induced to look at her gums, when the "blue mark" was visible. A tablespoonful of the wash was directed to be used once a week. The composition was sold for a charitable purpose.

On the subject of lead-poisoning, I may add the following cases, when the amount of the mineral taken up must have been very small.

A blacksmith had suffered for six months from general muscular weakness, dyspepsia, great tenderness over the bowels, and constipation. On examining the gums, the "blue mark" was visible. Here the cause of the disease was at first hidden by the fact of the muscles of the back, loins, and thighs being most paralysed; but on inquiry, I found he was a horse-shoer, and that these muscles came more into use. Eight months previously, on only one occasion, he made a little putty with white-lead, and had no recollection of being brought into contact with lead in any other form.

A baker's man complained of cramp and muscular weakness in his back and arms. The blue mark was visible. Two months since, the kitchen where he sleeps, and which is used for the culinary purposes of the family, was painted. Here the muscles of the arm and back are most used in wheeling his cart and often stooping.

Both cases recovered under the use of iodide of potassium.

Hastings, October 1874.

I am, etc.,

J. F. B.

NOTICE TO ADVERTISERS.—Advertisements for insertion in the *BRITISH MEDICAL JOURNAL*, should be forwarded direct to the Publishing Office, 36, Great Queen Street, W.C., addressed to Mr. FOWKE, not later than *Thursday*, twelve o'clock.

NURSES FOR THE SICK POOR.

SIR,—From what has appeared in the daily papers, it seems that an association has been formed for the purpose of dealing with the above important subject. Now, sir, without wishing to disparage such a laudable effort, I cannot refrain from appealing to your experience on this important subject, by asking you whether you consider it possible for any private association to undertake and conduct a system of nursing throughout this vast metropolis in anything like a complete and satisfactory manner? Anticipating your answer to be "No", I would add my practical experience (as a district Poor-law medical officer of some years' standing), in confirmation of your expected answer. Take, for example, a case which came under my notice. A pauper patient lay dangerously ill (too ill to be removed without danger to life) in a small dirty room, situated in a court immediately under the shadow of one of our churches. This poor patient's family consisted of a husband and one son, occupying the same room. When in health, the woman worked in the markets. The husband and son had occasional work; however, the three earned but very little, and probably that little was not made the best use of. This poor woman had to be attended and nursed by the boy, the husband being out, "trying to get a job". An aged pauper-nurse was obtained from the workhouse, and she performed the duties of nurse to the best of her "warped" ability, and carried into effect what her ignorance and cunning dictated, such as well water-ing the wine, drinking the strong tea, cooking the "tit-bits" for herself, etc. Such a state of things could not continue without increased danger to the patient, so application was made for additional assistance at St. John's House, and one of the "Sisters" kindly went to the case at once. Now, the introduction of this skilled nurse at this period resulted in the recovery of this poor woman; but I learned the lesson, that this skilled nurse felt like "the carpenter without his tools" in this wretched sick woman's room. The patient could not be properly washed; there were no means for heating sufficient water; no cooking utensils; therefore, no means for preparing the patient's nourishment. Then, is it proper or healthy to patient or nurse for cooking to go on within a few feet of the sufferer's bed? The coals were kept in a box under the patient's bed. There was no china-ware of any service. Tea, bread, groceries, even money for coals and wood, blankets, sheets, meat, and wine, could be obtained from the workhouse authorities; but in this case there were no domestic utensils for preparing the articles for the patient's use. Then, again, who was to do this work? A "nurse's" duties are not to be mixed up with cleaning a pauper's filthy room, etc.: her duties are confined to the patient's wants and requirements. The Sister could superintend, and the pauper-nurse would make the tea and water the wine, and, if young and strong enough, might scrub the room, and assist in moving the patient and take away dirty linen.

Therefore, to introduce "nursing for the sick poor", without supplying the other innumerable domestic and invalid necessities, would be like getting a carpenter to build without tools or materials.

Although these remarks apply to one particular case, yet the conditions described may be considered to exist in various degrees in almost every sick poor person's case throughout the metropolis or the country.

What I suggest to meet this national deficiency is, that the subject be taken up by the Government. Let Local Sick Committees be formed in every district, or parish, or union, to co-operate with the existing local authorities; the Local Sick Committee to have at their disposal "stores for the use of the sick", nurses ready to be despatched, etc.; disinfecting and cleansing apparatuses, deodorising materials, and everything else that will save suffering or prolong life, or stay the progress of disease and promote the health of the inhabitants. These Local Committees could look to the present Sick Asylum Committee as their centre or head. Each Local Committee could make weekly returns of the sick to the Central Committee; and the Central Committee could publish a weekly statistical return of the sick, in a similar manner as the return now published of the number of persons in receipt of relief by the statistical department of the Central Board. How much better the health departments could work and discharge their duties with the aid of a system of this kind.

The dispensaries and hospitals should also be called upon to furnish returns to the Central Committee. Thus a vast system of supervision and registration of the sick would be maintained throughout the metropolis or country, the only exception being "private returns from private medical practitioners".

Lastly, district visiting could be more efficiently carried out through these local sick committees, for no sick person need ever escape being visited. You are aware that the relieving officer has to visit all poor receiving out-door relief, including the "sick" lying-in woman. Such visits are objectionable, both to the sufferer and to the relieving officer.

I think I have said sufficient to show that no "private association", however numerous, could carry out a perfect system of nursing the sick poor in London without clashing most seriously with our present Poor-law administration; and without the co-operation of the Poor-law system it would be equally impossible to reach the most deserving cases.

There never has been any complete system for nursing the sick pauper at his home, except only as stated in the case mentioned above. No doubt it is high time that this deficiency in our Poor-law administration was met; and I think the plan I have sketched would answer most completely, and meet all the objects which this new "Association" contemplates, and which, I say, the members will never be able to carry into practice single-handed.

Apologising for troubling you with such a long letter, I am, etc.,
S. CARTWRIGHT REED, M.D., lately, for Eight Years, District Medical Officer West London Union.
London, Sept. 29th, 1874.

DISPUTED MIDWIFERY FEES.

SIR,—Your correspondent "Institute" will find the information he seeks in your *JOURNAL* of September 23rd, 1871. I am, etc.,

Cradley Heath, near Brierley Hill, Sept. 23rd, 1874. T. STANDISH.

* * We are obliged to Mr. Standish for his note. The information to which he refers was contained in a letter from Mr. R. Gillard, who stated that on two occasions, while in practice in Yorkshire, he brought actions for recovery of midwifery fees. In the first case, he was engaged to attend; but the patient removed from the place, and sent for some one nearer. In the second case, he was not engaged, but was sent for, and was driving to the patient's house, when he was met with a message that another practitioner had been called in. In both cases, judgment was given in his favour; it being decided that the engagement to attend in the one case, and the message in the other, were "retainers".

NOTICES of Births, Deaths, Marriages, and Appointments, intended for insertion in the *BRITISH MEDICAL JOURNAL*, should arrive at the Office not later than 10 A.M. on Thursday.

MOSQUITO BITES.

SIR,—Mr. W. H. Flower, in his *Notes of Experiences in Egypt*, grows quite eloquent when talking about mosquitoes. It is very evident he has been well bothered by them. They are certainly exceedingly unpleasant bedfellows to most of people; but, curiously enough, I have lain among thousands of them without any protection, and have not been bitten. However, when at Calcutta, I was severely bitten, but I never felt the bites, only the irritation resulting from them on awakening the next morning. It is about the relief of this irritation that I wish to give a hint to Mr. Flower and your readers. Mr. Flower says: "With respect to the treatment of these stings, there is only one golden rule to be followed—do not rub them or scratch them, otherwise whatever suffering they may entail will be doubled or trebled. The usual applications of salvolatile, eau de Cologne, etc., appear to have but little efficacy." What he remarks about rubbing and scratching is very true; and I have certainly never found the applications he mentions of any use, but I could always allay the itching by rubbing olive oil over each bite, the relief usually lasting from one to two hours, at the end of which time I used to apply more oil if the itching returned: the oil also seemed to relieve the swelling that often ensues from the bites. This remedy is not original; it is very commonly known at Calcutta. I only mention it in order that mosquito-plagued persons may thereby obtain a little relief, and, as a consequence, see strange countries in a more pleasant light.

I am, etc.,
Newcastle-on-Tyne, Sept. 20th.

W. J. BARKAS, M.R.C.S. Eng., etc.

ON THE ANTISEPTIC TREATMENT OF PUERPERAL PYEMIA.

SIR,—Many practitioners, I should think, must have found out for themselves the use of dilute Condy's fluid as an injection in cases of offensive uterine discharge, soon after they began to use that fluid at all. I myself first used it in this way so long ago as November 1866. I have often mentioned it to my friends, and I know that several lives have been very distinctly saved by it. In a case which occurred about two months ago in the practice of a friend, a primipara, on the sixth day after instrumental confinement, had offensive discharge, shiverings, and a temperature of 105.6. The injection was then freely used every four hours until the discharge was no longer offensive; and, as the intestines had already been well cleared, a quinine and morphia mixture was given. After the first injection, there were no more rigors; the temperature began at once to decline; and the patient recovered in a very few days—a result which my experience of the effect of the permanganate in similar cases enabled me very confidently to predict.

I mention this case especially because the high temperature was recorded; but I can at this moment recall at least four cases of equal or even of apparently greater severity, in which the same treatment had a like successful result, but in which no thermometric observation was made. I find, however, that in the second case in which I used this injection (November 22nd, 1866), the pulse, which had previously been 120, quickly fell to 95, and on the next day to 90.

I am, etc., THOMAS CHURTON.

Erith, S.E., September 21st, 1874.

WE are indebted to correspondents for the following periodicals, containing news, reports, and other matters of medical interest:—The Birmingham Daily Gazette, Oct. 12th; 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 Maclesfield Advertiser; The Auckland Times and Herald; The Northampton Mercury; The Knaresborough Post; The Wrexham Advertiser; The Northern Daily Express; The Eastern Daily Press; The Western Daily Mercury; The Ulster General Advertiser; The Brighton Examiner; The Lincolnshire Chronicle; The Melbourne Argus; The Isle of Wight Observer; The Accrington Times; The Leighton Buzzard Observer; The Lincolnshire Chronicle; The Daily Telegraph; The Durham Chronicle; The Halifax Evening Reporter; The Elgin Courier; The Sheffield Daily Telegraph; The Hampshire Telegraph; The Sheffield and Rotherham Independent; The Standard; The Portsmouth Times; The Armagh Guardian; The Morpeth Herald; The Bradford Observer; The Stroud News and Gloucestershire Advertiser; The Glasgow Herald; etc.

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

Dr. J. Matthews Duncan, Edinburgh; Mr. R. Barwell, London; Dr. George Johnson, London; Cosmopolitan; Professor Maclean, Netley; Dr. J. Crichton Browne, Wakefield; Dr. David, Grange-on-Sands; Mr. C. Steele, Clifton; Our Paris Correspondent; Mr. A. Godrich, Brompton; Dr. Mackintosh, Chesterfield; Dr. Douglas Powell, London; Dr. Kerr, London; Inquirer; Dr. J. Hughes Bennett, Edinburgh; M.D. Ed.; Sir John Rose Cormack, Paris; Dr. Theodore Williams, London; A.S.; Mr. Flower, London; M.R.C.S. Eng.; Mr. Ashburton Thompson, London; Mr. F. G. Ellerton, Huddersfield; Dr. Procter, York; An Associate; Mr. T. P. Pick, London; Dr. R. C. Shettle, Reading; Mr. W. Fairlie Clarke, London; Dr. Gamgee, Edinburgh; Dr. Heaton, Leeds; The Secretary of the Microscopical Club; Dr. MacCarthy, Wellington, Salop; Mr. Wickham Barnes, London; Dr. Barnes, Carlisle; Dr. Herbert Page, London; Mr. Waren Tay, London; Mr. Churton, Erith; Mr. Ingpen, London; Our Birmingham Correspondent; Dr. Clay Waddell, Norwich; Dr. Moon, Brighton; Dr. James Russell, Birmingham; Dr. Griffiths, Sheffield; Dr. Grigg, London; Dr. Milner Fothergill, London; Dr. Shingleton Smith, Clifton; Mr. Edlin, Plymouth; Our Glasgow Correspondent; Mr. Coates, Clifton; Mr. Llewellyn Thomas, 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. Lever, Norwich; Mr. Draper, York; Our Dublin Correspondent; Dr. Northcote Vinen, London; Dr. Corfield, London; A Correspondent; Mr. Charles Maclean, Applecross; Dr. Walter Dickson, London; Dr. Richards, Winchester; Dr. Finlayson, Glasgow; Mr. John Leigh, Manchester; Dr. Shepherd, London; Dr. Gibb, Newcastle; Justice; Dr. Symes, Liverpool; Dr. Balthazar Foster, Birmingham; Mr. G. E. Moore, London; Dr. Hall Davis, London; etc.