

of the answers thereto, but not to resign the custody of these papers. 3. That a three months' course of practical instruction in animal histology be added to the curriculum for the degree of M.B., under the superintendence of the King's Professor of the Institutes of Medicine. And that the bursar of Trinity College be authorised to expend a sum not exceeding £110 in the purchase of instruments for that purpose."

THE PROFESSORSHIP OF CHEMISTRY IN THE DUBLIN UNIVERSITY MEDICAL SCHOOL.

PROFESSOR APJOHN has resigned this important office. Dr. Apjohn will continue to discharge the duties of the professorship during the present session, and then this distinguished veteran will retire from active medical teaching after a service of half a century. Dr. Apjohn will, we understand, still continue to hold the professorship of mineralogy in the University, and the lectureship on chemistry in the Engineering School of Trinity College, so that the University will not at once part company with their distinguished professor. The chair now virtually vacant will have an endowment from the University of £500 *per annum*, together with share of the students' fees. Several candidates are spoken of as likely for the vacant chair, but the favourite seems to be Dr. Reynolds, the present professor in the College of Surgeons and Royal Dublin Society.

KING AND QUEEN'S COLLEGE OF PHYSICIANS IN IRELAND.

AT the annual stated meeting of the College, held on Monday, October 19th, the following officers were elected for the ensuing year:—*President*: Dr. James F. Duncan. *Censors*: Dr. Henry Kennedy (Vice-President), Dr. Lombe Atthill, Dr. Arthur W. Foot, Dr. Walter G. Smith. *Registrar*: Dr. J. Magee Finny. *Treasurer*: Dr. Aquilla Smith. *Examiners in Midwifery*: Dr. Edward B. Sinclair, Dr. F. Churchill, jun. *Professor of Medical Jurisprudence*: Dr. R. Travers. *Representative on the General Medical Council*: Dr. A. Smith.

DUBLIN HOSPITAL SUNDAY.

THE Committee of the Meath Hospital, among some other institutions, have determined to disconnect themselves from this movement, and not to accept any portion of the funds collected. The Hospital for Incurables also, at a late meeting, have adopted a similar procedure. The Council of the Dublin Hospital Sunday have not yet made public the names of the various hospitals which are to receive a moiety of the collection to be held in 125 churches on November 15th; and a good deal of discussion has arisen from this unaccountable proceeding. It is rumoured that various hospitals in Dublin, whose management is practically altogether in the hands of Roman Catholics, will receive an equal allowance with other institutions; and, as Cardinal Cullen has refused to permit any chapel in Dublin joining the movement, it naturally, if true, has caused a considerable amount of opposition to an undertaking otherwise unobjectionable.

CARLOW UNION.

THE medical officers of this Union have memorialised the Local Government Board, stating that their salaries as sanitary officers have been fixed by the Board of Guardians at the small sum of £10 *each per annum*; and observing that, if they are expected to perform their new duties as educated gentlemen would desire to do, a fair and equitable salary should be assigned to them; and requesting the Board to rectify the decision of the Carlow Board of Guardians.

ROYAL COLLEGE OF SURGEONS' SCHOOL OF MEDICINE.

DR. REYNOLDS delivered the opening address on Monday last to a crowded audience. He called attention to many topics of public interest, and specially to the probable effects of the Public Health Act on the status and education of the medical profession in Ireland. We are afraid his advice as to patience in observing the working of the Act, although no doubt very nice, will not be followed by those who are smarting under the injustice of insultingly small salaries for hard work. Dr. Reynolds performed his difficult task with ability and credit to himself, and satisfaction to his audience.

ASSOCIATION INTELLIGENCE.

NOTICE OF MEETING.

THE First General Meeting of the British Medical Association, incorporated under the Companies' Acts 1862-1867, will be held at the Queen's Hotel, London and North Western Railway Station, Birmingham, on Wednesday, the 4th day of November next, at five o'clock in the afternoon.

Dated this 22nd day of October, 1874.

FRANCIS FOWKE,
General Secretary.

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: AUTUMNAL MEETING.

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

Communications.—The following communications were made:

1. Dr. EASTWOOD: On the Early Symptoms of General Paralysis of the Insane and the importance of recognising them.
2. Mr. R. B. COOKE introduced the subject of Hydrophobia for discussion, in which several members took part; and Dr. Eddison gave an account of several cases he had seen in the Leeds Infirmary.
3. Mr. HUSBAND related Two Cases of Aneurism, having special reference to the treatment of that disease by digital pressure.
4. Mr. TEALE read a paper on several interesting Surgical Cases.

Dinner.—After the meeting, about twenty members dined together at the Hotel.

SOUTH-EASTERN BRANCH: EAST SURREY DISTRICT.

A MEETING was held on October 22nd, at the White Hart Hotel, Reigate. Present: C. HOLMAN, M.D., in the chair, and twenty-two members and twelve visitors.

Next Meeting.—It was agreed that the next meeting should be held at Croydon on December 10th; Dr. Lanchester in the chair.

Papers, etc.—Dr. P. H. PYE-SMITH read some cases of Abdominal Tumour. The first case was in a woman of movable kidney on the right side. He described the affection as more common in women than in men. The second case, in a woman, was a tumour of the hypogastrium, which proved to be distended bladder from retroversion of the womb and pressure on the neck of the bladder. The third case, also in a woman, was one of tumour of the same position, with fluctuation, proved to be unilocular ovarian cyst. The fourth case, in a child aged 2, was one of tumour in the left lumbar region, with healthy urine; on puncture with a trocar, the tumour showed elastic soft sarcomatous tissue, and was supposed to be sarcomatous kidney with cyst. On *post mortem* examination, the disease was found to be in the glands behind the kidney, with the kidney flattened out over the mass. In the fifth case, a man, aged 40, suffered from distended stomach, without tumour or evidence of pyloric obstruction. The diagnosis was chronic gastritis. The patient died in two hours, after sudden faintness; and, on *post mortem* examination, a large carcinomatous deposit was found in the glands at the back of the abdomen and thorax. The man had a testicle removed two years before. The sixth case was one of malignant disease, in a woman, after removal of the breast. The first appearance of tumour in the breast was in March, 1873; she died in February, 1874. The seventh case was one of cancer of the liver, secondary. There was no evidence of disease of the stomach during life. On *post mortem* examination, it was found to be melanotic cancer of the liver secondary to cancer of the rectum. The eighth case was one of enlarged liver, due to impacted gall-stone. There were no symptoms till a week before admission, then sickness, pain, and jaundice. The ninth case was that of a boy, aged 16, having enlarged liver, with nodules and hepatic dropsy. There was no history of drinking. His urine was healthy. He had convulsions, and died comatose. On *post mortem* examination, cirrhosis of the liver was found, the organ weighing double the average weight; the increase of size was due to fat.—A discussion ensued, in which Mr.

Marshall, Mr. Howard Marsh, Dr. Galton, and Dr. Wiltshire took part.

2. Dr. GRABHAM read Remarks on the Origin, Varieties, and Termination of Idiocy.—Mr. HEARNDEN inquired how often in the cases of consanguinity of parents, there were Jewish parents.—Dr. GRABHAM stated that he knew of only three cases of Jewish parentage in the asylum. He quite agreed that many cases were referable to prolonged parturition.—In reply to Dr. Pye-Smith, Dr. GRABHAM stated that in one case of cretinism, he noticed, on *post mortem* examination, a peculiar flattening of the base of the skull.—Dr. WITHERS MOORE referred to the importance of the question as to the Jewish persuasion, in relation to the absence of tubercle and syphilis and the frequent intermarriages among Jews.—Dr. GRABHAM recalled only 6 per cent. of parental consanguinity, more than half of tuberculosis. Dr. LANCHESTER had seen at the Victoria Chest Hospital frequent cases of tubercle among Jews.—Mr. HECKSTALL SMITH believed that the fear of consanguineous marriages was much exaggerated.—It was proposed by Mr. HECKSTALL SMITH, and seconded by Dr. HALL—“That the paper of Dr. Grraham be offered to the JOURNAL for publication.”

Dinner: Testimonial to Dr. Lanchester.—Thirty-two members and visitors sat down to dinner. Among the visitors were Sir George Burrows, Mr. Curling, Rev. Dr. West, and Dr. C. T. Williams. The testimonial to Dr. Lanchester, consisting of a marble and bronze clock with bronze candelabra, was presented in graceful terms by Sir George Burrows, and appropriately acknowledged.

SPECIAL CORRESPONDENCE.

EDINBURGH.

[FROM OUR OWN CORRESPONDENT.]

The Medical School.—*Lady Medical Students.*—*Royal College of Surgeons.*—*Health of Edinburgh.*—*The Edinburgh Veterinary College.*—*The University.*—*Royal Medical Society.*

EDINBURGH has now filled again, and active preparations are being made for the winter's campaign of lecturing at the medical schools. There are an unusually large number of lecturers in the extra-academical school in the field this year; surgery being represented by five as before, pathology by three, of whom Dr. Coghill appears for the first time. Dr. McKendrick adds a third to the two courses of physiology; while Dr. Smart opens out new ground by a special course on hygiene and public health. The increasing number of lecturers, as well as the annually increasing number of students, serves to show the healthy and flourishing condition of the medical school.

Whether the body of ladies who were studying here last winter and summer are to be here again for this session has not transpired, but probably the greater conveniences offered in London will attract them thither.

At a meeting of the Royal College of Surgeons held last week, Dr. Simson was re-elected president for the coming year, and Dr. Omond was re-elected secretary. The council and examiners were also elected.

The general health of the town has been good, the weekly mortality ranging from 20 to 22 per 1000 for some weeks past. There have, however, been a good many cases of typhus from the Cowgate and High Street. They are sent into the Infirmary, or otherwise isolated, as soon as they are discovered; and thus the disease is prevented from becoming general. We have heard of several cases of the introduction of scarlet fever from the watering-places on the east coast, where there was a severe epidemic of an unfavourable type during the summer months; but, as most of these were in families of the better classes, the disease has not spread to any extent.

The winter session of the Veterinary College was inaugurated on Wednesday week, by a meeting under the presidency of the Lord Provost, who expressed a confident hope that the College had now emerged from the troubles which for long had been keeping it down, and under the present management would go on and prosper. The new Principal, Mr. Whalley, then delivered an inaugural address, pointing out the general aim and scope of veterinary medicine and surgery, and giving the students some information as to the work which lay before them, and some advice as to their conduct in connection with the College.

The University will open for the session on Monday next with an address by the Principal, Sir Alexander Grant, to be followed on Tuesday by the general commencement of lectures.

On the opening night of the Royal Medical Society, Friday, November 6th, Professor Maclagan has kindly consented to deliver an address to the members of the Society and all students who choose to attend.

REPORTS OF SOCIETIES.

ROYAL MEDICAL AND CHIRURGICAL SOCIETY.

TUESDAY, OCTOBER 13TH, 1874.

C. J. B. WILLIAMS, M.D., F.R.S., President, in the Chair.

ON THE PATHOLOGY AND TREATMENT OF CHOLERA BY THE SUBCUTANEOUS INJECTION OF CHLORAL HYDRATE. BY AUGUSTUS R. HALL, SURGEON, R.A.

(Communicated by Dr. GEORGE JOHNSON.)

Mr. HALL said that the treatment of the collapse of cholera by the hypodermic injection of chloral hydrate, had been, so far, comparatively successful. The Government of India had published reports on the subject in their *Gazette* of February 14th, 1874. The personal experience of the writer showed that the diarrhoea was perfectly painless, and the vomiting unattended with nausea. The pulse was at first hard, and then small, before ceasing to be felt. Meanwhile, the heart contracted forcibly, showing there was no tendency to syncope. The cramps in the voluntary muscles caused the real pain in cholera. The voice was squeaky before it became sepulchral. There was suppression of urine. As a rule, there was no loss of consciousness. Great thirst was always present. The comparative rapidity with which persons who survived an attack generally regained their health, tended to prove that no very serious permanent changes had taken place, either in the blood or in the intestinal canal. When water and oxygen could get to the blood, it performed its functions properly, and the epithelium was not apparently thrown off from the intestines to any great extent during life. The symptoms of collapse could be explained, chiefly by the experiments of Brown-Séquard, by great irritation of the sympathetic nervous system. The morbid influence of cholera exercised, probably, a stimulating action on the vaso-motor centres, producing increased heart action, contraction of the muscular walls of all the arteries, and, at first, augmented blood-pressure. Dr. Parkes had shown the frequency of copious micturition of limpid urine in the early stage. This might be intimately related, according to Traube, to high arterial pressure. The heart contracted forcibly, but could not dilate normally, its muscular walls being spasmically affected. The excessive activity of the vaso-motor centres was so great that the inhibitory or dilating action of the vagus on the heart was not allowed to control it. The left heart got very little blood from the lungs on account of the contracted pulmonary arterioles not letting it pass, so it could only send that little into the arteries; hence the small pulse in the latter stage. The right heart could not pump the blood, forced into it by the gorged vena cava, into the lungs, and was therefore full, and found so after death. The gorged systemic veins apparently caused the blue colour of the face and skin. The peculiar choleraic voice was not due to want of air passing into and out of the lungs. It was presumed to be caused by the abnormal condition of the nerves which supply the larynx. The cramps might be caused by the cutting off of the blood-supply to portions of the muscles by the contracted state of their arterioles. Dr. C. B. Radcliffe had stated that contraction of muscle is a temporary death. The vomiting was apparently caused by the irritated state of the nerves supplying the stomach. The evacuations from the bowels might be the result of transudation from the distended nervous radicles of the portal system. The vomiting and purging seemed to be of secondary importance. It was the vaso-motor centres that produced asphyxia by their action on the heart and lungs, and to these our whole attention should be directed. The urinary bladder was generally contracted “to the size of a walnut”. Abortions frequently occurred in pregnant women, the fetus being often expelled alive, indicating spasmodic contraction of the uterus as the cause. The perfect consciousness of the patient during the attack made it probable that there was no tendency to real syncope. It was presumed that there was spasm of all the arteries of the body, and that the cause of death was asphyxia. To overcome this, pure sedatives, which soothed the irritated nerve-centres, and so put a stop to spasms, were recommended. It was of no good to give medicines by the mouth, as they were generally rejected at once; they must, therefore, be introduced subcutaneously. Practically, the best agent was chloral hydrate, which was a powerful sedative without exerting any primary stimulating action. The strength of the solution should be one part of chloral in ten of water. Ten grains in one hundred minims of water would generally suffice, put under the skin of the arms or legs in four or five different places. If the solution were stronger than this, it would probably cause ulceration. The patient generally craved for cold water, and this might be given in any quantity; but no opium or

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 22nd, 1874.

Bower, Reginald, Knowle, Warwickshire

James, Walter Culver, 129, Kennington Park Road

Webb, Charles Louis, The Welches, Bentley, near Farnham

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

Twining, Alfred Hughes

KING AND QUEEN'S COLLEGE OF PHYSICIANS IN IRELAND.—At the usual monthly examination meeting of the College, held on Tuesday, Wednesday, and Thursday, October 13th, 14th, and 15th, 1874, the following candidates received the License to Practise Medicine.

Campbell, Colin George Warren, Michael Aloisius
Colgan, Henry Weddick, John

The License in Midwifery was granted to—

Campbell, Colin George Weddick, John
Chatterton, William Wybrants, Jonathan
Warren, Michael Aloisius

MEDICAL VACANCIES.

The following vacancies are announced:—

ABBEYLEIX UNION, Queen's County—Apothecary for the Workhouse: £25 per annum.

BALIEBOROUGH UNION, co. Cavan—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Crosshane Dispensary District. Application, 7th November, to Patrick Morgan, Hon. Sec., Lisnabrantry, Virginia.—Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Shercock Dispensary District: £70 per annum, and fees. Applications, 11th Nov., to Stephen Radcliff, Hon. Sec.

BELGRAVE HOSPITAL FOR CHILDREN—Physician. Applications, 31st instant, to the Honorary Secretaries.

BIRMINGHAM AND MIDLAND FREE HOSPITAL FOR SICK CHILDREN—Surgeon. Application, 4th November, to the Medical Board.

CENTRAL LONDON OPHTHALMIC HOSPITAL, Gray's Inn Road—Assistant Surgeon. Application, 7th November, to the Secretary.

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, 16th Nov., to Howell Howells, Secretary.

COVENTRY UNION—Medical Officer for No. 3 District: £63 per annum, and fees.

DUNFANAGHY UNION, co. Donegal—Second Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Cross-roads (Falcarragh) Dispensary District: £100 per annum, and fees. Application, 6th November, to the Rev. V. P. Griffith, Honorary Secretary.

EAST SUSSEX, HASTINGS, and ST. LEONARD'S INFIRMARY—Assistant Surgeon. Application, 12th November, to W. J. Gant, Secretary.

ENNISCORTHY DISTRICT LUNATIC ASYLUM—Resident Medical Superintendent.

FRIENDLY SOCIETIES' MEDICAL INSTITUTE, Northampton—Out-door Assistant: £120 per annum. Applications, November 14th, to Secretary.

HINCKLEY UNION, Leicestershire—Medical Officer for the Earl Shilton District: £30 per annum, and fees. Application, 7th November, to Samuel Preston, Clerk.

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.

LANCASHIRE GAOL, Lancaster Castle—Surgeon. Application, 31st instant, to Messrs. Birchall and Co., Deputy Clerks of the Peace, Preston.

***LAUNCESTON RURAL SANITARY DISTRICT**—Medical Officer of Health.

***LAUNCESTON URBAN SANITARY DISTRICT**—Medical Officer of Health.

LINCOLN MEDICAL INSTITUTE of the M. U. ODD FELLOWS—Medical Officer: £150 per annum, house, and 10s. 6d. each case of Midwifery. Applications, 1st November, to Mr. Samuel Gadd, 347, High Street, Lincoln.

MAGHERAFELT UNION, co. Londonderry—Medical Officer for the Workhouse, and Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Magherafelt Dispensary District: £80 per annum, and £115 per annum, and fees, respectively.

MIDDLESEX HOSPITAL—Resident Physician's Assistant.—Resident Obstetric Assistant. Applications, 31st instant, to H. M. Evans, Sec. Sup't.

NORTH WALES COUNTIES LUNATIC ASYLUM, Denbigh—Medical Superintendent: £350 per annum to commence, house, etc. Application, 12th November, to John Robinson, Clerk to Visitors.

PENRITH UNION—Medical Officer for the Kirkoswald No. 1 District.

QUEEN'S HOSPITAL, Birmingham—Resident Secretary and Medical Superintendent (unmarried): £150 per annum, board, and lodging. Applications, November 25th, to the Chairman of the House Committee.

ROYAL INSTITUTION OF GREAT BRITAIN—Fullerian Professor of Physiology.

ST. GEORGE DISPENSARY, Mount Street—Resident Medical Officer: £150 per annum, with residence. Application, 31st instant, to G. H. Leah, jun., Secretary, 73, Park Street, W.

SCHOOL BOARD FOR LONDON—Medical Officer, Industrial School at Brentwood. Applications, 4th November, to the Clerk of the Board, Victoria Embankment.

SEAMEN'S HOSPITAL (late *Dreadnought*), Greenwich—Visiting Surgeon. Application, 7th November, to H. C. Burdett, Secretary.

TRINITY COLLEGE, Dublin—Professor of Chemistry: £500 per annum, and fees. Applications to the Rev. Dr. Haughton, Trinity College.

UNIVERSITY COLLEGE, London—Professor of Comparative Anatomy and Zoology. Applications, 31st inst., to John Robson, B.A., Secretary to Council.

WELLS (Norfolk) URBAN and PORT SANITARY DISTRICTS—Medical Officer of Health: £15 and £5.

WEST LONDON HOSPITAL, Hammersmith—One House-Surgeon. Applications, 9th November, to T. Alexander, Secretary.

WHITEHAVEN UNION—Medical Officer for the Lamplough District: £30 per annum.

YORK COUNTY HOSPITAL—House-Surgeon: £100 per annum, board, and lodging. Application, 31st instant, to Robert Holtby, Secretary, 5, New Street, York.

MEDICAL APPOINTMENTS.

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

BARTON, James E., L.R.C.P.Ed., appointed Assistant Medical Officer to the Surrey County Asylum, Brookwood, *vice* E. Swain, L.R.C.P.Ed.

CRAWFORD, William, M.B., appointed Assistant House-Surgeon to the Carlisle Dispensary.

HAMERTON, George A., M.R.C.S.Eng., appointed Resident Assistant Medical Officer to the Lambeth Infirmary.

JAMES, Alexander, M.B., appointed House-Surgeon to the Liverpool Infirmary for Children.

JOHNSTON, John, M.B., appointed House-Surgeon to the West Bromwich District Hospital.

LAMMIMAN, Cleland, L.R.C.P., appointed House-Surgeon and Secretary to the Tunbridge Wells Infirmary, *vice* B. Rix., M.R.C.S., resigned.

MURRAY, Frederick R., L.K.Q.C.P., appointed Junior House-Surgeon to the Birkenhead Borough Hospital.

SCOTT, Robert, M.B., appointed House-Surgeon to the Dumfries and Galloway Royal Infirmary.

SEYMOUR, Francis, M.R.C.S.Eng., appointed Assistant Medical Officer to the Norfolk County Asylum, near Norwich, *vice* James Shaw, M.D., resigned.

VENN, Albert, M.B., appointed Assistant Physician to the Metropolitan Free Hospital, Devonshire Square, E.

WADDY, Henry E., L.R.C.P., elected Medical Officer to the County Prison, Gloucester, *vice* T. Hickes, M.R.C.S., resigned.

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.

MARRIAGE.

RITCHIE—ANDERSON—At Altamont, Blairgowrie, on October 20th, by the Rev. James Anderson, M.A., Fortevoit, Robert Peel Ritchie, M.D., Edinburgh, to Mary, daughter of the late James Anderson, Esq., of Bleaton, Perthshire.

DEATHS.

GREER, William, L.K.Q.C.P., of scarlatina, caught in the discharge of his duties, at Kirkcubbin, aged 27, on October 15th.

HAVENS, Philip, M.R.C.S.Eng., at Colchester, aged 69, on October 13th.

SHIELL, Thomas Wildridge, A.B., M.B., Resident Medical Superintendent to the Wexford County Lunatic Asylum, at Enniscorthy, on October 19th.

WOOD, Abraham, F.R.C.S., formerly of Rochdale, at Cookham Dean, Maidenhead, aged 78, on October 23rd.

THE LATE DR. THOMAS BALLARD.—A few of the private and professional friends of this much respected practitioner have determined, in token of their friendship and esteem, to place a simple but fitting memorial of him over his grave. Dr. Barrett, of 8, Cleveland Gardens, Hyde Park, has kindly undertaken to act as Treasurer.

THE LATE DR. EDMOND WATERS.—A monument has just been erected, at the back of the church in the Coventry Cemetery, to the memory of the above-named gentleman. The base is of marble and granite, and surmounted by a cross. The following is the inscription: “In affectionate memory of Edmond Waters, M.D., for thirty-one years surgeon to the Coventry Dispensary, who was suddenly taken away from his work to his rest, by a fall from his horse, July 15th, 1873. His patients and friends have erected this cross upon his grave. ‘Looking for the mercy of our Lord Jesus Christ unto eternal life.’”

TESTIMONIAL.—A very handsome testimonial—consisting of a magnificent timepiece, a purse containing 135 sovereigns, and a brooch from his daughter—was presented last week to John Caskie, Esq., L.F.P.S.G., of Stewarton, Ayrshire, by his numerous patients and admiring friends. Mr. Caskie has practised there for many years with great success, and is now still active at his duties, though upwards of seventy-five years of age.

A FAITHFUL ASSISTANT.—We are asked by Dr. Osborne of Southampton to record the fact of the presentation of a very kind and complimentary address, together with a purse of £35, to Mr. M. H. P. Cuff, who has been acting for nearly seven years as his assistant, during which time he has, by his courteous conduct and unvarying kindness, won the respect and goodwill of all classes. He is leaving Bitterne for another sphere of usefulness, where we hope he may meet with that success he so fully deserves.

* The Local Government Board has recommended that one Medical Officer of Health shall be appointed for these two districts.

OPERATION DAYS AT THE HOSPITALS.

MONDAY Metropolitan Free, 2 p.m.—St. Mark's, 9 a.m. and 2 p.m.—Royal London Ophthalmic, 11 a.m.—Royal Westminster Ophthalmic, 1.30 p.m.

TUESDAY Guy's, 1.30 p.m.—Westminster, 2 p.m.—Royal London Ophthalmic, 11 a.m.—Royal Westminster Ophthalmic, 1.30 p.m.—West London, 3 p.m.—National Orthopaedic, 2 p.m.

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

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

FRIDAY Royal Westminster Ophthalmic, 1.30 p.m.—Royal London Ophthalmic, 11 a.m.—Central London Ophthalmic, 2 p.m.—Royal South London Ophthalmic, 2 p.m.

SATURDAY St. Bartholomew's, 1.30 p.m.—King's College, 1.30 p.m.—Charing Cross, 2 p.m.—Royal London Ophthalmic, 11 a.m.—Royal Free, 2 p.m.—East London Hospital for Children, 2 p.m.—Hospital for Women, 9.30 a.m.—Royal Westminster Ophthalmic, 1.30 p.m.—St. Thomas's, 9.30 a.m.—Royal Free, 9 a.m. and 2 p.m.

MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

MONDAY.—Medical Society of London, 8 p.m. Mr. Wm. Adams, "A Case of Strangulated Femoral Hernia, reduced by Large Injections of Oil." Dr. Redlet, "A Case of Transfusion of Lamb's Blood in Phthisis", communicated by Dr. Theodore Williams. Mr. William Allingham, "On the Treatment of Fistulous Sinuses by means of the Elastic Ligature."—Ornithological Society of Great Britain. The following, among other communications, will be brought forward: Mr. Charles J. Fox, "On a Case of Fractured Jaw treated with Mr. Moon's New Splint." Mr. Francis Mason, "A portion of Tooth imbedded in the Lower Lip." Mr. Henry Sewill, "On the Use of Absolute Alcohol in Dental Operations." Mr. W. G. Ranger: On Unusual Injuries of Teeth. Mr. Oakley Coles will exhibit Models illustrating the Treatment of certain Deformities of the Mouth. Mr. Charles Tomes will exhibit Specimens recently added to the Museum.

TUESDAY.—Pathological Society of London, 8 p.m. Mr. Waren Tay: Two Cases of Alopecia Areata communicated from Ringworm, with the Trichophyton Tonsurans: Living Subjects. Dr. Whipham: Epithelioma of the Oesophagus ulcerating into the Trachea. Dr. Cayley: Syphilitic Disease of the Heart. Dr. Cayley: Congenital Disease of the Aortic Valves. Mr. Clement Lucas: Heart, from a Case of Cyanosis. Dr. Goodhart: Acute Enteritis. Dr. Silver: Abscess of Liver, associated with Dysentery and Sloughing of Appendix Vermiformis. Dr. Dowse: Cancer of Colon. Dr. Dowse: Cardiac Aneurism. Mr. Godlee: Alveolar Sarcoma of Skin of Leg. Dr. W. Legg: Primary Enchondroma of Lung.

WEDNESDAY.—Obstetrical Society of London, 8 p.m. Mr. Churton, "Recto-Vaginal Fistula caused by a Zwanke's Pessary"; Dr. Bathurst Woodman, "On the Prevention of Mammary Abscesses by the application of the Principle of Rest"; Dr. Gervis, "Cases of Retroversion of the Gravid Uterus"; Dr. Madge, "On a Case of Labour complicated by Pelvic Tumour and by Convulsions"; and other communications.—Royal Microscopical Society, 8 p.m. Dr. Fleming and Mr. C. Cooke, "On some Himalayan Leaf-Fungi".

THURSDAY.—Harveian Society of London, 7.15 p.m.: Meeting of Council. 8 p.m.: Dr. W. Squire, "On Infection, and the Incubation Period of Infectious Diseases".

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.

L.R.C.P. wishes "Cosmopolitan" to kindly state the name of his University, and the course required for the degree.

"WATER-PIPE" asks:—Who is the maker of a newly patented block-tin pipe covered with lead? Specimens were sent to the profession in the spring of the year.

DR. GESUALDO CLEMENTI (Caltagivone, Sicily) asks us for references to any cases in which leeches applied to the fauces have passed into the larynx.

DR. CLEMENTI's complaint as to irregularities in the delivery of his JOURNALS must, we fear, be addressed to the local postal authorities. His JOURNAL is regularly forwarded to the General Post Office every Friday evening.

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.

F.R.C.S.—We know of no University at home or in Europe where a medical degree can be purchased without examination; and we sincerely hope that there are none. We feel quite sure that a respectable practitioner, such as our correspondent, would find any such diploma a very broken reed on which to lean, and one pretty sure to pierce his side.

THE M.D. DEGREE.

SIR.—Caring little or not at all how many L.R.C.P.s of Edinburgh or elsewhere affect to prefix themselves "Dr.", still I have a word to say on the restrictions as to residence and attendance on courses of lectures, which seem to exercise some of your correspondents in quest of the affix "M.D.", and which seem to me and to others to be opposed to "free trade" in education.

It matters to none of us, professionally, that the omnipotent public chooses to dignify us generally as "Dr.": but what touches not a few of us is, the almost absolute impossibility of obtaining a British University degree in medicine after the close of our student curriculum. Cases must yearly arise where men, long and successfully devoted to general medical and surgical practice, desire to elevate themselves to the higher, and, as we are led to believe, the more dignified walks of our art. I do not allude to the practitioner in full work who has a sort of undefined hankering to call himself M.D., but to the case of a man for whom a rare success in life, or a wealthy marriage, or a state of health slightly impaired by some years of toil, renders it a desirable step, the attainment of which step—a laudable ambition in itself—is also likely to be a beneficial occurrence for the neighbourhood in which success, marriage, or impaired health may have been contracted. It is quite inconvenient for such an one to break up his establishment for the sake of a few months' residence in a dull university town, or for the attendance on duller courses of lectures.

Let us suppose, for the sake of illustration, that the hospital in the county town has not its full complement of physicians, and a successful and well known practitioner of the town or neighbourhood, still a young man, sees his way to fill the vacant, and in some instances necessary, post. No; the rules of the institution make the graduates of a few privileged universities the only ones eligible, and so he has to forego his ambition; and, however able and willing to pass equally stiff examinations, as the sucking scion with bare cheeks and bare manners who steps in, he must take a back seat. The young gentleman, fresh from the examination-room, passes some miserable and stingy years, and at last succeeds in making ends meet; while the other man, who could at once keep up the social and professional dignity of his position, has to stand aside.

Now this thing should not be. If the authorities of the University of London would look into the matter, they would find that, by a very simple modification as to the date of attendance on a few courses of lectures, they would obtain an accession to their ranks which would do no discredit to their traditions. I speak advisedly when I say that many men in a position, not dissimilar from the one supposed above, would be quite willing and able to satisfy the most rigorous examination tests, and this notwithstanding that it is considered necessary to pluck an aggregate of something like 70 per cent. of candidates, in order to maintain the standard of the coveted degree. Why should such men be denied an opportunity? Though many may deem me to be twenty years before my time, I still believe that if this question were calmly and candidly considered by the more liberal section of the senate or convocation (I do not know which has the management of such things), means would be found by which knowledge could reap a reward, if only in the form of a permission to affix the "magic" letters M.D. to an already well-known and respected name.

I am, etc.,
Wolverhampton, Oct. 26th, 1874.

FRED. E. MANBY, F.R.C.S.Eng.

MOSQUITO BITES.

SIR.—Your correspondent would find the treatment of these and all other insect-bites much enhanced by the addition of carbolic acid to the olive oil which he advocates, in the proportion of one fluid-drachm to an ounce or an ounce and a half of oil. This combination not only relieves the irritation and promotes the healing of the bite, but it effectually drives away all other mosquitoes. In fact, carbolic acid is obnoxious to all insects; it is also well known to be so to rats. Two or three years ago, I recommended a lady, who was much annoyed by gnats in her gardening operations, to wash her hands with a weak solution of carbolic acid (1 part to 100) in water, and to apply a little to the face and neck. This simple plan prevented all further annoyance.

I am, etc.,
Five Houses, Clapton, Middlesex, Oct. 17th, 1874.

DE BERDT HOVELL.

THE INDUCTION OF PREMATURE LABOUR.

SIR.—Will you allow me space in your JOURNAL for a few very words in reply to Dr. Swayne's letter of the 10th instant? I entirely agree with Dr. Swayne's remark, "that it is impossible to come to any definite conclusion as to the best method of inducing premature labour from the experience of two or three cases only". In my paper of August 29th, I gave, as stated, one typical case only as being illustrative of my ordinary experience: had I deemed it necessary, I could have mentioned more. The operation which I recommended is the one introduced and ordinarily practised by Dr. Barnes, whose experience in such cases we all know is very large. What I contended was, and what I still contend is, that the operation which I prefer is equally as safe, both for mother and child, as Dr. Swayne's, and that it is much more expeditious and less irksome for the patient; for, whereas Dr. Swayne's plan occupies, on an average, over four days, and sometimes even a much longer period, by employing that which I advocate we may, almost to a certainty, rely upon a case being terminated within twenty-four hours. I repeat, therefore, with all due deference to Dr. Swayne's opinion, that I cannot see the advantage of extending a disagreeable process over four days or more, when equally good results are attainable in twenty-four hours.

I am, etc.,
WILLIAM DRAPER.

THE BRITON LIFE ASSURANCE COMPANY.

SIR.—If Mr. Evan Williams will procure the returns to the Board of Trade by Messrs. Malcolm and Hamilton, and carefully study how far the total amount of the *annual premiums* and the total amount of the assurance fund stands in relation to the total amount of the sum assured, he will find an answer to his question. In fact, no one who has his life assured should rest until he has procured this document.

I am, etc.,
Streatham, October 26th, 1874.

AN ASSOCIATE OF KING'S COLLEGE.

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.

MEDICAL TITLES.

SENEX (Southampton) describes a very discreditable course of conduct, but one that does not really touch the question of titles: it would be just as discreditable in the licentiate of a college as in the graduate of an university.

THE SPREAD OF CHOLERA IN INDIA.

SIR.—In your issue of October 20th, you quote from, and comment upon, Dr. Robert Pringle's paper on Asiatic Cholera. In the article it is stated that Dr. Pringle believes that one of the most active agents in the spread of cholera amongst Indian pilgrims is the so-called "holy food," prepared and distributed at the Temple of Juggernath. The Temple of Juggernath, and the town of Pooree in which it is situated, have been greatly blamed for many a day for the large share they are considered to have in the engendering and distribution of epidemic diseases—notably cholera; but in many instances this blame, in my opinion, is hardly deserved. Last year and the year before, when I was medical and sanitary officer of the town and district of Pooree, several outbreaks of cholera occurred in the place, and in not one instance had I good reason for believing that *maha prasad*, or "holy food," was really answerable for either the origin of the disease or its spread. There was an outbreak in the beginning of 1873, which at first had all the appearance of commencing at Pooree; but after a great deal of inquiry I found out that the disease was brought into the town by a batch of pilgrims, who had had it among them while they were on their journey. The first cases happened in the lodging-house where these people were located, and from them it spread among the townspeople. This particular batch of pilgrims left after a few days' stay in the town, and returned home by another route, and cholera spread in their wake. Some little time after their departure the town became again free from the disease, as it was before their arrival, and continued so for some months.

The next outbreak seemed to depend on meteorological conditions, as it seemed—judging from the best information I could find—to make its appearance on the road leading into the town and in the town itself about the same time. It did not, however, last long, any more than the one before it. Such outbreaks are frequent at Pooree; and I merely mention the circumstance to show that the Temple of Juggernath and its belongings are not always, nor in my opinion often, deserving of the grave responsibility laid to their charge. They are, however, responsible in this respect—that a vast concourse of people constantly visit the shrines, who in their fanaticism disregard simple rules of sanitation, which in their own homes and villages they observe with care.

I may further observe, that it is frequently stated, and sometimes by those in high positions, that the water supplied at Pooree is noxious and bad: but such is really not the case. I mention this not on my own authority only, but also on that of Mr. Nicholson, analytical chemist in the service of the Government of Madras, who kindly made a thorough examination of the wells and tanks of the town about two years ago. The waters are, in fact, exceptionally good, as one would naturally expect in such a sandy soil.

Wellington, Somerset, Oct. 1874.

JOHN MEREDITH, M.D.

THE PROPAGATION OF PUERPERAL INFECTION.

ANTISEPTIC.—A coroner's inquest was held at Wolverhampton on the 17th instant on the exhumed body of a woman who had died of puerperal fever in the practice of a midwife, who had lost six other cases a short time previously. She was warned by the borough medical officer not to attend any further cases for three months, as he considered no midwife should attempt to deliver any woman within that period who had had a case of puerperal fever. He stated he had no power under the Sanitary Act to restrain her from practising. Two other medical men gave evidence to the effect that every surgeon invariably isolated himself for a month after a case of childbed-fever. "Antiseptic" writes to us to ask whether "it is necessary for medical men to isolate themselves from midwifery for a month after attending a case of puerperal fever, being himself under the impression that an entire change of one's clothes and a bath were sufficient". Our own experience has led us to the following conclusions, which we believe in the main to be in accordance with the experience of most accoucheurs who have had large opportunities of observation. Where a woman has become infected by the attendant, a lapse of quite a month is requisite before resuming midwifery; where, however, the fever has arisen autogenetically, or heterogenetically otherwise than through the practitioner, a mere change of clothes, a bath, and a careful use of disinfectants, are quite sufficient to prevent him from spreading the disease. The chief difficulty is for the accoucheur to find out whether he is really the conveyer of the poison; and this is rendered still more obscure by the fact that not every woman who is attended by an infectious person is attacked with the disease. However, the medical man may be pretty sure he is the propagator of the affection if he discover, on carefully reviewing his recent cases, that some of them have had anomalous febrile symptoms. In one case that came under our notice, the fever was still carried by the attendant after a lapse of three weeks, and an absence from home of a week. In this instance the individual was feeling very unwell, and was suffering from a sore throat: strange to say, the disease was of a much severer type after the interval of rest than before. It is a lesson to the medical man not to overlook his own state of health when he discovers he has infected any of his patients.

BLOOD-LETTING IN OLD TIMES.

SIR.—To such of your readers as may not have the opportunity of seeing Mr. Greenville's *Memoirs of George IV.*, the following extract from his journal will be interesting, more especially as it is very pertinent to the remarks made by Sir James Paget at Norwich on the subject of blood-letting—remarks, to the truth of which, as a practitioner in those days, I can fully attest.

"1820, February 4th.—On Sunday last, arrived the news of the king's death. The new king has been desperately ill. He had a bad cold at Brighton, for which he lost eighty ounces of blood; yet he afterwards had a severe oppression, amounting almost to suffocation, on his chest. Halford was gone to Windsor, and left orders with Knighton not to bleed him again till his return. Knighton was afraid to bleed him. Bloomfield sent for Tierney, who took upon himself to take fifty ounces from him. This gave him relief; he, however, continued dangerously ill, and on Wednesday he lost twenty ounces more. Yesterday afternoon he was materially better for the first time. Tierney certainly saved his life, for he must have died if he had not been bled."

Now, in spite of all this bleeding, there is not a word said about his being weakened by it, though at that time (his accession) he must have undergone great fatigue. "Verily, there were giants in those days."

Sevenoaks, October 1874.

I am, etc.,
C. M. THOMPSON.

LANCING THE GUMS.

SIR.—There can be no doubt that dentition is made the scapegoat for many of the diseases of children, when really it has nothing to do with them. Dr. Finlayson has admirably summed up all that has been written for and against the practice of lancing the gums for the purpose of curing or relieving certain infantile diseases. In my opinion, dentition has very little indeed to do with such affections as infantile diarrhoea, vomiting, convulsions, rashes, etc.; improper diet, want of ventilation, bad nursing, etc., being much more prolific causes. Such being my opinion, I consider lancing the gums in such affections to be generally an unnecessary operation. Consequently, when a doctor or any one else lances a child's gums merely on the chance that there is something wrong with the coming teeth, he is committing a perfect piece of cruelty—in fact, a species of unnecessary vivisection. There are only two conditions under which I consider that lancing may be undertaken with propriety. They are, first, when the child is exceedingly fretful, crying frequently, but without any apparent cause, there being no bowel, stomach, or head affection, nor any other complaint perceptible that would produce irritation—if this fretfulness be soothed by rubbing the gums with the finger, and at the same time we observe that there is free salivation, that the gums are hot and swollen, that a tooth is close to the surface, and that the gum is raised and shining at that point. That relief is obtained under such circumstances, I learnt personally, when I cut one of my wisdom-teeth. The second condition is, when the above symptoms are present, but are accompanied by bowel, stomach, or head affections, etc., which are evidently the result of the irritation. This condition, however, I judge to be very rarely observed. Care must be taken to distinguish between the relief given by rubbing the gums and by the mere act of sticking.

The great cause of the popular belief that dentition produces these illnesses, arises from the fact that most people suppose that the tooth forces its way upwards and cuts through the gum by the sheer force of its growth. But such is not the case; for the tooth makes its way through because the gum-tissue becomes absorbed as the tooth increases; there is no cutting at all. So long as the child is healthy and free from any constitutional taint, absorption of the gum-tissue will go on in exactly the same ratio as the growth of the teeth; but directly the health is affected by diarrhoea, etc., then both growth and absorption will be hampered by the constitutional weakness thereby induced, and no amount of lancing will cause the teeth to grow more quickly, or hasten absorption of the gums. The great point to be attended to is to remedy the true cause, which can always be detected if care be used; and, when the cause is remedied and the disease removed, it will be found that the teeth will make their exit in due time.

I am, etc., W. J. BARKAS, L.R.C.P. Lond., etc.

Newcastle-on-Tyne, September 20th, 1874.

WE are indebted to correspondents for the following periodicals, containing news, reports, and other matters of medical interest:—The Birmingham Daily Gazette, Oct. 26th; 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; 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; The Liverpool Mercury; The Liverpool Porcupine; The Scotsman; The Hackney Express; The Bedale and Northallerton Times; etc.

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

Dr. J. Hughes Bennett, Nice; Dr. W. Munro, Cupar-Fife; Mr. J. Ashburton Thompson, London; Dr. Duffin, London; F.R.C.S.; Dr. Gesualdo Clementi, Caltagivone; Mr. J. P. Cassells, Glasgow; Dr. H. Kirwan King, Welwyn; Our Paris Correspondent; Dr. Tilt, London; Dr. Fleming, Birmingham; Dr. George Johnson, London; O. P.; The Rev. G. S. Greer, Kirkcubbin; Dr. R. Shingleton Smith, Clifton; Dr. G. H. Philipson, Newcastle-upon-Tyne; Dr. J. Matthews Duncan, Edinburgh; Mr. F. F. Jay, Scarborough; Dr. Robertson, Edinburgh; Mr. R. B. Hogg, Dumfries; Mr. C. F. George, Kirton-in-Lindsey; Our Dublin Correspondent; Dr. Snow, Bayswater; Dr. Heaton, Leeds; Mr. Wm. Fairlie Clarke, London; Mr. Eastes, London; Dr. Burman, Devizes; The Secretary of the Obstetrical Society; W. O.; Dr. Batley, Great Yarmouth; X.; Mr. Noble Smith, Paddockhurst; Dr. Charles Taylor, London; Dr. W. Hinds, Birmingham; The Secretary of Apothecaries' Hall; The Registrar-General of England; The Registrar-General of Ireland; Mr. Wanklyn, London; The Registrar of the Medical Society of London; Mr. Havens, Colchester; Dr. C. Bell Taylor, Nottingham; Dr. Graily Hewitt, London; Mr. C. M. Thompson, Sevenoaks; The Secretary of the Royal Microscopical Society; Dr. J. Braxton Hicks, London; A Member; Dr. Sedgwick, London; Mr. Miller, Southampton; Mr. Steele, Clifton; Mr. T. H. G. Harding, London; Mr. Sewill, London; Dr. D. Campbell Black, Glasgow; Dr. Wiltshire, London; Mr. Pogson, London; Our Edinburgh Correspondent; Dr. Farr, London; Mr. W. W. Reeves, London; Mr. Manby, Wolverhampton; Dr. Durrant, Ipswich; Dr. Graham, Weybridge; Our Glasgow Correspondent; Mr. Poole, London; Mr. C. L. Prince, Tunbridge Wells; The Rev. Dr. Haughton, Dublin; Dr. Meymott Tidy, London; Mr. A. B. Myers, London; L.R.C.P.; A Junior; Dr. Trollope, St. Leonard's-on-Sea; A Member of the Association; X.; Ph. D. and L. K. Q. C. P. Ireland; Dr. J. W. Langmore, London; Dr. H. B. Donkin, London; Dr. Cornelius Fox, Billericay; Dr. Brunton, London; Rev. H. Rudge, Clifton; M. D. Edin.; Dr. Russell, Birmingham; Mr. W. H. Michael, London; Mr. T. H. Bartlett, Birmingham; Mr. W. F. Calvert, Accrington; Dr. Payne, London; Mr. R. Cuffe, Woodhall Spa; Mr. Albert Venn, London; Mr. Richard Davy, London; etc.