

from the right knee and about half that quantity from the left. The operation gave great and immediate relief to the patient. A fortnight afterwards, the right knee, having again become considerably distended, was tapped a second time, and, a few weeks later, the operation had to be repeated also upon the left knee. After each operation, the knees were firmly strapped; and, soon after the last one, the patient was able to walk about, and was sent to the seaside.

SELECTIONS FROM JOURNALS.

SURGERY.

DRESSING OF WOUNDS.—At a meeting of the Paris Société de Pharmacie, on August 5th, M. P. Vigier furnished a note upon the "épithème argilleux" which has been proposed by him for the dressing of wounds. The substance which he employs, a specimen of which was exhibited, is a mixture of fine moist clay (100 grammes) and glycerine (50 grammes), and its advantages are said to be that it adheres to the skin, does not putrefy, and is easily removed by water.

CONNECTION OF PURULENT INFLAMMATION OF THE MIDDLE EAR WITH FACIAL PARALYSIS.—Dr. Green, in the *Boston Medical and Surgical Journal*, says that the close relation of the horizontal portion of the Fallopian canal, through which the facial nerve passes, with the tympanum is an anatomical fact; paralysis of that nerve, however, in connection with otorrhœa of the same side, can no longer be considered, as formerly, a diagnostic symptom of caries of the petrous bone, since experience has shown that not only may there be extensive caries, but even the sheath of the nerve may be surrounded with pus without the existence of any paralysis. The anomaly of an opening of the Fallopian canal into the tympanum is also well recognised, and has been considered to explain the paralysis of the facial nerve occurring in young children suffering from a simple catarrh of the middle ear. Gruber, however, considers that, even without this anomalous opening into the tympanum, paralysis of the facial nerve may result from a simple congestion of the middle ear in children, in whom all these parts are rich in blood-vessels. He is led to this conclusion from observing the rapidity with which such paralytic disappear as soon as the fever is over, a few hours often sufficing to restore the full function of the nerve, a time too short to allow the absorption of an exudation. He mentions cases of nursing infants, with a febrile affection of the throat associated with inflammation of the middle ear, in whom facial paralysis appeared, and then disappeared immediately after a rupture of the membrana tympani and the discharge of pus; and, in support of his view, that congestion alone may cause facial paralysis, he quotes one case in which the inflammation in the middle ear subsided with the fever without the formation of pus, and in which facial paralysis lasted for twenty-four hours. Many of the cases of so-called rheumatic paralysis which disappear in a very short time, under the simplest treatment, may belong to these cases of congestion. The close connection of some facial paralyses with disease of the tympanum is seen in those cases in which an exudation exists in the tympanum, and in which the disappearance of this exudation is followed directly by a relief of the paralysis. In such cases, it is probable that there is an opening into the Fallopian canal. Gruber gives the history of such an one as follows. A tailor, 61 years old, after suffering for a few days with a cold in the head, began to have severe pain in the right ear, followed by deafness, fever, and, in a short time, by facial paralysis of the same side; examination, after ten days, showed the right tympanum filled with exudation, and a paracentesis evacuated considerable pus. Two days later, the paralysis was beginning to improve, and in five days more it had entirely disappeared, the tympanum having been kept free from secretion in the meantime by syringing and inflation. The inflammation in the tympanum lasted for nearly two months, and, during that time, whenever the secretion was allowed to collect in the cavity, the paralysis of the face returned in a degree, but was relieved as soon as the tympanum was cleared. This result was observed several times during the course of the disease.—*Irish Hospital Gazette*.

TREATMENT OF FRACTURES BY FLEXIBLE SPLINTS.—Dr. Arthur Vidal gives great commendation to the use of these appliances, and cites seventeen cases of fracture in which the result has been most satisfactory. These flexible splints consist of slices of wood about forty-five millimètres wide, and about two or three millimètres thick in the middle; their length varies according to the fracture. These very simple splints model themselves perfectly to the limb. The fracture having been surrounded with linen and wadding, a series of these splints are placed in a horizontal direction round it, care being taken to im-

bricate them one over the other, so that they completely surround it. The whole is kept in place by bands. M. Vidal finds that this apparatus possesses the merits of being simple, cheap, and easy to be procured. It is light and convenient for the sufferers, to whom it not only permits a considerable amount of movement, but whom it also protects from possible accidents. It is strong, not easily displaced, does not require frequent adaptation, and reduces the fracture as completely as possible. It allows the quick and easy examination of the seat of the fracture, or of any other point, without the necessity of disturbing the splint in its entirety; thus assuring a constant reduction, and avoiding the chance, during inspection, of accidents which might be caused, in the early days of the fracture, by some hasty movement of the patient or the dresser. (*Thèses de Paris*, 1874.)

OBSTETRICS.

BROMIDE OF AMMONIUM IN CATAMENIAL EXCESSES.—Dr. J. K. Black of Newark, Ohio, has often tested the efficiency of this preparation in non-structural excesses, and he speaks (*Cincinnati Lancet and Observer*, May, 1874) with confidence of its valuable powers. He says he no more certainly anticipates the arrest of an attack of ague by the administration of quinia than does he anticipate the control of the forms of catamenial excess referred to by the proper administration of the bromide of ammonium. In the administration of the remedy, an essential rule is, that its use shall precede the expected period by at least ten days. Its administration only during the crisis will do very little, if any, good. The sedative influence of the remedy must precede and accompany the stage of ovarian and uterine vascular engorgement, which itself precedes the flow by several days. Any associated disorder, which has even a remote bearing upon the menstrual excess, should, of course, receive appropriate attention.—*American Journal of Medical Sciences*, July, 1874.

INTRACTABLE VOMITINGS DURING PREGNANCY.—M. Féréol reports, in the *Annales de Gynécologie*, the case of a woman aged 33, who became pregnant in the beginning of September 1871, and was attacked by sickness and diarrhœa from the commencement of her pregnancy. She entered a hospital in December, and went through the treatment commonly employed for this affection—the administration of nux vomica, belladonna, and cauterisation of the neck of the uterus, etc. She had fallen into the last stage of weakness, when she expelled a fetus about six months old. The vomitings were stopped for some days, but soon reappeared; and the woman died six days after the operation. At the necropsy, it was discovered that the small curvature of the stomach, from the cardia to the pylorus, was filled with a tumour, spreading over the surfaces of the organ, especially over the posterior surface, and measuring two centimètres at its greatest thickness. The presence of this tumour sufficiently explained the want of success of all the medicinal agents employed, as well as the uselessness of the induced abortion. It must be acknowledged that, amongst the numerous plans of treatment extolled as remedies against the obstinate sickness of pregnancy, not one inspires absolute confidence. The two following remedies are put forward as specific against this distressing complication, which, however, are given here with all reserve. Dr. Blackwell reports, in the *Philadelphia Reporter* for October 1873, that two drops of tincture of nux vomica, given hourly, have been successful in a case where all the usual means had been tried without success. Dr. Woillez, in the *Journal de Thérapeutique* for January 1874, recommends that the pharynx of pregnant females should be painted with a solution containing a third part of bromide of potassium, as a remedy for the sickness which depends on reflex action.

COLUMN FOR THE CURIOUS.

THE HOSPITALS OF PARIS IN 1790.—The *Monitor* of October 10th, 1790, publishes an analysis of a report on the hospitals of Paris. It reveals a terrible state of things, showing that, of the 1,900 beds of the Hôtel Dieu, many contained five, six, and even eight occupants at a time. Favourites alone had the privilege of having a bed to themselves, and each person was only estimated to require a very limited amount of fresh air to breathe. In the majority of the hospitals of Paris, the mortality amounted to a tenth of the patients received, and in some cases to the twentieth, but at the Hôtel Dieu to one-fourth or one-fourth and a half. Out of the lying-in women, 55 per cent. died; and in the Hôtel Dieu, one out of thirteen.

CASE OF SUCCESSFUL REMOVAL OF A LARGE FIBROMYOMA OF THE
FUNDUS UTERI BY ABDOMINAL SECTION. BY LAWSON
TAIT, F.R.C.S.

The abdominal tumour had been in existence for five years, growing rapidly in the preceding months, during which the catamenia were very profuse, and the distress great from pressure on the pelvic organs. Symptoms of obstruction having several times occurred, and the patient expressing an earnest desire to be relieved, the removal of the tumour was recommended, and the operation performed on January 16th, 1873. The operation was conducted as for ovariectomy, the chief difficulties occurring in the extraction of the tumour and the application of the clamp, the tumour involving the whole of the fundus uteri. The wound was closed by five deep sutures, and three superficial. The succeeding sickness yielded to the administration of Morson's pepsine wine, and the recovery was uninterrupted. The clamp came away on the eighth day after the operation, the wound healing rapidly, and all that remains of the uterus is a little button representing the cervix attached to the abdominal cicatrix. The tumour after removal weighed eleven pounds. The observations on temperature were made by Dr. John Harvey, who watched the case.

MR. SPENCER WELLS said he would bring the substance of his notes on such operations before the Society at a subsequent period. He had only three cases of the kind which could be called successful. In one the patient died after a year from cancer; in two he had been quite successful. The mortality was larger than after ovariectomy. His own rule was not to operate except the disease was bringing the patient to death.—After some remarks by Mr. COOPER FORSTER and Mr. SPENCER WELLS as to the treatment of intrauterine bleeding growths, the CHAIRMAN remarked that in the report of such a case there should have been a much more distinct statement as to the reasons for the operation.

ASSOCIATION INTELLIGENCE.

SOUTHERN BRANCH: SOUTH HANTS DISTRICT MEETING.

A MEETING of the above District will be held at the School of Science and Art, Portsmouth, on Tuesday, November 17th, at 8 P.M. W. H. GARRINGTON, Esq., J.P., will occupy the Chair.

Notice has been received of the following communications.

1. Inspector-General Smart, M.D., C.B.: Remarks on the Secondary Epidemics of Cholera in Europe.
2. J. R. Kealy, M.D., and W. H. Axford, M.B.: Cases of Rupture of the Uterus.
3. Cases of Disease and Preparations.

J. WARD COUSINS, *Hon. Sec.*

SOUTH-EASTERN BRANCH: EAST KENT DISTRICT MEETINGS.

THE next meeting of the above Branch will be held in the Library of the County Hospital, Canterbury, on Thursday, November 19th, 1874, at 3 o'clock; JOHN BOWES, Esq., of Herne Bay, in the Chair.

Dinner will be provided at the "Fleur-de-Lis" Hotel at 5 o'clock precisely. Charge 5s., exclusive of wine.

Notices have been received of the following communications to be read at the meeting.

1. Mr. Arthur Long: Case of Scrotal Hernia, with complications.
2. Mr. Hutchings: Case of Intestinal Obstruction.
3. Mr. C. G. M. Lewis: Case of Intracranial Tumour.
4. Dr. Wallich: On the Effects of Chloral.
5. Mr. Thurston: Case of Amputation of the Thigh by Esmarch's plan.

Gentlemen who intend to be present at the dinner, are particularly requested to inform me on or before Tuesday, the 17th instant.

EDWARD WHITEFIELD THURSTON, *Honorary Secretary.*
Ashford, November 11th, 1874.

SOUTH-EASTERN BRANCH: EAST AND WEST SUSSEX DISTRICT MEETINGS.

A CONJOINT meeting of the above Districts will be held at the Royal Pavilion, Brighton, on Friday, November 20th, at 3 P.M.; Sir JOHN CORDY BURROWS in the Chair.

The Chairman invites all country members to luncheon at his residence, 62, Old Steine, from 1 to 2.30.

By the courtesy of the directors, all members will have free admission to the Aquarium on presenting their cards.

The Brighton Town Council have placed the use of the Pavilion rooms at the disposal of members on the above occasion; and, in addition, the Town Library and Museum, where Sir Cordy and Lady Burrows propose to give a *soirée*.

W. J. HARRIS, Worthing, } *Hon. District*
THOMAS TROLLOPE, M.D., St. Leonard's-on-Sea, } *Secretaries.*

SOUTH-EASTERN BRANCH: WEST KENT DISTRICT.

THE next meeting is appointed to be held at the Ophthalmic Hospital at Maidstone, on Friday, November 20th, at 4.45 P.M.; H. CECIL SMITH, Esq., in the Chair.

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

Dr. Monckton has promised a paper on Rheumatism and Pyæmia.

FREDERICK JAMES BROWN, M.D., *Honorary Secretary.*
Rochester, November 3rd, 1874.

STAFFORDSHIRE BRANCH.

THE next meeting of the above Branch will be held at the London and North Western Hotel, Stafford, on Friday, November 20th, at 4 P.M.

VINCENT JACKSON, } *Honorary Secretaries.*
RALPH GOODALL, }

Wolverhampton, November 9th, 1874.

SOUTH WALES AND MONMOUTHSHIRE BRANCH.

THE next meeting of the above Branch will be held at the Black Lion Hotel, Aberdare, on Thursday, November 26th, at 12.30 P.M. Meeting of Council at noon.

Dinner will be provided as usual. Members intending to be present are requested to communicate their intention to Dr. Sheen, Cardiff, on or before the 23rd November.

Those members who desire to read papers are requested to forward the titles of the same to Dr. Sheen, as early as possible.

ANDREW DAVIES, } *Hon. Secs.*
ALFRED SHEEN, M.D., }

Cardiff, October 29th, 1874.

BATH AND BRISTOL BRANCH.

THE second ordinary meeting of the session will be held at the York House, Bath, on Thursday evening, December 3rd, at 7.30 P.M.; F. MASON, Esq., President.

R. S. FOWLER, } *Honorary Secretaries.*
EDMUND C. BOARD, }

Bath, November 1874.

BIRMINGHAM AND MIDLAND COUNTIES BRANCH: PATHOLOGICAL AND CLINICAL SECTION.

THE annual meeting of the above Section was held on Friday, October 30th, 1874; present, T. WATKIN WILLIAMS, Esq., in the chair, and thirty members.

Reports.—The report of the Secretaries was read and adopted. The report of the Treasurer, showing a balance of £22:11:3, was read, audited, and adopted.

Officers.—On the motion of Mr. FURNEAUX JORDAN, seconded by Mr. WEST, Dr. Russell was elected President for the ensuing year. Mr. Vincent Jackson and Dr. Jolly were re-elected Secretaries.

Alteration of Laws.—It was proposed and seconded that law 2 shall read as follows: "That the meeting shall be held on the last Friday of the months of October, November, January, and February".

The late Mr. Ebbage of Leamington.—A letter was read from Mrs. Ebbage, thanking the members of the Section for their resolution of sympathy and condolence upon the death of her husband.

Communications.—1. Mr. HUGH R. KERR exhibited a male patient whose lost Nose had been restored by an operation. The destruction of the organ had been caused by Syphilitic Ulceration.

2. Mr. WEST presented a Resected Knee-Joint. The specimen was taken by Mr. Birt of Stourbridge from the body of a young man, aged 21, for whom Mr. West had twelve months previously performed resection of the knee, but who had recently died from phthisis. The condyles of the femur had been the seat of extensive necrosis, and had been removed in their entirety, as also the patella. Complete bony ankylosis had taken place between the femur and tibia, and an useful limb would have remained to the patient, had he not succumbed to extensive lung-disease.

3. Mr. EALES exhibited for Mr. Solomon a case of Choroïdo-Iritis relieved by a free vertical incision of the cornea.

4. Mr. PRIESTLY SMITH showed a new Demonstrating Ophthalmoscope.

5. Mr. BARTLEET showed the bones removed in an Excision of the Knee-Joint. The patella was ankylosed to the femur, and a sequestrum lay loose in the head of the tibia. A peculiar feature in this case, was the very slight symptoms which attended such an advanced stage of articular disease.

6. Mr. OTTLEY exhibited the right Scapula of a man aged 50. The body of the bone was transversely fractured in two places, and this injury, together with that of fracture of the underlying ribs, was caused by the wheel of a cart going over the chest.

7. Dr. JOLLY exhibited a specimen of Caries of the Bones of the Wrist Joint, for which amputation of the forearm had been performed.

CORRESPONDENCE.

THE RECENT ELECTION AT WESTMINSTER HOSPITAL.

SIR,—Will you allow me to state, in justice to myself, that my election to the office of Physician to Westminster Hospital occurred on Friday, November 3rd, and I only followed the usual custom there of resigning the office of Senior Assistant-Physician before becoming a candidate for the post of Physician. The difficulty of getting a quorum on October 23rd, was due to the balloting for an Assistant-Physician from 10 till 2. The requisite number to elect a physician, of those who were entitled to vote, was never present at any one time.

I am, etc.,

G. DUNCAN GIBB.

Bryanston Street, November 7th, 1874.

SKILLED MONTHLY NURSES.

SIR,—A letter from Mr. Wood on the above subject, in your issue of the 7th instant, is too important to be allowed to pass without consideration. He there compares a modern trained monthly nurse, with her superior knowledge, with a plain common-sensed countrywoman—the former without common sense, and the latter with it; and he naturally, like all other medical men, prefers the plain clean-minded countrywoman to the so-called trained woman with the puffed-up and dirty, but by no means exalted mind. I have, however, in my limited experience of eighteen years, met with honest country nurses without much common sense, who sickened the mother (in *first* cases) with castor-oil, gave the infant cinder-tea, and rubbed its little breasts, to get the milk down, I suppose, or to pass their time away, not being given much to reading, and quite as tyrannical in their way as the trained nurse—country nurses who were just as totally unfit to be monthly nurses as the so-called trained nurses to whom Mr. Wood alludes, and whom he was quite right to dismiss. I can safely assert that the objection of Mr. Wood to trained nurses, that, without any discretion, they are prone to engage the patient's attention, it may be from the time of her confinement, with stories of their experiences, refers equally to the rustic nurse—the one without common sense. I once heard one exclaim, "There they are burying poor Mrs. B., and the baby only — days old". The patient in whose presence this was said had, after one confinement, precipitated herself into the hall from the first floor, with no other injury, fortunately, than a scalp-wound. The reign of terror here was suddenly set up, but with a kind of *coup d'état* was upset; for, the husband being in, I advised a change of nurses—to another untrained one, it is true, but one with plenty of common sense. My advice was taken.

All will, no doubt, agree with Mr. Wood when he says that a nurse must be wise and discreet, as well as trained and skilled. Surely, unless a woman be this, she is not fit to be a nurse; and I would go further than Mr. Wood, when he says it would be well if those under whom the nurses acquire their training would strive to inculcate a humility of mind and a kindness of manner, as well as caution them against telling the patient too much about herself. I would say it is the business and duty of teachers, so far as in their power and judgment lies, to prevent such a woman as Mr. Wood depicts to go forth as a trained nurse. As a nurse, the woman is an utter failure. I believe the percentage of women who fail to become good nurses is very large. It would be highly interesting to know the facts and to have the figures. I cannot, of course, claim more common sense for the trained nurse; but I claim this advantage in employing one from a nursing institution: I can report her conduct, if unsatisfactory; I can utterly condemn her by dismissing her as Mr. Wood has done; and no manager of

a nursing institution would, in all probability, employ her as a nurse again. In short, a trained nurse from an institution is more under medical restraint, which I hold to be a good thing.

I am, etc., C. ORTON.

Newcastle-under-Lyme, November 8th, 1874.

SIR,—The engagement of a monthly nurse at present is made independently of the patient's medical attendant. Lately I have insisted on seeing the nurse beforehand, and have thus prevented the occurrence of such an accident as that recorded by Mr. Miles Wood in last week's JOURNAL. The average standard of education amongst monthly nurses is at present exceedingly low, and, with the exception of two or three instances, I cannot mention a properly qualified monthly nurse out of a long list of names. If others will pursue this rule, and insist on examining the capability of the nurse in every case they undertake to attend, we shall soon have a better class of women to conduct a most important branch of nursing. I am, etc.,

AN OBSTETRIC PHYSICIAN.

P.S. As it sometimes happens that the patient considers she is bound to employ a nurse, or pay her, if the engagement have been made previously to that with her medical attendant, I should be glad to know how far such an engagement is binding.

INQUESTS ON PREVENTABLE DEATHS.

SIR,—Though there can be no doubt that a judicial inquiry in cases of preventable death would tend very powerfully to check the culpable carelessness that often produces them, it is not clear why an inquest by the coroner's jury would do this better than an inquiry before the magistrates. Any person who wilfully so acts as to endanger another is liable to indictment for misdemeanour, and may, if a strong *prima facie* case be proved, be committed or held to bail for trial, or, in such a case as that mentioned at Chepstow in your number for the 7th instant, to be fined or imprisoned; and it seems most probable that magistrates would be as likely as a coroner's jury to decide wisely and well. Indeed, it is not evident what a coroner could do in such a case. It is unlikely that an accusation of manslaughter could be maintained; and, if not, the jury could only censure, which they have no legal right to do, and which magistrates could do with far more propriety and effect; and magisterial censure of those in fault would go far to warn others against similar disregard of the public safety, even if no actual punishment were inflicted. I am, etc.,

H. H. P.

HOSPITAL "CHARITY".

SIR,—It is probable that through the medical journals the public mind may be enlightened on the subject of hospital charity. A little plain speech may be used to advantage where reform is so much needed. If we are honest, and free from every feeling but that of justice to the public, and of proper respect for ourselves and our honourable profession, we must desire such reform.

"Charity" is no term for such a system as has grown up among us. Where is it? we may ask. Amongst the Committees of Management? There are contention, pride, base competition, but not charity. Amongst the medical officers does that virtue exist? Is their readiness to do the duties of an out-patient room the offspring of charity? For whose real good is all this expenditure of time and money, this begging, this advertising, this wonderful "charity"?

Our profession is indeed becoming degraded, if it allow such a state of things to continue. Mr. W. Fairlie Clarke suggests that the Council of the British Medical Association should do something to improve the present evils. Honest men will help. I am, etc.,

AN OLD MEMBER OF THE ASSOCIATION.

PUBLIC HEALTH AND POOR-LAW MEDICAL SERVICES.

REPORTS OF MEDICAL OFFICERS OF HEALTH.

ALCESTER.—Mr. G. H. Fosbroke, the medical officer for Alcester Union, makes a report for his district, which shows the remarkably low death-rate of 13.4 per 1,000; of the deaths, there were but three due to fevers. This low rate of mortality, however, cannot be ascribed to the excellence of the drainage, for the sewers are very faulty in construction. The majority of the drains are untrapped, and open close to the doors and windows of houses, allowing free ingress to sewer-

FRAZER, Deputy Surgeon-General, M.D., appointed Medical Officer of the military prison at Greenlaw, on retiring on half-pay.
 HARVEY, Surgeon C. A., 11th Madras Native Infantry, appointed to the medical charge of the 2nd Light Cavalry.
 HUNT, Surgeon S. B., from the 7th Madras Native Infantry to the Native Infantry Depot at Palaveram.
 MOOKERJEE, Surgeon P. N., 39th Madras Native Infantry, to 7th Madras Native Infantry; to remain with 39th Madras Native Infantry till relieved.
 ROSS, Deputy Surgeon-General J. T. C., Saugor Circle, to the Decca Circle (as a temporary arrangement).

NAVAL MEDICAL APPOINTMENTS.

BUCKLEY, Staff-Surgeon John, second class, to the *Endymion*, additional, in lieu of a Surgeon.
 DUCKET, Staff-Surgeon C. A. (second class), to the *Duncan*.

MEDICAL NEWS.

UNIVERSITY OF LONDON.—The following is a list of the candidates who have passed the recent Second M.B. Examination.

First Division.

Branfoot, Henry Seymour, Guy's Hospital
 Crocker, Henry Radcliffe, University College
 Duncan, Andrew, King's College
 Duncan, Peter Thomas, University College
 Eastes, Thomas, Guy's Hospital
 Gould, Alfred Pearce, University College
 Harris, Vincent Dormer, St. Bartholomew's Hospital
 Nicholson, Arthur, King's College
 Rigby, James Arthur, Guy's Hospital
 Sturge, William Allen, University College
 Whittle, Edward George, University College

Second Division.

Ashby, Henry, Guy's Hospital
 Beach, Fletcher, King's College
 Briggs, George Chapman, King's College
 Davies, David Arthur, University College
 Houghton, Walter Benoni, University College
 Morley, Thomas Simmons, Guy's Hospital
 Moss, Herbert Campbell, King's College
 Percival, George Henry, Guy's Hospital

APOTHECARIES' HALL.—The following gentlemen passed their examination in the science and practice of medicine, and received certificates to practise, on Thursday, November 5th, 1874.

Kershaw, Joseph, Manchester
 Newton, Edward Shackfield, Canonbury Park
 Strugnell, Frederick William, Carlton Road, Kilburn
 Tomlin, Robert Francis, Lewisham Road, New Cross

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

Henwood, John Davey, Charing Cross Hospital
 Lingard, Alfred, St. Thomas's Hospital
 Saunders, Edward Argent, University College

MEDICAL VACANCIES.

THE following vacancies are announced:—

ASHTON-UNDER-LYNE DISTRICT INFIRMARY—House-Surgeon: £80 per annum, board and residence. Applications on or before December 14th.
 CASTLEBAR DISTRICT LUNATIC ASYLUM—Resident Medical Superintendent.
 CITY OF LONDON UNION WORKHOUSE—Resident Medical Officer.
 CORK FEVER HOSPITAL—Physician.
 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 inst., to Howell Howells, Secretary.
 DERBY AMALGAMATED FRIENDLY SOCIETIES' MEDICAL ASSOCIATION—Resident Medical Officer: £250 per annum, with residence, coals, gas, etc. Applications on or before 16th inst.
 DERBYSHIRE GENERAL INFIRMARY—Assistant House-Surgeon. No salary, but apartments, board, and washing. Applications, not later than 21st inst., to Mr. Samuel Whitaker, 4, Victoria Street, Derby.
 EAST LONDON HOSPITAL FOR CHILDREN AND DISPENSARY FOR WOMEN, Ratcliff Cross—Resident Medical Officer: £60 per annum, board, lodging, and washing. Applications on or before 19th inst.
 EVELINA HOSPITAL, Southwark—House-Surgeon: £70 per annum, board and washing. Applications on or before 20th inst.
 FRIENDLY SOCIETIES' MEDICAL INSTITUTE, Northampton—Out-door Assistant: £120 per annum. Applications, 14th inst., to Secretary.
 FROME UNION—Medical Officer for No. 3 District. £75 per annum.
 HACKNEY UNION INFIRMARY—Resident Medical Officer: £200 per annum, board and lodging.
 HUDDERSFIELD INFIRMARY—House-Surgeon: £80 first year, £90 second year, and £100 third year, with board and washing. Applications on or before 23rd inst.
 KENT LUNATIC ASYLUM, Barming Heath—Resident Medical Officer.
 LEXDEN and WINSTREE UNION—Medical Officer for No. 2 District: £36 per annum.

LOUTH UNION—Medical Officer for Hainton District: £8 per annum.
 MALE LOCK HOSPITAL—Dispenser. Applications on or before 19th inst.
 MARKET BOSWORTH UNION—Medical Officer and Public Vaccinator for the Desford District: £30 per annum, and extras. Applications, on or before 24th inst., to T. B. Fitch, Clerk, Congerstone, Atherstone.
 OAKHAM RURAL SANITARY DISTRICT—Medical Officer of Health: £60 per annum.
 QUEEN'S HOSPITAL, Birmingham—Resident Secretary and General Superintendent (unmarried): £150 per annum, board, and lodging. Applications, 25th inst., to the Chairman of the House Committee.
 RIPON DISPENSARY—Resident Medical Officer: £100 per annum, furnished apartments, etc.
 RYDE DISPENSARY—Physician.
 ST. GEORGE'S and ST. JAMES'S DISPENSARY—Accoucheur. Applications on or before 19th inst.
 ST. JAMES'S, Westminster—Medical Officer of Health: £200 per annum.
 SALISBURY INFIRMARY—Physician.
 TORPHINS in the Parish of Kincardine O'Neil, Aberdeenshire—Parochial Medical Officer: £45 per annum. Applications to Chairman of Parochial Board.
 TRINITY COLLEGE, Dublin—Professor of Chemistry: £500 per annum, and fees. Applications to the Rev. Dr. Haughton, Trinity College.
 UNIVERSITY OF DURHAM COLLEGE OF MEDICINE, Newcastle-upon-Tyne—Lecturer on Anatomy, Lecturer on Midwifery, Lecturer on Medical Jurisprudence, and Lecturer on Botany. Applications not later than 21st inst.
 WESTERN GENERAL DISPENSARY, Marylebone Road—Physician. Applications to the Secretary on or before 23rd inst.
 WORCESTER UNION—Medical Officer: £65 per annum.

MEDICAL APPOINTMENTS.

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

ALBERTON, T. G., L.R.C.P.Lond., appointed House-Surgeon to the West London Hospital, *vice* W. L. Webber, L.R.C.P., resigned.
 *BAXTER, Evan B., M.D., appointed Assistant-Physician to King's College Hospital.
 CAMERON, J., M.B., appointed Medical Superintendent of the Argyll and Bute Lunatic Asylum, Lochgilphead.
 *COUGHTREY, Millen, M.B., appointed Professor of Anatomy and Physiology in the University of Otago, New Zealand.
 CURNOW, John, M.D., appointed Assistant-Physician to King's College Hospital.
 DONKIN, H. B., M.B., appointed Assistant-Physician to the Westminster Hospital.
 *FENWICK, John C. J., M.D., appointed Physician to the Belgrave Hospital for Children, *vice* *F. E. Anstie, M.D., deceased.
 *GIBB, Sir George D., M.D., appointed Physician to the Westminster Hospital, *vice* *F. E. Anstie, M.D., deceased.
 HALLAM, Walter, M.R.C.S.Eng., appointed Assistant House-Surgeon to the Sheffield General Infirmary.
 HORNE, T., L.R.C.P.Ed., appointed Assistant Medical Officer at the Fisherton House Lunatic Asylum, Salisbury.
 LAKING, Francis H., M.D., appointed Visiting Apothecary to St. George's Hospital.
 MASON, R., M.R.C.S.Eng., appointed Resident Medical Officer to the Ramsgate and St. Lawrence Royal Dispensary, and House-Surgeon to the Seamen's Infirmary, *vice* T. H. Hills, L.R.C.P., resigned.
 MUNRO, A. C., M.D., appointed Assistant Medical Officer to the Southern Counties Lunatic Asylum, Dumfries, *vice* J. Cameron, M.B.
 SKYMOUR, Francis, M.R.C.S.Eng., appointed Assistant Medical Officer at the Norfolk Lunatic Asylum, Thorpe, *vice* J. Shaw, M.D., resigned.
 STUTTON, John R. H., L.K.Q.C.P.I., appointed Local Physician to the Convalescent Home, Stillorgan, near Dublin.
 WREFFORD, Samuel, M.R.C.S.Eng., appointed House-Surgeon to the York County Hospital, *vice* A. Kebbell, M.R.C.S.Eng., resigned.
 WHITMORE, W. T., M.R.C.S.E., appointed House-Surgeon and Chloroformist to the West London Hospital, *vice* T. G. Alderton.

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.

BIRTH.

MOORE.—On November 7th, at 7, Museum Street, Ipswich, the wife of Harry Gage Moore, L.R.C.P.Lond., of a daughter.

DEATH.

BORLASE, Henry W., M.D., at Helston, Cornwall, aged 48, on October 18th.

THE LATE PROFESSOR SEDGWICK.—About £10,000 has at present been subscribed towards the proposed geological museum at Cambridge in memory of the late Professor Sedgwick, which will, it is estimated, cost £31,700.

PRESENTATION.—Mr. E. Swain, the Assistant Medical Officer of the Brookwood Asylum, having been appointed Superintendent of the Three Counties Asylum at Arlesey, Bedfordshire, his retirement was made the occasion of a celebration and presentation of a piece of plate subscribed for by the patients and members of the staff. The testimonial consisted of a black marble clock with bronze figures and ornaments inlaid with gold and red marble, a pair of Wedgwood vases to match, and a centre-piece for table floral decorations. On the clock was the following inscription: "Presented to Mr. Swain by the officers and staff of the Brookwood Asylum, as a token of their respect and esteem for him during his residence among them as Assistant Medical Officer for the period of six and a half years. November 4th, 1874."

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. Braine, "Abnormal Growth of Lip (living specimen)"; Dr. Cleveland, "Specimen of Warty Tumour"; Mr. Napier, "Something new (or believed to be so) in Dental Surgery"; Dr. R. J. Lee, "On Maternal Impressions".
TUESDAY.—	Pathological Society of London, 8 P.M. Dr. Whipple: Epithelioma of the Esophagus ulcerating through into the Trachea. Dr. Silver: Abscess of the Liver associated with Dysentery and Sloughing of Small Intestine. Dr. Graily Hewitt: Ovarian Cyst, with Muscular Envelope. Dr. Fred. Taylor: Induration of the Sterno-mastoid Muscle in an Infant. Mr. Clement Lucas: Cystic Cancer of the Kidney. Dr. Curnow: Double Arch of Aorta enclosing Trachea and Esophagus. Dr. King: Aneurism of Aorta, which ruptured into the Left Auricle.
THURSDAY.—	Harveian Society of London, 8 P.M. Mr. W. F. Teevan, "On Dribbling of Urine; its Diagnosis and Treatment".
FRIDAY.—	Medical Microscopical Society, 8 P.M. Dr. Goodhart, "On Buccal Psoriasis, or Ichthyosis of Tongue".

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.

PREVENTION OF ACCIDENTAL POISONING.

SIR,—I have read with great interest your account of the poisoning case at Dewsbury, where morphia had been given by mistake for pepsine. I have made up my own prescriptions upwards of forty years, and I invariably read the label of the bottle before I measure or weigh, and repeat the process before I replace it on the shelf, and the consequence is that I have never made a mistake.

I am, etc.,

J. LIDDELL, M.R.C.S.E.

Newcastle-on-Tyne, November 1874.

* * In addition to these precautions, which in a hurry sometimes fail, we think that a "poison-cupboard" should always be used, and that Savory and Moore's fluted bottles should be employed for storing poisonous substances and drugs.

THE "PEN-VACCINATOR".

SIR,—Under the above name, Dr. R. Harvey Hilliard presents to the profession, in your issue of November 7th, a new instrument for vaccination. Permit me to point out that this so-called new invention is simply a slightly modified form of an instrument invented by myself upwards of eighteen years ago, to which I gave the name of the "vaccine-insinor"; and a full description and drawing of which is to be found in the JOURNAL of September 17th, 1856. The only alteration effected by Dr. Hilliard apparently consists in making the shoulders of the blades broader near their points, in order to adapt the instrument for scarification in the place of making a punctured wound; the latter being the object for which I designed the "insinor", as being more favourable for absorption, as well as for inserting the lymph at one operation.

I am, etc.,

GEORGE EDWARD NICHOLAS, M.D., Medical Officer of Health for Wandsworth.

Nos. 2 and 3, Church Row, Wandsworth, November 11th, 1874.

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.

WE regret that Dr. Miller's enclosure arrived too late for insertion in last week's JOURNAL.

DR. T. M. WILLS (Bootle).—In omitting the letters F.R.C.S., we acted in accordance with our custom of inserting only one professional title. We do this without any doubt as to the possession of those titles which are omitted.

ON THE RIGHT MANAGEMENT OF THE PUERPERAL STATE.

SIR,—It is the conviction of the writer that the conditions favourable to a rapid recovery from childbirth are the very opposite of those ordinarily enjoined. First of all, "let there be light". There is no reason in the world why, as a rule, the patient should be kept in a darkened room. Let there be, if possible, an abundance of cool and refreshing air circulating through the chamber. Let the patient be plentifully supplied with good solid food—no slops. Let her be removed from the bed to the sofa on or before the third day. If she be accustomed to the use of a cold bath, let her take one on or before the fifth day, and at the end of a week she will in all probability be thoroughly restored.

In contrast to the case alluded to in my previous letter, let me mention the following. In the autumn of 1872, after undergoing considerable fatigue, the wife of the proprietor of one of the largest *pensions* in Switzerland—a woman of splendid physique—miscarried at the fifth month. A doctor of the place was sent for, who insisted that she should be kept in bed for some weeks. Her room was darkened and her windows closed. Under such conditions she at once lost her appetite, and took nothing but slops. At the end of a fortnight she was taken with a deadly faintness. The doctor was sent for, who then made the discovery that the placenta was lying in the vagina in a putrid state; the natural consequence of which was, that she gradually sank.

Let the unprejudiced reader reflect what would probably have been the result had this unfortunate lady been treated in the manner I have suggested.

Harlesden, November 1874.

I am, etc.,

M.D.

WE are indebted to correspondents for the following periodicals, containing news, reports, and other matters of medical interest:—The Birmingham Daily Gazette, Nov. 9th; 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 Knarborough 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; The Broad Arrow; The Surrey Advertiser; The Sussex Coast Mercury; The Ulster Advertiser; etc.

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

Dr. J. Hughes Bennett, Nice; Dr. Wardell, Tunbridge Wells; Dr. J. Matthews Duncan, Edinburgh; Dr. James Russell, Birmingham; Dr. H. Sutherland, London; Dr. T. P. Lucas, London; Dr. Edis, London; Mr. T. W. Blackshaw, Stockport; Mr. J. Liddell, Newcastle-upon-Tyne; Dr. R. J. Lee, London; Mr. W. M. Banks, Liverpool; Mr. N. Dobson, Clifton; Dr. J. A. Menzies, Naples; Mr. Eastes, London; Dr. W. B. Woodman, London; The Editor of the *Pharmaceutical Journal*; Dr. Kelly, Taunton; Mr. G. de Gorreque Griffith, London; Dr. Cheadle, London; Mr. Wreford, London; Sir G. D. Gibb, London; Our Dublin Correspondent; Cosmopolitan; Surgeon; Mr. J. Ashburton Thompson, London; Mr. F. Fry, Maidstone; Mr. North, York; Dr. John Brunton, London; Mr. Turner, Edinburgh; Dr. Hayden, Dublin; Dr. Jukes Styrap, Shrewsbury; Dr. Hime, Sheffield; Dr. A. B. Steele, Liverpool; Mr. Symmons, Ledbury; Dr. Miller, Glasgow; Dr. Lawrence Turnbull, Philadelphia; M.R.C.S.; 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. Buchanan, Glasgow; M.D., Harlesden; Dr. Tuckwell, Oxford; Mrs. Dalrymple, Norwich; Dr. Bakewell, New Zealand; Mr. Anthony Bell, Newcastle-upon-Tyne; Mr. Thurston, Ashford; W. W.; Mr. Vincent Jackson, Wolverhampton; Mr. R. Goodall, Wolverhampton; Dr. Orton, Newcastle-under-Lyne; M.R.C.P.; E. H.; Mr. R. Garner, Stoke-upon-Trent; Suum Cuique; Mr. T. Holmes, London; Mr. R. S. Fowler, Bath; An Associate; Mr. E. B. Board, Bristol; Dr. Allan, Fort William; Mr. W. E. Buck, Leicester; Sir Wm. Gull, London; Dr. Trollope, St. Leonard's-on-Sea; Mr. W. J. Harris, Worthing; Our Edinburgh Correspondent; H. M. G.; A Member of the British Medical Association; Mr. W. S. Savory, London; Mr. W. Wallis, Hartfield; Mr. Allan Macbean, Caistor; Mr. Charles Williams, Norwich; Dr. Brailey, Witham; Dr. Cummins, Cork; Dr. E. Klein, Wandsworth; Dr. Farquharson, London; Mr. Groves, London; Dr. Rutherford, Edinburgh; Mr. Henry Barnes, Carlisle; Dr. Shettle, Reading; Dr. Crisp, Chelsea; Dr. Morton, Glasgow; Dr. Meymott Tidy, London; Dr. A. B. Vesey, Maghera-felt; Mr. T. G. Alderton, London; The Secretary of the Statistical Society; Mr. G. W. Joseph, Warrington; Mr. Warburton, Pately Bridge; Dr. Sutherland Rees-Philippis, Cheltenham; etc.