

the value of the work as a manual of military surgery must, therefore, be accepted as final. We shall confine ourselves to indicating the materials which the work contains, merely premising that they are all laid before the reader in a short and concise form, as is suitable to a "pocket-book"; and that they are copiously interspersed with excellent woodcut illustrations.

After a few general remarks on hygienic regulations, the subject of the conveyance of wounded men from fields of action to the dressing-stations and field-hospitals, is considered, and numerous means of forming extemporary litters, in the absence of regular stretchers, are described. A description is then given of various extemporary appliances to be used as supports for broken limbs; and this is followed by instructions on several modes of forming and applying plaster-of-Paris bandages, and on the uses and manipulation of a variety of surgical apparatus, such as splints of different kinds, irrigating appliances, and others. The modes of examining gunshot wounds, extracting foreign bodies, and their general treatment, follow. Gunshot wounds of special regions are next described in systematic sequence. Operative surgery succeeds, and the modes of performing amputation in different situations, and excision of joints, are described. Each description in the text has its accompanying explanatory drawing. Hæmorrhage; the operations for tying arteries; the principal complications which are from time to time met with in the hospital treatment of wounded men—viz., local gangrene, bedsores, tetanus, hospital gangrene, erysipelas, phlebitis, pyæmia, septæmia, osteomyelitis, and scurvy—are the subjects which occupy the remaining pages of the strictly professional portion of the work. The construction of latrines, field-ovens, and of extemporary water-filters, scales of diets, classifications of wounds and injuries, a formulary of prescriptions, and a copious index, complete the work.

It will be thus seen that the contents of the *Surgeon's Pocket-Book* are of a very comprehensive character; that they form, indeed, a complete *vade mecum* to guide the military surgeon in the performance of duties which may devolve upon him at any moment in the field. Extensive and numerous as the subjects treated upon are, however, owing to the conciseness of the language in which the descriptions are expressed, and by judicious management of the typography, the whole are compressed into a small book less than an inch in thickness and about four inches square. It can thus, with the aid of its limp leather cover, be carried, like Sir Garnet Wolseley's soldier's pocket-book, in an ordinary pocket, without any inconvenience. Bound up with the book are a dozen blank pages of writing-paper for notes and memoranda, which may prove to be a very convenient appendage under many circumstances in field-practice.

In conclusion, we do not imagine that the author intends his "pocket-book" to take the place of larger and more systematic works on the subjects treated in it; but, these having been studied, as they should be, as a regular part of surgical education, there is no surgeon, especially no surgeon who is liable to be called upon to engage in field-duties, but will find Surgeon-Major Porter's work a no less handy than valuable remembrancer and guide. We can strongly recommend it as one of the most useful companions that a medical officer in any branch of the public service can have with him on active service.

NOTES ON BOOKS.

DR. AVELING'S *Memorials of Harvey* (Churchill) is a pamphlet including some rather interesting letters from and relating to Harvey. These fragments, Dr. Aveling suggests, "will be found useful in compiling that larger and more complete memoir of Harvey which is much needed and must some day be written".

MILNE'S *Atavaria Medica* (Edinburgh, E. and S. Livingstone). This little handbook is so very skilfully condensed, and presents in so small a compass information often given more diffusely, though not more perfectly, that we are not surprised to find that it has reached a third edition. In this edition, it has been carefully revised and rearranged by Dr. William Craig. Part II, Medicines arranged according to their Uses; and Part III, on Particular Forms of Medicines; with the subsequent sections, including posological tables; a list of poisons, their effects, tests, and antidotes; and the chapter on Prescription-writing,—are all good. The therapeutical part of the book is weak. As examinations go just now, it is a good students' book.

LETT'S *Dairies* retain the characteristics which have given them their world-wide reputation. Among the most useful for medical men will be found the Office Diary, No. 45, interleaved with blotting-paper; No. 8 also, an excellent cloth-bound diary; and for pocket, the well-known Medical Diary, bound in a Russia wallet. This is especially

handsome and serviceable. The Medical Diary is particularly well arranged and well printed, and contains much useful information. These publishers issue a catalogue of a great variety of note-books and diaries for every kind of use.

SELECTIONS FROM JOURNALS.

THERAPEUTICS.

EXTERNAL USE OF TURPENTINE IN THE TREATMENT OF TONSILLITIS.—In the *Leavenworth Medical Herald*, Dr. S. H. Roberts strongly recommends the use of turpentine externally in tonsillitis. He folds the flannel to four thicknesses, wrings it out in hot water, and pours oil of turpentine over a spot of the size of a silver dollar. The flannel is then applied over the subparotid region, and the fomentation is continued as long as it can be borne. After removal, a dry flannel is applied, and the same region is rubbed with turpentine every two hours. This application is continued daily till resolution occurs. He believes, from the evidence of his long experience, that, thus applied early in the disease, the oil of turpentine has almost a specific effect in tonsillitis. That its action is not simply that of an irritant, he has proved by employing mustard, croton-oil, tincture of iodine, etc., in the same class of cases. They always failed to diminish the inflammation of the tonsils, while the turpentine succeeded.—*Philadelphia Medical Times*.

THE TREATMENT OF CHRONIC DYSENTERY.—Mr. R. Donaldson, writing from Rangoon to the editor of the *Indian Medical Gazette*, June 1st, recommends the compound tincture of benzoin as a most efficacious remedy in dysenteric affections. He says that, in Burmah, dysentery is a very common affection, and in the European, as well as in the native, exhibits a marked tendency to become chronic. In many of these cases, ipecacuanha appears to have little or no effect; and persistence in the treatment by large doses of this drug, far from being productive of good, is fruitful of positive mischief. The stomach is rendered so irritable by it, that the patient is unable to retain nourishment; and he then suffers from exhaustion, the combined effect of the disease and inattention. In these cases, the tincture of benzoin, given in combination with astringents—notably with logwood—has been found extremely useful; often, indeed, acting like a charm; and it may be truly said of it, that its powers of healing diseased mucous membranes equal its performances when applied externally to wounds. The formula recommended is: Compound tincture of benzoin, half a drachm; compound tincture of catechu, one drachm; tincture of opium, ten minimis; extract of hæmatoxylum, ten grains; water, to one ounce; for a draught to be given three times a day. If necessary, the remedy may be administered by the rectum. It would appear that the compound tincture of benzoin is an old, and at one time a well known, remedy in dysentery, as well as in simple mucous diarrhea and in chronic infantile inflammatory diarrhea, in which the evacuations always contain mucus, and sometimes a little blood.

CHLORAL AS AN ANTIDOTE AGAINST SEA-SICKNESS.—At a recent meeting of the Paris Société de Médecine Pratique, M. Guyot stated that he had in his own person tried the efficacy of chloral as an antidote against sea-sickness. He took two fluid-drachms of a French preparation known as the cream of chloral mixed in half a glass of water before going on board the steamer, and felt no disposition towards sea-sickness, from which he had always suffered severely on other occasions.

THE THERAPEUTIC ACTION OF COTO BARK.—Professor von Giel writes on this subject in the *Archiv für Pharmacie*, September 1875 (abstract in *Allgemeine Medicin. Central-Zeitung*, November 20th). Coto bark is obtained from a tree in the interior of Bolivia. It is there used in the form of powder or of alcoholic extract in cases of diarrhoea, colic, and neuralgic toothache; also in tincture in rheumatism and gout. The description of it apparently indicates that it does not belong to the cinchona class (though growing in the district where these trees flourish), but that it is probably one of the *Lauraceæ* or *Ternbinthiaceæ*. Wittstein finds its chief constituents to be, an ethereal oil; a fluid alkaloid, having a smell of herrings and urine, and thus resembling propylamine or trimethylamin; and hard and soft woody matter. It also contains starch, gum, sugar, oxalic acid, tannic acid, etc. Sixteen patients were treated with it—fifteen males and one female. It was given sometimes in fine powder, sometimes in the form of tincture made with one part of coarsely powdered bark and nine parts of spirit of 85 per cent. The powder was given in eight cases, the tincture in seven; both together in one case. The dose of

the powder was $7\frac{1}{2}$ grains four or six times daily; of the tincture, 10 drops every two hours. The cases in which it was given were, two of diarrhoea in pulmonary phthisis; five of diarrhoea from cold and hospital diarrhoea; six of non-febrile gastro-intestinal catarrh with diarrhoea; three of febrile gastro-intestinal catarrh with violent diarrhoea. The powder and tincture were given together in one case of diarrhoea with phthisis. In one case only, neither the powder nor the tincture could be continued, as both produced severe burning pain in the abdomen and vomiting; the patient was phthisical. In another phthisical case, the powder produced much distress, while the tincture was easily borne. Dr. von Gietl believes that the coto bark is a remedy of very great value in the various forms of diarrhoea.

INTESTINAL OCCLUSION CURED BY ELECTRICITY.—In a case of intestinal occlusion supervening in a washerwoman aged 74, and having lasted fifteen days, during which injections and purgatives had been ineffectually employed, Dr. Dal Monta obtained a cure by electricity. The author employed the electro-magnetic apparatus, introducing one pole into the rectum, and applying the other over the abdomen by a wet *plaque*. After the first application, lasting ten minutes, there was an abundant emission of gas. On the following day, the second application produced the expulsion, first of gas, and then of faecal matters. (*Movimento Medico*.) The *Bulletin de Therapeutique*, in commenting on this case, recalls an analysis which it gave of a work by Dr. Fleuriot (p. 4, vol. lxxxix), who has collected a number of similar facts, and expresses the opinion that, before having recourse to an operation, it will always be a duty to have recourse to this treatment, which presents no danger.

PHYSIOLOGY.

THE TRANSFERENCE OF MATTERS FROM MOTHER TO FETUS.—At the recent meeting of the Association of German Naturalists and Physicians (*Allgemeine Wiener Medizin. Zeitung*, No. 40, 1875), Dr. Benicke described the results of some experiments which he had made by administering to twenty-five pregnant women salicyl in doses of half a drachm shortly before labour. The newly born children and the mothers were catheterised, and the urine examined for salicyl. The results were the following. 1. The interchange between mother and fetus was very rapid. The salicyl was always given as soon as labour-pains began. In two cases, where the birth took place at the end of ten and fifteen minutes, no salicyl was found in the children. In two other cases, where the children were born forty and eighty-five minutes after the commencement of labour, no salicyl was found at first, but it was present in the urine examined some hours afterwards. In all the other cases, salicyl was found in the children's urine immediately after birth; in these cases, the shortest duration of labour was two hours. Thus salicyl had passed into the organism of the fetus in forty minutes, and had appeared in the urine in two hours. 2. The tissue-change in the child was more active immediately after birth than in the uterus. This was shown by the stronger evidence of salicyl in the urine obtained a few hours after birth than in that removed immediately after birth. 3. Salicyl ceased to be found in the mother's urine at the end of twenty-four to thirty-six hours; in the child's urine, it was found up to the third or fourth day. The liquor amnii was obtained in a pure state in four of the cases, and was found to contain no salicyl; nor was salicyl found in the liquor amnii of several women to whom it was given for six to fifteen days before labour, although it was detected in the urine of the children.

REPORTS AND ANALYSES AND DESCRIPTIONS OF NEW INVENTIONS IN MEDICINE, SURGERY, DIETETICS, AND THE ALLIED SCIENCES.

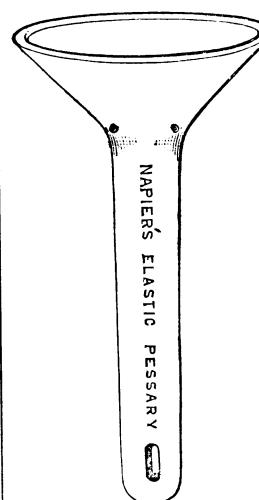
THE FLUID EXTRACTS OF THE UNITED STATES PHARMACOPÆIA.

We have received from Messrs. Ferris and Co., of Bristol, lists and samples of a large series of fluid extracts of the United States of America, of which they keep a stock. Some of these preparations are beginning to be well known here; others which have a high reputation there have yet hardly, if at all, been tested by British practitioners. Among these are extractum cimicifugæ fluidum, considered to be a valuable remedy in chorea; extractum cornū Floridæ fluidum,

an antiperiodic and tonic; extractum gelsemini fluidum, recommended in our columns by Dr. Wickham Legg, Dr. Sawyer, and others, as a febrifuge and nervous tonic, and especially as having valuable odontalgic properties; extractum pruni Virginianæ fluidum, extensively employed in America to relieve the anorexia, cough, and debility of phthisis; extractum spigeliae fluidum, almost universally employed there as an anthelmintic; together with many other preparations, with some of which it might be advisable for our practitioners to make acquaintance. They have also a fluid extract of coto bark, imported from Bolivia, which is recommended by Professor von Gietl of Munich, as having something like specific qualities in many troublesome forms of diarrhoea.

PESSARY OF PERMANENTLY ELASTIC RED INDIA-RUBBER.

THE pessary, of which an illustration (three-quarter size) is here given, is the invention of Mr. William Donald Napier.



Mr. Napier's attention was some time ago directed to the subject of pessaries by Dr. Lee and Mr. Henry Lee of St. George's Hospital; the latter having suggested a form of pessary similar to that which Mr. Napier was working out. The result has been the introduction to the profession of an instrument well calculated to serve the purpose for which it is intended.

The principal advantage which this pessary possesses over others is due to the fact, that it is constructed of a permanently elastic substance, and, like Mr. Napier's catheters, is made in a mould, by which perfection of form, combined with an absolutely smooth surface, is obtained.

The introduction of this pessary into the vagina may, if required, be facilitated by its being drawn, like the catheters alluded to, within a tube from which it is afterwards expelled. An ordinary tubular speculum serves the purpose. The actual means by which the uterus is supported, is (as will be seen by the opening in the stem) through the medium of broad bands placed round the waist or over the shoulder, no resistance being required from the soft parts or pelvic walls. This pessary can be made of any size, and may be obtained from Messrs. Maw and Co., Aldersgate Street, or any surgical instrument maker. The manufacturers are Messrs. Warne and Co., Tottenham.

VENTILATION OF HOSPITALS.

A VERY efficient apparatus for supplying hot air in sick rooms or wards has lately been made for the Hospital for Sick Children in Great Ormond Street by the Messrs. Benham of Wigmore Street, under the direction of Dr. Robert J. Lee. By its means, a continuous stream of mixed hot air and steam may be kept up at a temperature of over 120 deg. Fahr., as it issues from the jet; this can be conveyed by means of a tube to any part of the apartment where specially heated air is required. The obvious advantages of this apparatus are, that the combined stream contains so much atmospheric air as to render it continuously and easily respirable with comfort at quite a short distance from the mouth of the tube; and that by its means the temperature of the air of a small apartment can be considerably raised without causing an undue amount of moisture. These will be great gains in the treatment of cases of tracheotomy and other operations which now call into use the boiling kettle, and will be felt as such not only by the patient, but also by the attendant nurse, a much greater heating effect being brought about with far more comfort and less trouble than by the old method.

This machine acts on the same principle as that lately recommended by Dr. Lee for small "inhalers", enabling patients to breathe continuously heated or medicated vapour uninterrupted by periodic respiratory efforts, which other apparatus generating steam only renders necessary. By the addition, of course, of the various substances used in inhalation, this machine readily impregnates the air of the room with their vapours. It is set going by simply filling the boiler and lighting a small gas-burner, and will then work for ten hours without further attention.

no royal or other charter. A short time ago, it was reported that some one interested in the Andersonian, but somewhat ignorant of its true position, while in conversation with a well known member of the profession, spoke of the advisability of trying to get powers by which they could grant degrees in medicine. In order to this, he thought they might apply for a new charter. "Faith," was the answer, "you had better get an old one first." We have mentioned these facts to show that, in recognising a teacher in this institution, the University Court have given evidence of their intention to admit free trade in teaching. So long as there was no medical teaching outside the University, except in the Andersonian, they seemed to hesitate to recognise teachers there, because it would be like recognising the institution, and it would be encouraging the idea of a corporate body of teachers. But now, when there seems a likelihood of numerous teachers springing up in connection with the Royal Infirmary, they seem to be prepared to recognise all. This is a most important step, and one likely to give a great impetus to medical education in Glasgow.

The note in your pages of last week concerning the vacancy in the Chair of Physiology has taken some of the Glasgow people rather aback. Some have felt that the strong advocacy of one of the candidates at this early date is rather premature, especially as there is a well known Glasgow man in the field. Dr. Eben Watson will, no doubt, be a candidate; and he is recognised as a man of very decided ability and attainments. It is not for us to speak of the respective merits of the several candidates; but it seems a pity to prejudge the case at once, and your observations should not be read in that sense.

ASSOCIATION INTELLIGENCE.

BATH AND BRISTOL BRANCH.

THE next meeting of the above Branch will be held at the York House, Bath, on Thursday, January 20th, 1876, when a discussion on Cerebro-spinal Meningitis (based on Dr. Cole's paper, printed at page 667 of the JOURNAL) will be opened by Dr. Brabazon.

R. S. FOWLER, Bath. { Honorary Secretaries.
E. C. BOARD, Clifton. }

Bath, December 15th, 1875.

SOUTH-EASTERN BRANCH: EAST SURREY DISTRICT MEETING.

A MEETING was held on December 9th, 1875, at the Greyhound Hotel, Croydon; T. R. ADAMS, M.D., in the Chair. There were present, thirty members and six visitors.

Perforate Bronchia.—Dr. HOLMAN stated, that the second attempt by actual cautery to close the still perforate bronchia, mentioned by him at the last meeting, had succeeded.

Papers were read by Dr. Wiltshire, on Puerperal Hyperpyrexia treated by Dry Cold; by Dr. Tilbury Fox, on Lichen Planus or Ruber; by Mr. C. Heath, on a Case of Suppression of Urine for Calculus in the Urethra; by Dr. Duncan, on various Forms of Apoplexy, with reference to Prognosis; by Dr. Holman, on a Case of Partial Placental Presentation with Contracted Os. Mr. Christopher Heath exhibited specimens of Cystine Calculi.

Next Meeting.—It was agreed that the next meeting should be held at the Crystal Palace Hotel on March 9th; J. H. Galton, Esq., in the Chair.

Dinner.—Twenty-seven members and five visitors sat down to dinner.

BATH AND BRISTOL BRANCH: ORDINARY MEETING.

THE second ordinary meeting of the session was held at the College Green Hotel, Bristol, on Thursday, December 9th, at half-past seven o'clock; W. M. CLARKE, Esq., President, in the Chair. There were present thirty-nine members and five visitors.

New Members.—Dr. James Stewart, Dr. E. Markham Skerritt, Dr. Donald Campbell of Calne, and Mr. W. H. Harsant, were duly elected members of the Association and of this Branch.

Communications.—1. Dr. SWAYNE read a case of Thrombus of the Vulva during Labour, and also a case of Inversion of the Uterus.—Mr. BARTRUM made some remarks; and Mr. J. PARSONS mentioned two cases of thrombus which had occurred in his practice.

2. Mr. THOMPSON brought before the meeting the case of a Female Lunatic who had swallowed thirteen Iron Screws, each weighing upwards of 700 grains, the patient being still alive, and having passed five of the number.—Dr. MARSHALL read a record of the case of a

Sailor who had swallowed forty Clasp Knives in ten years, and who died soon after swallowing the last six or seven.—Dr. SWAYNE, Dr. CADDY, Dr. EAGER, Mr. TIBBITS, and Mr. W. M. CLARKE, also mentioned similar cases.

3. Dr. MARTYN read an interesting case of Double Thrombosis of both Middle Cerebral Arteries in a Syphilitic Patient, and exhibited the specimen. This led to a lively discussion on the connection between syphilis and arterial disease, in which Dr. Fyffe, Dr. Beddoe, Dr. Spender, Mr. Lansdown, and Mr. W. M. Clarke, took part.

4. Mr. R. M. STONE exhibited two large Calculi spontaneously expelled by an aged female.

The attention of the meeting was called to the fact that, at the next meeting, the discussion would be on cerebro-spinal meningitis.

CORRESPONDENCE.

PREVENTION OF PYAEMIA IN HOSPITALS.

SIR,—I wish to suggest two methods of ventilating wards that would prove effectual against those scourges, erysipelas, pyaemia, etc.

1. To drive pure warm air twice or oftener daily through the wards by a portable engine constructed with a stove and air-chambers, and a supply-pipe passed out of a window. The windows would be opened, and the engine would be worked after the manner of a fire-engine.

2. Free exposure to pure cold air twice or oftener daily, by all the windows being fully opened, whilst the patients are enveloped in tar paulins or impervious bed-clothing.—I am, sir, your obedient servant,

FREDERICK J. BROWN, M.D.

Rochester, December 11th, 1875.

HOSPITAL ABUSES.

SIR,—The enclosed letter, which by an accident only reached me to-day, puts in a very clear light the injury which our present hospital system does to many of our provincial brethren, and entirely supports the statement made by Mr. Wordsworth a few months ago in the JOURNAL, that the abuses connected with in-patients are quite as great as those connected with out-patients. Can anything be more absurd than that people moving in good society in the country—one "the aunt of a banker", another a gentleman "worth thousands"—should, upon a question of the amount of fee arising between them and their surgeon, be able to say, "Very well, we shall go to London, and get it done for nothing; and the surgeon there will not only raise no objection, but most likely will solicit us to come into his hospital"; and, alas! be able to say this with truth? The cool impudence of the thing strikes one at once; and, did we not know it for a fact, we could hardly believe that a system which rendered such imposition possible would be upheld by any man belonging to the same profession as the surgeon, and, least of all, under the sacred name of charity.

December 7th. I am, etc., II. NELSON HARDY.

"Dear Sir,—I was pleased to see your letter in the BRITISH MEDICAL JOURNAL; but I do not think you see quite the spirit of the motion. It was particularly directed to the great encouragement given by hospital surgeons to cases of operation, which they only too willingly take as *in-patients*, and thus rob their country medical brethren. It is the old dog-and-manger system. If the person cannot pay the regular fee of the London hospital surgeon, the system is to do it for nothing, rather than the provincial general medical man shall do it for a fee that will quite remunerate him. Of late, it has been getting so bad, that people coolly tell country surgeons that, unless you do it on their terms, they will go to London and get it done for nothing. At this present time, I have a patient the aunt of a banker, who moves in the best society, but has the impudence to tell me that, if a large fee be charged, she will go to a charitable institution. She has been operated on before. This lady positively looks down on the medical profession as being a grade beneath her.

"I could tell you of dozens of cases; in fact, it is getting most monstrous. Even to-day, a man worth thousands is threatening similarly, unless the operation is performed at his price. A patient the other day told me that the London surgeon begged her to come into the hospital, although she was quite willing, as she said, to pay a fair fee, and had agreed with a surgeon for that fee. Some of the surgeons of Moorfields perhaps sin in this way more than any other surgeons; but almost all London operating surgeons do it more or less. No wonder we have so many starving members in our profession, when the big fat fish in our community think it honourable thus to swallow the small fish. If you can do anything to lessen this increasing evil, you will deserve the thanks of all the country general practitioners."

From the medical officers of health of the other districts we have received no reply; but having had the opportunity of examining the abstract of the answers to a circular letter addressed to the clerks of the various boards, on the motion of Dr. Joseph Rogers, member of the Strand Board of Works, we find that no mortuary accommodation exists in St. James's, Westminster, nor in the Strand, except the mortuary in Dean Street, belonging to the parish of St. Anne's, Soho, which was built twenty years ago; nor is there any in Greenwich, with some 105,000 inhabitants; nor in Bethnal Green, with 120,213. In St. Pancras, with its 230,000 inhabitants, spreading over an area three miles long, there is only the dead-house of the workhouse; and several of the so-called mortuaries are, as regards site and construction, totally unfit for the purpose, and calculated to deter the poor from temporarily depositing their dead therein. We hope to return to this important public question before long. It concerns the provinces not less than London.

POOR-LAW MEDICAL APPOINTMENTS.

BOAST, Boanerges R., L.R.C.P.Ed., appointed Medical Officer for No. 3 District of the Henstead Union, Norfolk, *vice* A. M. F. Morgan, M.R.C.S.Eng., resigned.
 DAVIS, David, M.R.C.S.Eng., appointed Medical Officer and Public Vaccinator for the No. 4 or Leigh District of the Martley Union, Worcestershire.
 DONOVAN, John L., M.D., appointed Medical Officer, Public Vaccinator, and Registrar of Births, etc., for the Ballincollig Dispensary District of the Cork Union, *vice* G. A. Rountree, M.D., deceased.
 FOWLER, Trevor, L.K.Q.C.P.I., appointed Medical Officer for the Thoydon Garnon District of the Epping Union, Essex.
 GRAY, John R., M.B., appointed Medical Officer for the Borrowby District of the Northallerton Union, Yorkshire, *vice* J. H. Buchanan, M.D., resigned.
 GOVETT, Philip W., M.R.C.S.Eng., appointed Medical Officer and Public Vaccinator for the No. 5 District of the Plympton St. Mary Union, *vice* J. E. Adkins, M.R.C.S.Eng., resigned.
 HARRISON, Thomas W., L.R.C.P.Ed., appointed Medical Officer for the Doneraile Dispensary District of the Mallow Union.
 WILLAN, Reginald M., M.R.C.S.Eng., appointed Medical Officer and Public Vaccinator for the No. 4 District of the North Witchford Union, Cambridgeshire, *vice* J. M. Wilson, M.B., resigned.

MILITARY AND NAVAL MEDICAL SERVICES.

SURGEON-MAJOR STANHOPE H. FASSON, M.D., vacates his appointment as medical officer of the Royal Military Academy, Woolwich, on being promoted to the rank of Deputy Surgeon-General. Dr. Fasson, who has held the appointment since July 1872, is succeeded by Surgeon-Major Edmund H. Roberts, late of the 9th Regiment.

THE ALDERSHOT INQUIRY.

We have been for some time prepared to announce to our readers the decision of the Board recently assembled at Aldershot for the purpose of assessing loss of stores in connection with the first station hospital, but have waited until we could ascertain whether their recommendations had been fully endorsed by head-quarter authority. Nothing, however, has transpired beyond the bare fact that Major-General Primrose and his colleagues have recommended the deficiency to be made good by the department, and that Sir Thomas Steele has most strongly supported their views.

We trust that the Commander-in-Chief and Secretary of State for War will concur in this recommendation, and thus prevent the saddling of a meritorious medical officer with a liability which was, so to speak, forced upon him, and the responsibility for which was weakened, if not destroyed, by informality in the documents submitted to him by the Control. Others, however, may not be so strong in their defence; and we would point out the gross injustice of holding surgeons in charge of station hospitals individually liable for deficiencies which they are merely expected to assess on the Army Hospital Corps. Our combatant brethren would, no doubt, consider it strange were the colonel of a regiment called upon to pay the entire barrack damages committed by his officers and men during their occupation of a particular station. But here is a precisely similar case; and, even as the commanding officer distributes these charges equitably among the companies under his jurisdiction, so is the surgeon expected to transmit the damages to those with whom he is most immediately concerned, *i.e.*, the Army Hospital Corps; and it is absurd, and probably illegal, to hold him individually responsible for one penny beyond his proper share. The department have clearly taken up a false position in this matter. For some unexplained reason, they took over the charge of hospital stores from the Control, who were by no means anxious to relinquish it, and have given it to their own staff, without any counterbalancing indemnity either in money or position.

A good opportunity of retrieving their error is now afforded them, and we hope to see this cumbrous appendage of medico-military duty finally swept away.

MEDICAL NEWS.

ROYAL COLLEGE OF PHYSICIANS OF LONDON.—The following gentlemen were admitted Licentiates on December 20th, 1875.

Atkinson, Francis Edward, 32, Regent Square
 Bartlett, Henry, 153, Great Dover Street
 Barton, James Kingston, 12, Doughty Street
 Birch, Philip, Lichfield
 Cadge, William Hotson, 23, Woburn Place
 Cobb, Robert, St. Bartholomew's Hospital, Chatham
 Crétin, Eugène, M.B. Lond., St. Bartholomew's Hospital
 Foley, Samuel, St. David's
 Harper, Robert Russell, Holbeach
 Hastings, George, M.D. Brussels, St. Bartholomew's Hospital
 Hawkins, Alexander Frederick, 32, Regent Square
 Miller, Frederick Daniel, Angles Road
 Morris, Henry, Wickham
 Morris, William Whytehead, East Bridgford
 Richardson, Timothy, 394, Commercial Road
 Sheehy, William Henry Patmore, St. Bartholomew's Hospital
 Smalley, Herbert, East Thurrock, Grays
 Strugnell, Frederick William, Queen Charlotte's Hospital
 Verco, Joseph Cooke, M.B. Lond., 24, Ovington Street

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—The following members of the College, having undergone the necessary examinations for the Fellowship, on November 25th, 26th, and 27th, were reported to have acquitted themselves to the satisfaction of the Court of Examiners; and at a meeting of the Council on the 20th instant, were admitted Fellows of the College.

Messrs. Thomas Jones, M.B. Lond., L.S.A., Royal Infirmary, Manchester, diploma of membership dated May 17th, 1870, of Guy's Hospital; Robert Lyell, M.D. Lond., L.S.A., Penge, January 25th, 1871, of the King's College and Middlesex Hospitals; William Thomas Law, M.D. Edin., L.S.A., Seamen's Hospital, Greenwich, May 16th, 1871, of the Guy's and Edinburgh Schools; William Garton, M.B. Edin., L.S.A., St. Helen's, Lancashire, July 26th, 1871, of St. Thomas' Hospital; Lewis Mackenzie, L.R.C.P. Lond., Tiverton, Devon, November 15th, 1871, of the London Hospital; Walter Hamilton Acland Jacobson, B.A., M.B. Oxon., November 13th, 1872, of Guy's Hospital; Augustus Winterbottom, Chelsea, November 13th, 1872, of St. George's Hospital; Albert Boyce Barrow, Newmarket, January 24th, 1873, of King's College.

Six candidates, having failed to acquit themselves to the satisfaction of the Court of Examiners, were referred to their professional studies for twelve months.

The following gentlemen, elected Fellows at previous meetings of the Council, were admitted as such.

Messrs. Thomas Bruges Flower, F.L.S., Bath, diploma of membership dated July 9th, 1841; and John Briscoe, L.S.A., Oxford, August 15th, 1842.

At the same meeting, the following members were elected Fellows of the College.

Messrs. James Bratton, L.S.A., J.P., Shrewsbury, diploma of membership dated May 20th, 1836; and William Nash Spong, L.S.A., Faversham, Kent, August 1st, 1842.

APOTHECARIES' HALL.—The following gentlemen passed their examination in the science and practice of medicine, and received certificates to practise, on Thursday, December 16th, 1875.

Buckland, Ernest Hook, University College Hospital.

Haselden, Robert, Bolton, Lancashire

Macintire, John Henry Lee, 95, Gower Street, W.C.

Reeve, Henry, Victoria Park, Hackney

Richardson, Arthur, Rusholme, Lancashire

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

Dalton, C. J., London Hospital

Gay, C. W. E., King's College

Morgan, John, Guy's Hospital

Prior, E. T., St. Bartholomew's Hospital

Rigley, W. B., St. Bartholomew's Hospital

Scallion, E. O., King's College

Symons, J., King's College

Walsh, W. A. S., King's College

White, W. R., King's College

Whitley, F. G. H., St. Bartholomew's Hospital

UNIVERSITY OF OXFORD.—The following candidates have passed the First Examination for the Degree of Bachelor in Medicine in Michaelmas Term, 1875.

Burn, Stacey Southerden, B.A., Corpus Christi College

Cottle, Ernest Wyndham, B.A., St. Alban Hall

Kidd, Percy, B.A., Balliol College

Moulin, James Alfred, M.A., Pembroke College

Wood, John, B.A., Pembroke College
Wright, George Arthur, B.A., Unattached

The following candidates have passed the Second Examination for the Degree of Bachelor in Medicine in Michaelmas Term, 1875.

Champneys, Francis Henry, B.A., Brasenose College
Hartley, John Fleming, M.A., Brasenose College
Jacob, Ernest Henry, B.A., Corpus Christi College
Ormerod, Joseph Arderne, B.A., Jesus College
Sharkey, Seymour John, B.A., Jesus College
West, Samuel Hatch, B.A., Christ Church

UNIVERSITY OF CAMBRIDGE.—The following gentlemen passed the first examination for the M.B. Degree.

H. Bate, Caius; W. Collier, Jesus; F. Dale, Caius; J. Duncuff, Trinity; W. Foster, John; W. C. Gardner, Caius; A. Hill, Down; G. S. Lewis, Caius; W. B. Richards, Caius; A. Sidwick, Trinity; H. Tooth, John; and A. P. Wells, Caius.

KING AND QUEEN'S COLLEGE OF PHYSICIANS IN IRELAND.—Monthly Examination Meeting, December 14th, 15th, and 16th, 1875. Licenses to Practise Medicine and Midwifery were obtained by

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|----------------------------|--------------------------|
| Eyre, John Joseph | Reede, Samuel Thomas |
| Henderson, William G. Hume | Smith, George |
| O'Reilly, George John | Wolfenden, James Jackson |

The License to Practise Medicine was also obtained by Mara, William Francis

Patton, Alexander

MEDICAL VACANCIES.

THE following vacancies are announced:—

ARDWICK and ANCOATS DISPENSARY, Manchester—Resident House-Surgeon.

BELHELVIE, Parish of—Medical Officer.

BERKS COUNTY ASYLUM, Moulsworth—Assistant Medical Officer. Salary, £80 per annum, with board, lodging, and washing.

BIRKENHEAD BOROUGH HOSPITAL—Senior House-Surgeon (unmarried).

Salary, £60 per annum, with board and residence in the house. Applications to R. S. Shield, Esq., 4, Hamilton Square, on or before January 13th, 1876.

BOOTLE BOROUGH HOSPITAL—House-Surgeon. Salary, £80 per annum, with board, furnished apartments, and washing. Applications to the Honorary Secretary.

BROMPTON HOSPITAL—Resident Clinical Assistant. Applications, with testimonials, on or before January 1st, 1876.

CARMARTHEN UNION—Medical Officer.

CHORLTON UNION—Medical Officer. Salary, £250 per annum, with fire, light, attendance, and furnished apartments. Applications on or before the 30th instant.

CHORLTON-ON-MEDLOCK, RUSHOLME, and MOSS SIDE DISPENSARY, Manchester—House-Surgeon.

DENBIGHSHIRE INFIRMARY—House-Surgeon. Salary, £85 per annum, with board, washing, and residence.

DUMFRIES and GALLOWAY ROYAL INFIRMARY—Assistant House-Surgeon. Board and washing. No salary. Applications to the Treasurer.

GENERAL HOSPITAL and DISPENSARY FOR SICK CHILDREN, Pendlebury, near Manchester—Superintendent. Salary, £100 per annum, with everything found.

GLOUCESTER INFIRMARY—Surgeon and Assistant-Surgeon. Applications before January 27th, 1876.

HARDINGSTONE UNION—Medical Officer for the Bradfield District. Salary, £45 per annum, in addition to which the person appointed will receive fees for midwifery and surgical operations. Applications, with testimonials, etc., to the Clerk, on or before January 1st, 1876.

HUDDERSFIELD INFIRMARY—Physician.

KENT and CANTERBURY HOSPITAL—Assistant House-Surgeon and Dispenser. Salary, £50 per annum, with board, lodging, and washing. Applications on or before the 31st instant.

LEEDS UNION—Medical Officer. Salary, £300 per annum, with unfurnished residence, coals, gas, water, and rates. Applications on or before Dec. 29th.

LIVERPOOL DISPENSARIES—Assistant Resident House-Surgeon (unmarried). Salary, £108 per annum, with £5 additional each year till the salary reaches £128, furnished apartments, coals, gas, and attendance. Applications on or before the 29th instant.

MALE LOCK HOSPITAL—House-Surgeon.

MOFFAT HYDROPATHIC ESTABLISHMENT—Medical Man to take charge. Applications to Messrs. Bruce and Kerr, W.S., Edinburgh.

PARISH OF LISMORE AND APPIN, Lettermore—Medical Officer. Salary, £60 per annum. Applications to the Rev. D. Dewar, Manse, Appin, Argyll.

RADCLIFFE INFIRMARY, Oxford—Dispenser for In- and Out-patients (non-resident). Salary, £120 per annum. Applications to the Secretary not later than January 3rd, 1876.

RIPON DISPENSARY—Resident House-Surgeon. Salary, £100 per annum, with furnished apartments, attendance, coals, and candles. Applications on or before January 1st, 1876.

ST. LUKE'S HOSPITAL—Clinical Assistant for six months, from 1st Jan. 1876.

ST. PANCRAS and NORTHERN DISPENSARY—Resident Medical Officer. Salary, £100 per annum, with residence, and £20 for servant's wages.

SHEFFIELD GENERAL INFIRMARY—Physician. Applications on or before January 5th, 1876.

STROUD GENERAL HOSPITAL—House-Surgeon. Salary, £60 per annum, with board, furnished rooms, attendance, and washing.

SURREY DISPENSARY—House-Surgeon. Salary, £120 per annum, with furnished apartments. Applications on or before January 18th, 1876. Candidates are requested to attend the Committee on Tuesday, January 11th, to produce their testimonials, etc.

THARSIS MINES, Province of Huelva, Spain—Medical Practitioner. Salary, £250 per annum. Applications to the Secretary, 136, West George Street, Glasgow.

TONGUE and FARR, District of, County of Sutherland—Medical Officer. Salary, £150 per annum, and house.

TRINITY COLLEGE, Dublin—Professor of Botany. Applications on or before January 22nd, 1876.

WANDSWORTH and CLAPHAM UNION—Resident Medical Officer. Salary, £250 per annum, with furnished apartments, rations, washing, gas, and coal.

WESTMINSTER GENERAL DISPENSARY—Honorary Surgeon. Applications on or before the 30th instant.

WHITECHURCH (Hants) UNION—Medical Officer for the St. Mary Bourne District. Salary, £27:10 per annum. Applications on or before the 27th inst.

MEDICAL APPOINTMENTS.

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

ALLEN, Richard C., M.R.C.S.Eng., appointed Resident Physician to the Queen's Hospital, Birmingham.

BARK, John, L.K.Q.C.P.I., appointed House-Surgeon to the Royal Infirmary, Liverpool.

BIGGER, Samuel F., M.R.C.S.Eng., appointed House-Physician to the Royal Infirmary, Liverpool.

BOOKLESS, James P., M.D., appointed Physician to the Kelso Dispensary.

BRANFOOT, Henry S., M.D., appointed House-Physician to the Radcliffe Infirmary, Oxford, vice C. A. Rayne, M.B.

CROSS, Francis R., M.R.C.S.Eng., appointed Medical Tutor and Subdean at King's College, vice J. H. Philpot, M.B., resigned.

GREENFIELD, William S., M.D., appointed Physician to the Royal Infirmary for Children and Women, vice E. I. Sparks, M.B., resigned.

DAVISON, Francis V., M.B., appointed House-Surgeon to the Royal Infirmary, Liverpool.

DOBBIE, Robert J. A., M.R.C.S.Eng., appointed Resident Medical Officer to the Dover Hospital.

EDWARDS, Frederick S., M.R.C.S., appointed House-Surgeon to St. Bartholomew's Hospital.

GIBSON, Charles, L.R.C.P.Ed., appointed House-Surgeon to the Bootle Borough Hospital.

HARVEY, Henry F., M.R.C.S.Eng., appointed Registrar to the London Fever Hospital.

HOUGH, James, M.R.C.S.Eng., appointed Surgeon to the Borough Gaol, Cambridge, vice J. Hammond, F.R.C.S., deceased.

KEETLEY, Charles B., L.R.C.P., appointed Assistant Demonstrator of Anatomy at St. Bartholomew's Hospital.

LOWNE, Benjamin T., F.R.C.S.Eng., appointed Ophthalmic Surgeon to the Great Northern Hospital, vice B. J. Vernon, F.R.C.S., resigned.

M'LACHLAN, Samuel F., M.B., appointed House-Surgeon to the Chorlton-on-Medlock Dispensary, vice R. A. S. Daly, L.K.Q.C.P., resigned.

M'MASTER, Robert D., M.D., appointed House-Physician to the Royal Infirmary, Liverpool.

*MILLER, Hugh, M.D., elected Physician-Accoucheur to the Glasgow Maternity Hospital, vice J. G. Wilson, M.D., elected Consulting Physician.

RAYNE, Charles A., M.B., appointed Assistant Physician to the Manchester General Hospital and Dispensary for Sick Children.

SHAIN, William F., M.R.C.S.Eng., appointed House-Surgeon to the Royal Infirmary, Liverpool.

SHUTER, James, LL.B., M.B., appointed Assistant Demonstrator of Physiology at St. Bartholomew's Hospital.

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.

DEATH.

WOODWARD.—On December 17th, at Bicester, Oxon, Sarah, widow of the late George Woodward, Esq., Surgeon, aged 82.

WEST KENT MEDICO-CHIRURGICAL SOCIETY.—The third meeting of this Society was held on Friday, December 3rd, at the Royal Kent Dispensary, Greenwich Road. Dr. Prior Purvis (in the unavoidable absence of the President, Dr. J. N. Miller) in the Chair. Dr. Tilbury Fox's paper on Ringworm was (in his absence) postponed until Friday, February 4th, 1876. Mr. E. J. B. Burroughs of Lee brought before the members a typical case of Congenital Syphilis treated by Mercurial Inunction. Mr. J. B. Saundry showed a very fine specimen of Gelatinous Polypus, removed by him during the week from the right nares of a woman. The remainder of the evening was spent in a discussion on syphilis, in which most of the members present took part, illustrating their remarks by appropriate cases. Dr. Peacock will read a paper on Friday, January 7th, 1876.

LONDON FEVER HOSPITAL.—On December 20th, a handsome clock with suitable inscription was presented to Mrs. Puddington, the matron of the London Fever Hospital, by the members of the Committee of that institution, in the presence of all the nurses and officers. Mr. Hugh Owen, the Honorary Secretary, in making the presentation, referred to the care, tenderness, and conscientiousness with which Mrs. Puddington had, during a period of twenty-five years, performed her duties, first as nurse and then as matron. Dr. Broadbent, physician to the hospital, and Dr. Buchanan, a former physician, bore personal witness to Mrs. Puddington's faithful services. Some beautiful engravings of Landseer's works have recently been kindly given to the hospital by Mr. Graves of Pall Mall, and contribute greatly to the cheerfulness of the wards.

OPERATION DAYS AT THE HOSPITALS.

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| 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.—Hospital for Women, 2 P.M.—St. Thomas's (Ophthalmic Department), 3 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.—Guy's, 1.30 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.—East London Hospital for Children, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—St. Thomas's, 9.30 A.M. and 1.30 P.M.—Royal Free, 9 A.M. and 2 P.M. |

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, 30, Great Queen Street, W.C.

UNDERGRADUATE should apply to the Deans of the respective Universities. The examinations must be passed on the spot and in the language of the country.

MIDWIFERY CONTRACTS.

SIR.—In reply to your correspondent H. in last week's JOURNAL, in reference to midwifery engagements, I beg to say that county court judges hold different views on the subject. I determined some time since to try a case in the county court, and very sorry I was for doing it, as the judge laughed me to scorn, and, in fact, kept the whole court amused for about ten minutes with his remarks on the absurdity of a medical man expecting to be paid for work he had not done. In short, he ruled that the contract was not binding on either side. I replied that, in case of a doctor being engaged to attend a woman, and not doing so when sent for, he would be liable for damages (in the event of accident). The judge said no; a doctor can only be expected to use due diligence in attending any case to which he is called, whether he has been previously engaged or not.

My object in troubling you with this long letter is to prevent other medical men from placing themselves in such a humiliating position as I found myself on the occasion mentioned above.—Yours truly, J. WILLIAMS, M.B., M.A.

Barrow-in-Burness, December 14th, 1875.

MR. G. C. STREET (Hampstead).—See BRITISH MEDICAL JOURNAL, May 21st, 1870, and May 11th, 1872; also *London Medical Record*, January 20th, 1875. Our correspondent will also very probably find information on the subject in the pages of *Nature* and the *Pharmaceutical Journal*.

A. C. D.—According to Liebreich (BRITISH MEDICAL JOURNAL, December 20th, 1873), croton-chloral administered internally rapidly produces sleep, but without (as is the case with chloral) lowering the pulse and respiration. It is especially successful in cases of facial neuralgia, according to German reports, and to the reports of correspondents of the BRITISH MEDICAL JOURNAL, whose notes have appeared in past volumes. It is, however, far from being so generally tolerated as chloral. It may be given dissolved in half an ounce each of glycerine and water, with two or three drops of oil of peppermint and some syrup.

WHOOPING-COUGH.

The Attorney-General v. the Hyde Chemical Company.

SIR.—Among notices to correspondents in your last issue, an affidavit is quoted, in which it is deposed that the medical men here had within the last month sent about forty children suffering from whooping-cough to the above manufactory, to inhale the fumes of pitch. Permit me, for myself (and, I think, I may safely say also for the four qualified gentlemen in practice here), to contradict the flattering imputation. But as there are at least five unqualified men in extensive practice in the town, an equal number of prescribing druggists, and still more numerous body of bone-setters, herbalists, and other irregular aspirants to medical fame, the novel method of treatment may have emanated from some of the latter body of practitioners.—I am, s.r., yours respectfully,

THOS. C. LEAH.

Hyde, near Manchester, December 18th, 1875.

F.T.—“Après la soupe, une coupe d' excellent vin
Tire un écu de la poche du médecin.”

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.

THE QUESTION OF THE ADMISSION OF LADIES TO THE MEMBERSHIP OF THE BRITISH MEDICAL ASSOCIATION.

SIR.—Referring to the appeal recently put forth to the members of the above-named Association, for their decision as to the expediency and the rightfulness of admitting women as members of that Society, I venture to submit that a more preposterous notion than the one here suggested cannot be brought under the consideration of professional men. I quite concur with Mr. Linday, who, in this day's JOURNAL, in sustaining his answer “No”, gives, as his first ground of objection, the indisputable fact, that a professional union and fellowship with women would at once weaken or destroy that influence and power hitherto possessed by the British Medical Association, in respect of governing bodies, and even legislative assemblies. I go further, and say that such an amalgamation would probably at no distant period lead to subversion of the policy and general objects of the Association, and all this through the presumption of women, as abandoning their natural sphere of life and taking upon themselves duties proper only to men, for connected with this Association is a fund for the relief of widows and orphans of medical men. Let ladies come amongst us, and thus assert an equality with men in this striving world, and then we may reasonably be called upon to act upon one of two suggestions—either to abolish the fund already established, or to institute a second fund for the relief of widowers and orphans of medical women. This notion may appear absurd enough to some readers; but when women take upon themselves the functions of the medical profession, and for themselves the revenues of that profession, they and we may contend that women are no longer of the weaker sex. In looking, however, at Mr. Lindsay's second reason for opposing the admission of women, I confess that I am not prepared to believe, as he seems to believe, that a female practitioner may, as well as a male practitioner, contribute “to the advantage of the science of the profession”. And here we are led from the one question of eligibility of women as members of our Association, to the other question of their fitness for the exercise of the medical profession. I at once affirm their incompetency, and say that their assumed position as church preachers, lawyers, or auctioneers, would be far less offensive to common sense and decorum than is their determination for the medical profession. It is true that a woman may vaccinate, open an abscess, do the operation of tapping, or read a compilation on some medical subject, and call it her paper, but we can never expect to find her in the practice of really serious and important operations, or adding to the science and practical skill of surgery or medicine. Then, with respect to her physical powers for the discharge of professional duties, I say there is not a woman in England who could endure for six months the fatigue necessarily connected with country medical practice: but perchance she soars above that, and lays herself out for town practice, to the expulsion, perhaps, of good men for country districts. As, however, we now cannot know what a woman may prefer, let us suppose her selecting a rural district for practice. Will she ride on horseback, or will she drive her carriage? and, taking to the vehicle, will she also take the whip, or employ a driver? Adopting the latter course, will she patronise a woman or a man? A man, to be sure; for a man has more strength than a woman, more presence of mind, and more self-reliance—qualities, indeed, which are absolutely required in the practice of the medical profession.

For these reasons, then, and for others not here stated, I in my answer to the question of “Yes” or “No”, have written the words “No, most positively”; and at the bottom of the paper I have taken the liberty of making the gratuitous declaration, “When women are admitted as members of the British Medical Association, I go out of it”; and by way of justifying such determination, it seems to me that I cannot do better than quote the language of Copland's edition of Richerand's *Elements of Physiology*: “The reproduction of the species is, in woman, the most important object of life; it is almost the only destination to which Nature has called her, and the only duty she has to fulfil in human society. Wherever the earth is fruitful, and furnishes man with abundant means of providing for his wants, he dispenses with the services of woman in obtaining from it means of subsistence; he releases her from the burthen of social obligations. Whatever withdraws woman from this primitive destination, whatever diverts her from this end, is to her injury. It is the scope of all her actions and habits; everything in her physical organisation has evident reference to it.”—I am, sir, your obedient servant,

WILLIAM MOORMAN.

Saint Columb, Cornwall, December 4th, 1875.

STUDENT.—*Part. Vic.*: Partitis vicibus, in divided doses. *Hor. decub.*: Hora decubitus, at bed-time. But every student should have a Latin dictionary, and know how to use it.

THE DISPENSING OF MEDICINES.

SIR.—I am surprised that the subject of general practitioners dispensing their own medicines has not been taken up with the spirit that the subject of medical titles was a short time ago, and discussed with much vigour week after week in the columns of the JOURNAL, as it is one of very great importance to the welfare of the profession. Either the principle of general practitioners dispensing their medicines is right or wrong. If right, why should it not be continued? or if wrong, let it be given up. The general practitioners of the present day are much more highly educated men than their predecessors of even twenty or thirty years ago, and the tendency of the age in almost everything is division of labour; and the time, no doubt, will come, if we continue to increase and prosper as a nation as we have done during the last half century, when pharmacy and dispensing will be entirely relegated to chemists and druggists. Still, for a young man commencing practice as a general practitioner, it is a great mistake for him not to dispense his own medicines, which, with coated pills, and concentrated infusions, etc., can be easily done, and without much expense. Giving a prescription, and charging a fee of 2s. 6d. or 3s. 6d., especially in chronic cases, is ruinous practice to a young general practitioner. By so doing, he plays into the hands of his patient and the druggist, who are the real gainers, whilst he and his wife and family, should he possess such blessings, may starve at home; and did not midwifery come to the rescue, many a young general practitioner must pay the penalty of such folly by going to the wall.

The very sensible letter of A Junior Member in your impression of October 23rd I fully endorse, and should advise all young general practitioners to follow his example. The contrast of M.D. Edin. is most remarkable. I never heard of such ruinous practice as an M.D. visiting a patient and prescribing for him for 1s. 6d. I cannot but deeply commiserate such a poor brother, and advise him to follow some such plan as that of a Junior Member.—I am, yours faithfully,

NOVEMBER 29TH, 1875.

A SENIOR MEMBER.

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.

PERCHLORIDE OF IRON IN POST PARTUM HÆMORRHAGE.

SIR.—Dr. Weir's case of *post partum* hæmorrhage was, no doubt, simply a case of inertia uteri, from defective power; and had he used, as contemplated, the forceps, I feel sure it would not have taken place; if so, to much less extent: at any rate, it shows how necessary in these cases it is to be energetic. I quite agree in the recommendation not to pull too much at the cord, but rather to give the placenta a good time, as I can well recollect a case wherein hæmorrhage was increased, if not induced, by such. I have always found it better to allow the uterus to expel the hand, as Gooch says, instead of frequently introducing, as contraction is then better, and of longer duration.

As to the second case of "chronic hæmorrhage", it is not stated if it were due to fibroid of the uterus, which is possible. In that case, no doubt, the perchloride solution would stop it for a time; but inasmuch as there is (this case) a foreign body already *in utero*, which of itself would retain secretions that must decompose, and give rise to all the fatal symptoms of purulent infection, I for one fail to observe the great benefit of filling the uterus with perchloride of blood-clots, setting aside the tanning of the muscular walls. We know the perchloride of iron is not the safest remedy for removing *naevi*; and in wounds where it is used, very often great sloughing results, as much from the agent as from the injury. These cases we can see; in the partially closed uterus it is more difficult—I am, sir, your obedient servant,

A. H. MORRILL, M.R.C.S.E.,

November 23rd, 1875.

Late House-Surgeon Lying-in Hospital.

PUBLIC VACCINATOR.—A very good statement of the subject is to be found in Ross's *Vaccinator's Handbook*, p. 44. "In regard to insusceptibility, it will be observed that no medical practitioner is justified in giving a certificate to that effect, unless he has at least three times unsuccessfully vaccinated the child (30 and 31 Vict., c. 84, sec. 20), and that the form of certificate provides for the insertion of the number of times the child has been so unsuccessfully vaccinated, and also for the operator's opinion that the child is insusceptible. A certificate omitting either of these particulars should be rejected by the vaccination officer, and not registered; for the fact of numerous unsuccessful attempts is not of itself evidence of insusceptibility, nor is the statement of the operator's opinion to be accepted as conclusive, unless he states, as the basis of such opinion, the number of attempts he has made. The statement of having had small-pox in the old form of certificate—that under the Act of 1867—(30 and 31 Vict., c. 84, schedule, Form C) was followed by an expression of the medical practitioner's opinion that the child was 'insusceptible'. This, however, it will be seen, is otherwise in the new form; and it appears to be intended that the receipt by the vaccination officer of a certificate that the child has had small-pox will justify him, after recording such certificate in his report, in treating the case as finally disposed of, without any reference to the medical practitioner for his opinion as to the child's susceptibility or insusceptibility of the vaccine disease. It is desirable to mark this distinction between the old certificate and the new, though even under the Act of 1867 the mere fact of having had small-pox was recognised as an excuse for non-vaccination." (See secs. 20 and 31.)

SUPPRESSED MENSTRUATION FROM RESIDENCE AT THE SEA-SIDE.

EARLY in the month of June, Mrs. H., aged 31, the mother of three children, the youngest of whom is three years old, left her home in Northumberland for the purpose of visiting her parents in the Orkney Islands, where she remained for five weeks, the menstrual flow being regular as to time and quantity up to the date of her leaving home. The next "show" ought to have appeared during her residence there; but though it was irregular, she satisfied herself that it would appear at the next monthly period. Being disappointed in this, however, I was asked to visit her, and, on careful inquiry into the history of her case, could find no satisfactory explanation for this sudden cessation, as she was in the normal standard of health, and gave the assurance that there was no reason for her thinking herself pregnant. The only thing of which she complained was a slight discharge at the regular monthly period, which continued for a few days, and was attended with the same kind of local and general disturbance that we see associated with the proper uterine discharge. The case did not seem to me, therefore, to call for any very active line of treatment, and the patient was asked to wait, in the confident assurance that betimes all would come right with her. The following month, however, proved only to be like the previous, though she complained more of the discharge, and, in addition, a little pain, when it occurred to me that there might be some ulceration to account for this; but, on examination, it was found to consist of only a little leucorrhœa, which seemed an attempt on the part of the uterus to furnish the true sanguineous secretion. The saccharine carbonate of iron was now prescribed for her, in the form of two five-grain pills three times a day, the use of the ordinary remedies usually applied in such cases being advised a day or two before the next period, when, much to her satisfaction, the catamenial flow appeared. It appears, therefore, that this cessation of menstruation was altogether unconnected with any pathological condition, and could only be accounted for from the effects of the marine atmosphere during her stay in the north.

Mafsen, November 29th, 1875.

ROBT. TORRANCE, L.R.C.S.E.

L. M. A.—The Midwifery Board met on the 15th instant, only the second time in this year. The following gentlemen are members of the Board—viz., Mr. Prescott Hewett, chairman, and Drs. Arthur Farre, Robert Barnes, and W. O. Priestley.

CHLORAL AND CHLOROFORM.

SIR.—May I direct your attention to an oversight which occurs in a paragraph at p. 710 of this week's JOURNAL? Chloral is there twice referred to as "solidified chloroform", and as chloroform "in the solid state". With the general intention of the notice in question every one must cordially agree, and on this account it is the more to be regretted that it should be complicated with a scientific inaccuracy such as that quoted. The formula for chloral is $C_2H_5Cl_3O$; that for chloroform is $CHCl_3$; from which it will be seen that the latter contains no oxygen, and only half the amount of carbon contained by the former. The physiological effects are, I think, as different in the two cases as is the chemical composition. The practical danger to be apprehended from considering chloroform and chloral as identical is this: a person who had acquired the habit of taking chloral with apparent impunity might naturally, under this impression, think it equally safe to inhale chloroform, so incurring a risk the magnitude of which could scarcely be exaggerated.—I am, sir, yours truly,

CHAS. ELAM.

December 6th, 1875.

NOTICE TO ADVERTISERS.—Advertisements for insertion in the BRITISH MEDICAL JOURNAL, should be forwarded direct to the Publishing Office, 36, Great Queen Street, W.C., addressed to Mr. FOWKE, no later than Thursday, twelve o'clock.

BOGUS DIPLOMAS.

SOMEWHERE (says the Paris correspondent of the *Times*) there would seem to be a great trade in what the Americans call "bogus" diplomas, for, since the recent exposures in the *Times* and other papers, the dealers in these distinctions have hit upon a plan for obtaining vouchers, about whose authenticity there can be no doubt. Several Parisian doctors have been the victims of these speculators under the following circumstances. Not long ago, this advertisement appeared in several French papers:

"1,000 to 2,000 francs lent to every doctor in medicine or health-officer on the simple presentation of his diploma. Address M., etc."

Several young men who had just taken their degrees, and whose practice was as yet not equal to their wants, were entrapped by this tempting bait, and hastened to the address given. They were most politely received, and asked to leave their diplomas for verification with the affable gentleman who was to make the loan, to return in a week; but, on revisiting the house, the victims found that money-lender and paper had both disappeared. Doubtless at the present moment the writing on these documents has been carefully erased, and some impudent quack is practising as a licentiate of the Sorbonne.

We are indebted to correspondents for the following periodicals, containing news, reports, and other matters of medical interest:—The Hastings and St. Leonard's News; The Belfast News-Letter; The Hereford Daily Telegraph; The Chester Guardian and Record; The Hereford Times; The Bristol Daily Post; The Statesman; The Birmingham Morning News; The Cork Constitution; The Newcastle Weekly Chronicle; The Worcester Journal; The Hobart Town Mercury; The Weekly Times; The Mid-Weekly Hampshire Independent; The Lincolnshire Herald; The Sunderland Daily Echo; The Co-operative and Financial Review; The South Wales Daily News; The Macclesfield Courier; The Glasgow Herald; The Croydon Advertiser; The Glasgow News; The Hastings and St. Leonard's Chronicle; The Metropolitan; The Londonderry Sentinel; Saunders's News-Letter; The Tenby Advertiser; The Eastern Daily Press; The Craven Pioneer; etc.

* * * We shall be greatly obliged if correspondents forwarding newspapers will kindly mark the passages to which it is desired to direct attention.

COMMUNICATIONS, LETTERS, &c., have been received from:—

Sir William Ferguson, Bart., London; Dr. G. M. Humphry, Cambridge; Dr. G. H. B. Macleod, Glasgow; Mr. Crompton, Manchester; Mr. Salkeld, Durham; Surgeon-Major Fleming, Netley; Dr. T. Clifford Allbutt, Leeds; Mr. Leach, Hyde; Dr. W. R. S. Jefferiss, Lochmaben; Dr. Hill, Birmingham; Dr. Skinner, Liverpool; Dr. W. Sedgwick Saunders, London; Dr. Haddon, Manchester; Mr. W. Mac Cormac, London; Dr. Eben Watson, Glasgow; Dr. J. W. Moore, Dublin; Mr. J. V. Solomon, Birmingham; Dr. Murchison, Dumfries; Dr. Morgan, Manchester; Dr. John Duncan, Edinburgh; Dr. Morgan, Oxford; Dr. Vintras, London; Mr. M. C. Souter, London; Dr. Percy Boulton, London; Dr. Sneddon, Beith; Dr. Irvine, Liverpool; Mr. James Williams, Holywell; Dr. J. W. Langmore, London; Dr. Robertson, Glasgow; Our Dublin Correspondent; Dr. Meymott Tidy, London; Mr. J. French Blake, London; Mr. W. Draper, York; Mr. G. C. Coles, London; One of the Boys, Epsom; Mr. Feegan, Belfast; Mr. W. Hodgkins, Oxford; Mr. Valentine Stone, Lawrencekirk; Mr. Dyke, Long Ashton; Mr. Henry Custance, London; Mr. W. Fairlie Clarke, London; Dr. Sidney Ringer, London; Dr. Goldie, Leeds; An Associate; Dr. J. Milner Fothergill, London; The Registrar-General of England; Dr. Edis, London; The Registrar-General of Ireland; Mr. H. E. Stewart, London; Dr. Tilbury Fox, London; M. Marey, Paris; The Registrar of the Royal College of Physicians, London; Mr. Roche Lynch, London; The Secretary of the Manchester Medico-Ethical Society; Mr. A. Woodforde, Plaistow; Mr. T. P. Lucas, London; Mr. J. R. Lane, London; Dr. J. W. Moore, Dublin; Mr. Davy, Bradford; Mr. Johnstone Macfie, Tottenham; Dr. John Duncan, Edinburgh; Mr. J. Barras, Rotherham; Mr. T. Holmes, London; Our Edinburgh Correspondent; Mr. Warrington Haward, London; Dr. Wilks, London; Dr. Brunton, London; Mr. Davy, London; Mr. Shirley Murphy, London; Mr. S. D. McConnell, London; Dr. Claye Shaw, Leavesden; Mr. Hamilton Cartwright, London; Mr. Martin G. B. Oxley, Liverpool; Dr. Pye-Smith, London; Mr. Galton, Croydon; Mr. Cresswell Hewitt, Southampton; Mr. Christopher Heath, London; etc.

BOOKS, &c., RECEIVED.

A Guide to the Microscopical Examination of Drinking-Water. By J. D. Macdonald, M.D., R.N., F.R.S. J. and A. Churchill: 1875.

Quain's Anatomy. Eighth Edition. Vol. I. By Dr. A. Sharpey, Dr. A. Thomson, and E. A. Schäfer. Longmans, Green, and Co. 1875.

Syllabus of Materia Medica. By Alexander Harvey, M.D., and A. D. Davidson, M.D. Third Edition. London: H. K. Lewis. 1876.

Relations of the Urine to Diseases of the Skin. By L. Duncan Bulkley, A.M., M.D. Sampson Low and Co. 1875.

Analysis of One Thousand Cases of Skin-Disease. By L. Duncan Bulkley, A.M., M.D. Sampson Low and Co. 1875.

A Treatise on Human Physiology. By J. C. Dalton, M.D. J. and A. Churchill. New Burlington Street.

Descriptive Catalogue of the Dermatological Specimens contained in the Museum of the Royal College of Surgeons of England. By Erasmus Wilson, F.R.S.

Cholera Epidemic of 1873 in the United States. Two vols. By John M. Woodworth, M.D. Washington: Government Printing Office. 1875.