

Association Intelligence.

BRITISH MEDICAL ASSOCIATION: ANNUAL MEETING.

THE Thirtieth Annual Meeting of the British Medical Association will be holden in London, on Tuesday, Wednesday, Thursday, and Friday, the 5th, 6th, 7th, and 8th days of August.

President—ALFRED LOCHÉE, M.D., F.R.C.P., Canterbury.

President-elect—GEORGE BURROWS, M.D., F.R.C.P., F.R.S., London.

All the Meetings will take place at the Royal College of Physicians, Pall Mall East.

TUESDAY, August 5th.

12 noon. Meeting of Committee of Council.

1.30 P.M. Meeting of the General Council.

3 P.M. First General Meeting of Members. The retiring President will make a few remarks. The new President will deliver an Address. The Report of Council will be presented, and other business transacted.

9 P.M. The President and Fellows of the Royal College of Surgeons of England have invited their Fellows and Members to meet the members of the Association at a *conversazione* at the College.

WEDNESDAY, August 6th.

10 A.M. Meeting of the Members of the new Council.

11 A.M. Second General Meeting of Members. An Experimental Report on the Treatment of Suspended Animation will be read by B. W. RICHARDSON, M.D. Papers and Cases will be read.

1 P.M. The Address in Medicine will be read by W. H. WALSHE, M.D., F.R.S. The Report of the Medical Benevolent Fund will be presented. Papers and Cases will be read.

9 P.M. The President and Fellows of the Royal College of Physicians have kindly invited the Members of the Association to a *Soirée* at the College, at 9 P.M.

THURSDAY, August 7th.

11 A.M. Third General Meeting of Members. Papers and Cases will be read.

1 P.M. The Address in Surgery will be read by JAMES PAGET, Esq., F.R.S. Papers and Cases will be read.

FRIDAY, August 8th.

11 A.M. Fourth General Meeting of Members. Papers and Cases will be read.

1 P.M. The Address in Physiology will be delivered by W. SHARPEY, M.D., F.R.S. Papers and Cases will be read.

6.30 P.M. Dinner at the Albion Tavern, Aldersgate Street. Tickets One Guinea each.

Gentlemen intending to be present at the Dinner are requested to send notice, as soon as possible, to Dr. STEWART, 74, Grosvenor Street, W.; or Dr. HENRY, 15, George Street, Portman Square, W.

Members are requested to enter, on arrival, their names and addresses in the Reception Room, Royal College of Physicians; where cards will be supplied which will secure admission to all the Proceedings.

Refreshments will be provided in the College during the Meetings.

Members who wish for previous information may communicate with Dr. STEWART, 74, Grosvenor Street, W.; or Dr. HENRY, 15, George Street, Portman Square, W.

Papers have been promised by Francis Sibson, M.D., F.R.S. (Aneurisms of the Arch of the Aorta); William Budd, M.D., of Bristol (On the Occurrence of Malignant Pustule in England, illustrated by numerous Fatal Cases, and a Series of Photographs); C. Handfield Jones, M.D., F.R.S. (Suggestions for Inquiries into the Action of Medicines); Lionel Beale, M.B., F.R.S. (Observations on the Formation and Destruction of Tissue in the Living Body); William Farr, M.D., F.R.S. (On Medical Statistics); C. E. Brown-Séquard, M.D., F.R.S. (Remarks on a Case of Wound of the Spinal Cord); Ernest Hart, Esq. (On the Successful Treatment of Aneurism by the Flexion Method); W. Tindal Robertson, M.D., of Nottingham (On Hydro-Therapeutics); A. P. Stewart, M.D. (Some Remarks on the Treatment of Intestinal Obstructions); J. V. Solomon, Esq., of Birmingham (The Relief of Near Sight without Spectacles); Dr. Inman, of Liverpool (On the Question, Is Alcohol Food?); Dr. Ephraim Cutter, of Woburn, Massachusetts, N.A. (On the Employment of Veratrum Viride in the Treatment of Disease); Jonathan Hutchinson, Esq. (On a Form of Deafness hitherto undescribed, occurring in the Subjects of Inherited Syphilis); J. Higginbottom, Esq., F.R.S., Nottingham (On the Non-Alcoholic Treatment of Disease); J. Hughes Bennett, M.D., of Edinburgh (On the Treatment of Pneumonia, with the Results of 105 carefully recorded Cases); Ephraim Cutter, M.D. (The Treatment of Morbus Coxarius by Extension Splints).

PHILIP H. WILLIAMS, M.D., *General Secretary*.

Worcester, July 12th, 1862.

NOTICE TO HONORARY SECRETARIES.

DR. WILLIAMS will feel particularly obliged if the Secretaries who have not yet sent the names of members elected, at the annual meetings of the Branches, to serve on the *General Council*, will forward them to him as early as practicable.

Worcester, July 15th, 1862.

SOUTH MIDLAND BRANCH: ANNUAL MEETING.

THE Sixth Annual Meeting of the above Branch was held in the Trustee Room of the Harpur Charity, Bedford, on June 26th; R. CEELY, Esq., President, in the Chair. There were also present sixteen members and three visitors.

In the unavoidable absence of Dr. FRANCIS, the President, Mr. TERRY of Northampton was called to the Chair. He made some remarks on his sense of the honour conferred upon him; and, as Dr. Bryan, the Secretary, was also prevented from attending, he called upon Mr. Goldsmith of Bedford, the Secretary-elect, to read the minutes of the last meeting. Mr. CEELY, the President-elect, was then introduced by the Chairman.

President's Address. Mr. CEELY then read an eloquent address, in which he congratulated the South Midland Branch upon the zeal and activity of the members; and referred to the benefits accruing to the profession from the Association, in promoting personal acquaintance, and a happy cooperation in those researches which have for their object the advancement of medical science. He spoke of the encouragements that arise from the improved social status of medical men, and the increased esteem and respect in which they are held by a more enlightened public. He also made some observations on the trials that beset the path of the earnest practitioner, and on the frequent inability of the best and most scientifically directed measures to cope successfully with the virulence of disease. The address will be published in the JOURNAL.

Officers for the next Year. Dr. Paley was proposed as President by Mr. DANIELL, and seconded by Mr. HEMMING.

Dr. Bryan and Mr. Goldsmith were proposed as Secretaries by Mr. TERRY, and seconded by Dr. PALEY.

The Committee of Management was then proposed by Mr. HEMMING, and seconded by Mr. COLLINGWOOD, to consist of T. H. Barker, M.D.; T. Chapman, jun., Esq.; E. Daniell, Esq.; J. W. Dryland, Esq.; J. M. C. Faircloth, M.D.; J. G. Leete, Esq.; P. McLosky, M.D.; J. Ody, M.B.; H. Terry, Esq.; H. Veasey, Esq.; and R. W. Watkins, Esq.

Representatives in General Council. The following representatives were proposed by Mr. WILLIAMS, seconded by Mr. COLLINGWOOD, and elected:—Thomas Clark, Esq. (Wellingborough); J. M. C. Faircloth, M.D. (Northampton); E. Lawford, M.D. (Leighton Buzzard); and R. W. Watkins, Esq. (Towcester).

Papers and Cases. The following papers and cases were read.

1. Case of Addison's Disease. By D. J. T. Francis, M.D. (read by the Secretary). The paper will be published in the JOURNAL. The disease was illustrated by specimens of enlarged suprarenal capsules filled with amorphous granular matter, and by a patient, a labourer, aged 30, sent by Dr. Francis for the inspection of the members. The man had a mahogany tint of complexion, and stated that he was formerly much darker than he is at present. Dr. RICHARDSON stated that, from extensive observations, he had failed to discover any necessary connection between this discoloration and disease of the suprarenal bodies; and thought that, at the present stage of our knowledge of the subject, the profession must hesitate to accept the supposed discovery of Dr. Addison as one of the settled facts of science. Messrs. HEMMING and McCORMICK also took part in this discussion.

2. Case of Chronic Hydrocephalus, in which Recovery took place. By W. Paley, M.D. The case will be published.

3. Certain new Therapeutic Agents. By B. W. Richardson, M.D. The iodide of ammonium was the first mentioned. On account of the greater solubility of the salts of ammonium over those of potassium, he had proposed this as a powerful substitute for the iodide of potassium. He had himself used it largely, and had it extensively tried; and some of the practitioners who had employed it, had since discarded the use of iodide of potassium. It was used locally made into an ointment, and given internally dissolved in glycerine or cod-liver oil. The next substance noticed was peroxide of hydrogen, or a solution of ten volumes of oxygen in water. After some interesting observations upon the large number of volumes of oxygen that water may be made to retain, Dr. Richardson proceeded to show the presence of the gas in the solution set free by the catalytic action of peroxide of manganese. He stated that the relief afforded by this substance in the last stages of diseases attended with great dyspnoea, was very marked. The next body was a combination of ammonium with arsenic, which, for the same reason as made the iodide of ammonium superior to that of potassium, Dr. Richardson thought preferable to the arsenite of potash usually employed in cutaneous affections. It was administered internally, and applied locally as a soap or an ointment. The last body mentioned was nitrate of amyl, a recently discovered compound, having no anæsthetic properties, but the vapour of which had the effect, when respired, of accelerating the pulse, and causing congestion of the vessels of the head and face. Remarks were made by Mr. CEELY and Dr. PALEY.

4. Certain Cases of Obstruction and Stricture of the Alimentary Canal. By H. Veasey, Esq. This paper will be published in the JOURNAL.

5. Dr. CUTTER of Massachusetts addressed the meeting on the Veratrum Viride, an American plant belonging to the native family *melanthaceæ*, to which also colchicum belongs. He stated that its primary effect was that of an arterial sedative, reducing the fulness and frequency of the pulse and of the respiration; given more freely, it produced nausea, vomiting, diuresis, and prostration. He also mentioned the extensive and satisfactory trials of its virtues that had been made in America in inflammatory complaints, and recommended its use to the profession in the old world. Specimens of the tincture were exhibited, and some pamphlets were presented, describing the investigations that had been conducted in America.

6. Coma the Result of Intoxication. By H. Hailey, Esq. This paper will also be published.

Future Meetings of the Branch. It was carried unanimously, that the autumnal meeting should be held at Aylesbury; and that the next annual meeting be held at Peterborough, some time in June. Dr. PALEY remarked that a proposition had emanated from the Cambridge-shire Branch, that they should hold their meeting at the same time and place; and he had no doubt that an excellent meeting would result from the fusion of the two Branches.

Votes of Thanks. Thanks were then tendered to Mr. Ceely, with a request that he would allow his address to be published in the JOURNAL.

Thanks were also presented to the authors of the papers; and to the Trustees of the Harpur Charity, through the Mayor.

NORTH WALES BRANCH: ANNUAL MEETING.

THE thirteenth Annual Meeting of the North Wales Branch was held on Tuesday, the 1st instant, at the Royal Hotel, Rhyl. There were eighteen members present. T. T. GRIFFITH, Esq., the retiring President, opened the meeting; and, after expressing his thanks for having been a second time elected to the presidency, vacated the chair for the President-elect, GEORGE TURNER JONES, M.D., of Denbigh.

President's Address. The President delivered an eloquent address. He dwelt principally upon diseases incidental to insanity, and the treatment he found most successful.

It was proposed by Dr. WILLIAMS, of Mold, and carried with acclamation—

"That the best thanks of this meeting be tendered to the President for his address, and that he will be good enough to allow it to be published in the BRITISH MEDICAL JOURNAL."

Report of Council. The following Report of Council was then read:—

"The recurrence of the thirteenth annual meeting of the North Wales Branch of the British Medical Association affords your Council an opportunity of expressing their gratification at its continued prosperity.

"There have been no events of importance to chronicle during the past year; beyond, perhaps, the proceedings in the session of the General Medical Council recently brought to a conclusion. This public body does not appear to have acted as satisfactorily as was anticipated, and has fallen immeasurably in the just expectations of the profession. Their decision respecting the regulations issued by the Royal College of Surgeons of England, with regard to preliminary and professional education, appears to your Council fraught with ominous significance; and requires the unceasing vigilance and the prompt action on the part of the British Medical Association.

"Your Council recommend that an intermediate meeting of this Branch be held annually some time in the

winter, for the discussion of medical and scientific subjects only.

"Since the last meeting, your Council have to report with unfeigned regret the death of three estimable members of this Branch; viz., Dr. Lloyd Williams, of Denbigh; Mr. William Rowlands, of Wrexham; and Mr. Thomas Prytherch, of Ruthin: and they wish to convey to their bereaved families the expression of the warmest sympathy and condolence of this Association.

"At the meeting of the Council of this Branch, held on the 3rd of last month at Rhyl, it was resolved upon, that circulars should be sent calling in the arrears and subscriptions of half-a-crown now due.

"The Financial Statement shows a balance of £4:18:10 in hand, to meet the current expenses of this year, arising from the following sources:—

RECEIPTS.	£	s.	d.
Balance in hand at the annual meeting on 18th June, 1861	5	1	8
Subscriptions since received	3	15	0
	8	16	8
DISBURSEMENTS.			
Secretary's official expenses (including two guests' dinner), stationery and postages, made up to 31st December, 1861	3	17	10
Balance in hand	4	18	10
	8	16	8

Dr. DAVIES (Holywell) moved, and it was seconded by Mr. MORRIS (Marford), and carried unanimously—

"That the Report of Council now read be received, adopted, and entered in the minutes."

Vote of Thanks to the Council of the Branch. Mr. JAMES WILLIAMS (Holywell) moved, and it was seconded by Dr. JENKINS (Ruthin), and carried unanimously—

"That the cordial thanks of this meeting be given to the Council of this Branch for their unremitting attention and valuable services during the past year."

President-elect for 1863, and Place of Annual Meeting. It was proposed by Mr. GRIFFITH (Wrexham), seconded by Dr. ROBERTS (St. Asaph), and carried by acclamation—

"That Dr. Llewellyn Lodge, of St. Asaph, be the President-elect for 1863; and that Rhyl be the place of meeting for that year."

Council of the Branch for Next Year. It was moved by Mr. MORRIS (Marford), seconded by Dr. DAVIES (Holywell), and agreed to—

"That the following gentlemen be elected to the Council of this Branch for next year, in accordance with the seventh bye-law, viz.—O. Roberts, M.D. (St. Asaph); John R. Hughes, M.D. (Denbigh); F. Theed, Esq. (Rhyl); J. C. Davies, M.D. (Holywell); J. Williams, Esq. (Holywell); and J. R. Jenkins, M.D. (Ruthin)."

Representatives in the General Council. It was proposed by Dr. JENKINS, seconded by Dr. LODGE, and agreed to—

"That Thomas Taylor Griffith, Esq., of Wrexham, and Frederick Theed, Esq., of Rhyl, be elected representatives of this Branch in the General Council of the British Medical Association."

Election of Secretary and Treasurer. Dr. ROBERTS (St. Asaph) proposed, and it was seconded by the PRESIDENT, and carried unanimously—

"That D. Kent Jones, Esq., of Beaumaris, be re-elected Secretary and Treasurer for next year."

The Recent Decision of the Medical Council. It was proposed by Mr. GRIFFITH (Wrexham), seconded by Mr. EDWARDS (Denbigh), and unanimously carried—

"That this meeting, considering the high expectations entertained by the profession for the observance of the

rules and laws laid down by the General Medical Council for the guidance of the various corporate bodies in the United Kingdom, express their surprise and strongest condemnation at the recent decision made by that public body respecting the regulations issued by the Royal College of Surgeons of England for the preliminary and professional education of candidates for its diploma."

Intermediate Meeting of the Branch. It was proposed by Mr. THEED (Rhyl), seconded by Mr. WALTER JONES (Ruthin), and carried—

"That an intermediate meeting of the North Wales Branch be held annually sometime during the winter months, of which due notice shall be given to members by the Secretary, for the discussion of medical and scientific subjects only."

Election of Presidents of the Branch. Dr. WILLIAMS (Mold) withdrew his notice of motion, which was to the following effect—

"That no member of this Branch be elected to fill the President's chair who has already done so, until the list of members be gone through."

It was proposed by Dr. JENKINS, seconded by Dr. J. HUGHES (Denbigh), and unanimously resolved—

"That the subject of election of presidents be discussed at the next annual meeting of the North Wales Branch."

New Member. Upon the proposition of Dr. ROBERTS, seconded by Dr. WILLIAMS (Mold), Walter Williams Jones, Esq., of Ruthin, was unanimously elected a member of this Branch, and of the British Medical Association.

Papers and Communications. The following papers, etc., were read, and elicited interesting discussion:—

1. On Prolapsus Ani. By T. T. Griffith, Esq.
2. Case of Unsuspected Pregnancy and Labour, with permanently Retained Placenta. By T. F. Edwards, Esq.
3. Observations on Placenta Previa, and on Retained Placenta. By J. R. Jenkins, M.D.
4. Case of Fibrous Tumour within the Uterus during Pregnancy, producing *Post Partum* Hæmorrhage and Death. By J. C. Davies, M.D.
5. Case of Trephining in Epilepsy. By J. Williams, Esq.

Vote of Thanks. A cordial vote of thanks was passed to the President for his conduct in the chair, and to those members who had read papers, etc., to the meeting.

Dinner. At the appointed hour, all the members present at the meeting in the morning, with Dr. Turnour of Denbigh and others, who arrived subsequently, dined together at the Royal Hotel, and spent a pleasant and agreeable day.

CAMBRIDGE AND HUNTINGDON BRANCH: ANNUAL MEETING.

THE Annual Meeting of this Branch was held at the Rose and Crown Inn, Saffron Walden, on Wednesday, July 9th. Twenty gentlemen were present. F. WELSH, Esq., President, gave a short address.

Resolutions were passed as follows:—

1. It was proposed by Mr. PORTER, and seconded by Dr. WARD—

"That the annual meeting of this Branch of the Association be held next year at Peterborough, in conjunction with the South Midland Branch, under the presidency of Dr. Paley."

2. It was proposed by Mr. PINCHARD, and seconded by Mr. O'CONNOR—

"That the President, the President-elect, and the retiring President, Dr. Paget, Mr. Hammond, and the Secretary, form the Council of the Branch for the ensuing year."

3. It was proposed by Dr. HOOPER, and seconded by Mr. CRIBB—

“That the President and President-elect be the representatives of the Branch in the General Council of the Association during the ensuing year.”

Communications. The following communications were made:—

1. On the Use of Trifolium in Fœno in Lessening the Spasms of Hooping-Cough and Hay Asthma. By M. Foster, Esq., Huntingdon.

2. Case of Catalepsy. By F. Welsh, Esq.

3. Case of Breech Presentation with Hydrocephalus. By H. Stear, Esq., Saffron Walden.

4. Obstruction of the Abdominal Aorta by Emboli, with Fungous Growth in Heart. By J. Brickwell, Esq., Sawbridge-worth.

5. On Clots in the Smaller Veins of the Limbs. By H. Finch, Esq., Cambridge.

6. On the Employment of Alcohol in the Treatment of Disease. By H. Stear, Esq.

7. Case of Diaphragmatic Hernia. By G. E. Paget, M.D., Cambridge.

8. Hereditary Syphilis as evincing itself in the Form of the Teeth and in Corneitis. By G. F. Helm, Esq., Cambridge.

There was much interesting discussion upon these subjects.

The members then adjourned, before dinner, to the mansion and grounds of Lord Braybrooke, at Audley End.

Reports of Societies.

ROYAL MEDICAL AND CHIRURGICAL SOCIETY.

TUESDAY, JUNE 24TH, 1862.

B. G. BABINGTON, M.D., F.R.S., President, in the Chair.

AMAUROSIS CONSEQUENT ON ACUTE “ABSCESS” OF THE ANTRUM, PRODUCED BY A CARIOUS TOOTH.

BY S. J. A. SALTER, M.B., F.L.S.

THE patient, a young woman, aged 24, was attacked with violent toothache, in the right upper first molar, which was followed by enormous swelling of the side of the face, and intense pain. The eyeball then became protruded, and she soon perceived that the eye was blind. Shortly after the establishment of these symptoms, “abscess” of the antrum pointed at the inner and then at the outer canthus, and a large discharge of pus at both orifices followed; these orifices soon closed, and the general symptoms of the part continued unchanged—the swelling of the face, protrusion of the globe, and blindness. This state of things lasted for about three weeks, when the patient was sent to Guy’s Hospital, and admitted.

At this time the patient exhibited hideous disfigurement from swelling of the face, œdema of the lids, and lividity of the surrounding integument. Upon examining the mouth, the carious remains of the first upper right molar appeared to be associated with and to have caused the disease. With the other contiguous carious teeth, this was removed; it led, by an absorbed opening, into the floor of the antrum. The hæmorrhage which followed the operation was discharged partly through the nose and partly through the orifices in the cheek, as well as from the tooth-socket, showing a common association of these openings with the antrum. The condition of the eye constituted the most important symptom. The sight was utterly gone; the globe prominent and everted. There was general deep-seated inflammation of the fibrous textures of the eye. The pupil was large and rigidly fixed; it did not move coordinately with the

other under any circumstances. Some abatement of the symptoms followed the extraction of the tooth; but it was soon found that there was a considerable sequestrum of dead bone, which was removed. The necrosis involved the front part of the floor of the orbit, the upper cheek portion of the superior maxilla, with the infra-orbital foramen, and a large plate of bone from the inner (nasal) wall of the antrum. The removal of the dead bone was followed by the immediate and complete cessation of all inflammatory symptoms; but the eye remained sightless, and the pupil rigidly fixed. About five weeks after the removal of the dead bone, it was noticed that the pupil of the affected eye moved with that of the other, under the influence of light, though vision in it had not returned. The eye was frequently examined at this stage with the ophthalmoscope. All the structures, including the retina, appeared healthy, except the termination of the optic nerve, which was perfectly white and anæmic, while that of the other eye was pink and natural.

The author referred to two other cases essentially similar to his own. The first (unpublished) occurred in the practice of Mr. Pollock, of St. George’s Hospital. The patient had intense inflammation of the entire maxillary region on one side, caused by a carious tooth. It implicated the whole face and the contents of the orbit, but was not attended by “abscess” of the antrum or necrosis of bone. The inflammation completely ceased on the removal of the tooth, but the sight was permanently lost; the pupil was as first fixed, but afterwards moved with that of the other eye.

Another example, closely resembling these, was published by Dr. Brück, in Casper’s *Wochenschrift* for 1851. It was, however, more chronic, and the loss of vision was only temporary.

The author concluded his paper by suggesting that the serious ophthalmic symptoms depended on the nerves of the eye being involved in a plastic inflammation in their course, external to the skull and before their distribution; that the optic nerve was permanently damaged, as shewn by the permanent blindness; that the third nerve was temporarily implicated, as shown by the temporary fixedness of the pupil; and the aversion of the eye from the first seemed to indicate that the sixth nerve was less or not at all involved. Finally, the author left it an open question whether the anæmia of the optic nerve, as displayed by the ophthalmoscope, is to be looked upon as a cause or consequence of its suspended function.

CASE OF SUDDEN DEATH FROM RUPTURE OF THE LEFT VENTRICLE OF THE HEART.

BY HOLMES COOTE, ESQ.

The author communicated the particulars of a case of rupture of the left ventricle of the heart in an aged female, aged 82, while reclining on a couch. Her habits had been very quiet, and her diet regulated for about forty years. She was quite childish, but fond of all about her, and never gave way to temper. The substance of the heart had undergone general fatty degeneration. After referring to other cases, and to the paper by Dr. Quain, in the *Transactions of the Society, on Fatty Degeneration of the Heart*, Mr. Coote said that, in his experience, such cases were of sufficient rarity to render their collection and publication desirable.

LONGEVITY OF ANIMALS. According to naturalists, the longevity of animals may be classified as follows:—Rabbits, 6 to 7 years; squirrels, 7 to 8; foxes, 14 to 15; cats, 15 to 16; dogs, 16 to 18 (that of Argus, the dog of Ulysses, mentioned in Homer, was 20); bears and wolves, 18 to 20; rhinoceroses, 20 to 22; fowls, 25 to 28; porpoises, 28 to 30; rooks and camels, 100; tortoises, 110; eagles, 120; swans, 160; elephants, 400; and whales, according to Cuvier, 1,000 years.

Correspondence.

MURDER OF A UNION MEDICAL OFFICER, AND MUTILATION OF THE BODY.

LETTER FROM RICHARD GRIFFIN, ESQ., J.P.

SIR,—Your readers are already acquainted with the terrible death of Mr. Adam Stapleton Puckett, Medical Officer of the Weymouth Union, by an insane pauper. I will not, therefore, enter into the details of this horrible murder and barbarous mutilation, but at once beg you will permit me, through the medium of your valuable journal, to appeal to the benevolence of the public and medical profession on behalf of the widow of the deceased, who is left nearly destitute.

I have known the late Mr. Puckett for upwards of twenty years, he having been the assistant of my predecessor; I can therefore bear testimony to the fact, that he was a hard-working, kind-hearted man—an apothecary of the old school—and as attentive to the poor as an enormous district, or rather two combined, which extended fifteen miles across the country, would permit. Why he had such a district I must leave the Poor-Law Board and Board of Guardians to answer. That it was cruel to the poor there can be no question, as some of his patients had to walk nine miles for a bottle of medicine and as many home again, making medical relief a mere mockery; but I trust the Select Committee of the House of Commons on Poor Relief, before whom evidence on this subject has already been laid, will recommend to Parliament a material change in the medical arrangements for the relief of the poor.

It was given in evidence at the inquest that poor Puckett only visited the maniac twice a week, and in reality was unaware of his dangerous state, which more frequent visits would have revealed to him, but his enormous district prevented him doing more, as his salary of £116 per annum, including extra medical fees, miserable for such a district, allowed him to keep but one horse; for out of that salary he had not only to pay for the keep of that horse, but had to find drugs for the poor, to maintain himself, his wife, and one daughter to look after the house, and her mother, who has been for the last few years incapable of attending to the household duties.

How poor Puckett, out of so miserable a pittance, managed to do all this, is a mystery, as I know for a certainty that, during the last six months, his entire booking from private practice has been only twenty-three pounds; and yesterday I was assured by a member of his family that at the time of his death he had but twenty-one shillings in his possession, besides the few shillings which the maniac took from his pocket and threw into the river; the widow is therefore left nearly destitute—I say nearly, as there is a small insurance on his life, which I was instrumental in his effecting, but I find that is heavily mortgaged to meet incumbrances occasioned by sickness, and the probability is that the rest will be swallowed up in funeral expenses and the payment of debts.

After this brief recital, I feel I shall not appeal in vain to the generosity of the public for a widow whose husband was so barbarously murdered and horribly mutilated. I have opened an account, "The Puckett Fund," at Messrs. Williams' Bank, Weymouth, and at Messrs. Elliot's Bank, Weymouth, where subscriptions may be forwarded or they may be sent to me, and I will act as treasurer to the fund until means shall be devised to place the money in the hands of trustees for the benefit of the widow, and, if there be sufficient, such members of the family of the deceased as the trustees may deem it desirable to assist. Mr. Puckett left one son and three

daughters, all of whom are incapable of assisting their mother.

I am, etc.,

RICHARD GRIFFIN, J.P.

12, Royal Terrace, Weymouth, July 12, 1862.

Medical News.

ROYAL COLLEGE OF PHYSICIANS. At the Comitia Majora, held on Saturday, July 12th, the following gentlemen, having undergone the necessary examination, and satisfied the College of their proficiency in the science and practice of Medicine and Midwifery, were duly admitted to practise physic as Licentiates of the College:—

Clarke, Julius St. Thomas, Leicester
Dixon, Edward Livesay, Preston
Lyons, William, M.D., Madras
Mills, William Partridge, Ipswich
Power, William Horton Trevor, University College
Rowland, Henry Marshall, Bootle
Smith, Edward, 1, St. George's Place
Walls, William, Hindley, near Wigan

APOTHECARIES' HALL. On July 10th, the following Licentiates were admitted:—

Bazeley, William, St. Aubyn Street, Devonport
Foster, John, Bradford, Yorkshire
Harle, Charles Ebenezer, Islington
James, John, Cardigan
Kernot, Charles Noyce, West Cowes, Isle of Wight
Michell, Sloane, Minehead, Somersetshire
Oliver, John Hamer, Llandysilio, Montgomeryshire
Roberts, John, Kidwelly, Carmarthenshire
Walls, William, Hindley, Lancashire
White, Richard George, Melton Mowbray, Leicestershire

APPOINTMENTS.

*BARDSLEY, Sir James L., M.D., appointed Deputy Lieutenant for the County of Lancashire.
GREENWOOD, Frederick, Esq., appointed Surgeon to the Huddersfield and Upper Agbagg Infirmary.
SAUL, William, Esq., elected Surgeon to the St. Pancras Infirmary and Workhouse.

ROYAL NAVY. The following appointments have been made:—

COMRIE, Peter, Esq., Assistant-Surgeon, to the *Edgar*.
MACKRIDGE, John, Esq., Assistant-Surgeon, to the *Edgar*.
SLOGGETT, William H., Esq., Surgeon, to the *Edgar*.

VOLUNTEER CORPS. The following appointments have been made (A.V.—Artillery Volunteers; R.V.—Rifle Volunteers):—

To be Honorary Assistant-Surgeons:—

BYERS, R. H., Esq., 1st Pembrokehire R.V.
COCK, E., Esq., 12th Surrey R.V.
COOPER, E., Esq., 1st Norfolk Mounted R.V.
JACOB, E. L., Esq., 1st Battery Cheshire A.V.
JOHNSTON, D., Esq., 2nd Forfarshire A.V.
PEARCE, R., Esq., 1st Glamorganshire Light Horse Volunteers.
USHER, T. S., Esq., 1st Corps East York R.V.

MARRIAGE.

RICHMOND, the Rev. William H., Head Master of Tottenham College, to Charlotte Mary, second daughter of *Joseph WARD, Esq., Epsom, on July 10.

DEATHS.

EDWARDES. On June 15th, at Malta, Mary J. N., wife of Henry S. Edwardes, Esq., Surgeon, of Alexandria.
EVANS, Richard D. J., M.D., at Hertford, on July 9.
MEDD, John, Esq., Surgeon, at Stockport, aged 57, on July 3.
MOSSE, James R., Esq., Surgeon, at Fareham, Hants, on June 26.
O'NEILL, Thomas, Esq., late of the Madras Medical Service, aged 66, on July 6.
ROSS. On April 13th, at Peshawur, aged 2 years, William T., eldest son; and on May 25th, aged 8 months, Guy Carter, son of J. T. C. Ross, Esq., Surgeon, 21st Hussars.
SMITH. On July 8, at 6, Canonbury Lane, aged 39, Eliza, wife of J. Stuart Smith, M.D., Staff Surgeon-Major.
SOMMERSET, John, M.D., at Milton, Wilts, aged 76, on July 5.

BAD MILK IN NEW YORK. During the past week the law against swill-milk dealing in this city was enforced. A large number of milkmen were arrested, all of whom pleaded ignorance of the law, and after being suitably reprimanded, were discharged with the promise, if again arrested for the same offence, they would be dealt severely with. (*American Med. Times.*)

ROYAL LONDON OPHTHALMIC HOSPITAL. The long expected vacancy for an assistant-surgeon to the Royal London Ophthalmic Hospital, for which appointment an active canvass took place in October and November last, has now been declared; but two appointments are to be made instead of one. We need hardly add, that there are many candidates in the field.

NEW HOSPITAL AT DEVONPORT. The Devonport, Stonehouse, and Cornwall Hospital is now in course of erection. The eastern wing is to be devoted to the purposes of a Lock Hospital. The committee submitted the plans of the internal arrangements to Miss Nightingale for her approval, and valuable suggestions were made by her in reference to them. The contract for the building has been taken for £6900.

DIMINUTION OF DRUNKENNESS. In the summary proceedings before magistrates in England last year, 82,196 persons were charged with being drunk; but, large as the number is, it is seven per cent. less than in 1860, and there was a small decrease in that year also. Juries on coroners' inquests found 199 verdicts last year of death from excessive drinking, but that was nearly thirty per cent. fewer than in 1860. So that bad has been worse.

KENT BENEVOLENT MEDICAL SOCIETY. The seventy-fifth annual meeting of this society was held at the Ship Tavern, Greenwich, on Wednesday, the 11th ultimo, under the presidency of Henry Barnett, Esq., of Blackheath, and was attended by several members from distant parts of the county. Annuities of £50 each were voted to five aged widows of deceased members, and of £40 to one younger; also, of £50 to an aged member in needy circumstances. The steward of the Greenwich district likewise reported that he had, since the last meeting, with the concurrence of the treasurer, given a donation of £25 to four orphan children of a deceased member, who had recently lost both their parents by an attack of fever within a few days of each other; and the thanks of the meeting were voted to the treasurer and steward for their promptness in so doing. The members afterwards dined together; Dr. Sibson and Mr. Probert attending as visitors. Several new members were elected; and it is surprising that more do not join a society which, from its ample means, the result of seventy-five years good management, is able to assist so liberally those who stand in need of, and have a claim on its benevolence.

MEMORIAL OF THE LATE DR. TODD. The ceremony of uncovering a marble statue, erected to the memory of Dr. Todd, took place on the 3rd inst., at King's College Hospital. The work is from the studio of Mr. Noble, and is worthy that sculptor's fame. The original cast was a conspicuous object in the exhibition of the Royal Academy last year; but the position now occupied by the finished marble likeness is far more favourable to the display of its merits. It stands in the vestibule of the institution, where it cannot fail instantly to strike every visitor. The chairman, Mr. Cotton, announced that the committee had been enabled by the subscribers to bestow annually a bronze medal, by J. Wyon, and books to the value of four guineas, as a "Todd prize" for clinical medicine, in perpetuation of a similar prize which Dr. Todd himself gave during his lifetime. Mr. Cheere and several other personal friends spoke in terms of high eulogy of the talents of the deceased gentleman, and observed that, apart from the eminent position as a scien-

tific physician which Dr. Todd attained, the statue was a most fitting recognition of his early labours as one of the founders of the hospital. Professor Fergusson, on the part of his colleagues, expressed their gratification at the honour conferred upon one of their body, and held up to the students the example of Dr. Todd as a pattern in every respect worthy of their imitation.

SHORTCOMINGS OF AMERICAN MILITARY SURGERY. The many-sided phases of the war of the American Rebellion will furnish exhaustless themes for future aspiring historians. But who is to do the world the service of recording, with impartial hand, its bad surgery; the limbs wantonly sacrificed; the lives lost that would have been saved by timely operations; the unseemly incisions; the careless dressings; the neglect of medical treatment? These are not the most unimportant features of this war, but unfortunately they shun observation and record, and too frequently, alas! quietly seek the oblivion of the grave. We do not insist that the army surgeon shall have the highest degree of skill, but that he shall have an average knowledge of his profession, and exhibit in his practice a reasonable share of good sense and sound judgment. This degree of knowledge should certainly be expected of one who has the unlimited power for evil of an army surgeon. We plainly do not demand too much, when we require that he should exhibit more professional knowledge and skill than a layman; and yet even this modicum of qualification is not always found, as the visitors to some military hospitals attest. There have been noticed stumps of amputated limbs in which the bone protruded several inches beyond the unsloughed flesh; others in which the flap was made by cutting from without inwards and from above downwards, instead of the reverse direction. It is true that these are very exceptional cases; but they prove, nevertheless, from what a low level the gradation of surgical qualification commences. Nor can they fail to suggest that if such utter ignorance of the mere art of surgery exists in the army, even to the most limited extent, what a deficiency in a knowledge of its science may be found. And if we trace these delinquencies to their legitimate results, who will not turn with horror from the page of history that bears their record? (*American Med. Times.*)

AMERICAN WAR NEWS. Professor Andrews, writing to the *Chicago Medical Examiner*, from the battle-field at Pittsburgh Landing, says: "The surgeons showed commendable courage, and, indeed, seem to have exposed their lives unjustifiably in some cases. One surgeon, whose name I cannot learn, was killed; and six or seven were wounded. Among the latter was Dr. Frank Reilly, the junior editor of your journal. He was shot in the leg, fracturing the fibula, while attending to the wounded of the Illinois Lead Mine Regiment, as assistant-surgeon. His wound disabled him from field service, and necessitated sending him home for recovery. Dr. Roskotten of Peoria was injured. His horse was shot under him, and, falling on his leg, disabled him from field service. He went on board a hospital steamer, and rendered valuable service among the wounded there."—Dr. Cuyler is making arrangements to enlarge the hospital accommodations here, besides the new general hospital at Newport News. Dr. Cuyler will, in a few days, proceed to New Point Comfort, mouth of the Potomac, with the view of occupying the large hotel and cottages there, which will materially increase the hospital accommodations in this vicinity.—The demand is and will continue to be for competent surgeons and nurses. They are wanted, not temporarily, but permanently. New surgeons offering their services should do it with this reference. If volunteers cannot be obtained, Dr. Cuyler is prepared to hire competent surgeons, who will be expected to engage themselves as long as their services are required.—Dr. Stone of New Orleans has

been arrested by General Butler, and confined, heavily ironed, in Fort Jackson.—The daily expectation of a great battle near Richmond, and the consequent demand for hospital accommodations, continues to stimulate the authorities in their efforts to meet the emergency. The churches of Washington and Alexandria have been seized, and a demand has been made upon this city for enlarged provisions for the wounded. We must repeat the suggestion of last week, that the wounded should be distributed more widely at the North. Washington is as unfit for hospitals as a place can be made by the accumulation of the *materies morbi*, and the same is true of Alexandria and Yorktown. It is folly to herd the sick in large cities when such distribution can easily be made.—The following order has appeared from the War Department: "Surgeon David S. Hays, 110th Regiment Pennsylvania Volunteers, having been ordered to conduct to this city a large detachment of sick and wounded men, and having shamefully neglected them after their arrival, the President directs that for this gross dereliction of duty he be dismissed from the service, and he is hereby accordingly dismissed." It appears that Surgeon D. L. Hays left upwards of three hundred wounded soldiers in cars over Saturday night, while he himself went to bed at Willard's. He admitted these facts when called before the Secretary of War, but pleaded that he had vainly sought to find any official in Washington to tell him what disposition to make of the wounded.—The Surgeon-General of the Federal States has issued the following notice: "It is intended to prepare for publication the Medical and Surgical History of the Rebellion. The medical portion of this work has been committed to Assistant Surgeon J. J. Woodward, United States Army; and the surgical part to Brigade-Surgeon John H. Brinton, United States Volunteers." All medical officers are requested to cooperate in the undertaking.—The Hygeia Hospital at Fortress Monroe is to be broken up, and the patients transferred to a more healthy and convenient place. An order will also be made to discontinue sending sick and wounded to Yorktown. There are now at that post nearly fifteen hundred, and the accommodations are very inferior and the water unhealthy.

ON THE CONSTRUCTION OF HOSPITALS. Mr. Charles Hawkins, who has paid great attention to, and has had very great practical experience of, this subject, which is one of great practical interest, especially at the time when a new St. Thomas is looming up through the misty future, writes as follows:—"I think the best plan we can adopt is that of the letter **H**; the wards being only in the wings, and the centre of the building used for the officers' apartments and the other necessary rooms and offices, etc., etc. The wings can be made long or short, according to the number of beds to be required. A plan of such an hospital—to contain 250 beds—I exhibited last year in the Architectural Exhibition. In this plan wards have windows on each side, which I consider a *sine quâ non*. The fire-place is placed in the centre of the ward, having two faces. In this plan the fire place is so situated as more equally to distribute the heat, and to be seen by a larger number of patients; whilst a portion of the building through which the chimney goes serves as a ventilating shaft. The wards should have windows on both sides; no entrance to wards through corridors that cannot be ventilated, or, what is worse, no *double* wards; all water-closets to be placed in a portion of the building projecting from the main building, so that they can have windows on both sides. Each ward to have attached to it a lavatory, with a constant supply of hot and cold water, where the patients who are able to get up may wash themselves; also a room fitted with *slate* shelves, where the provisions of the patients—such as bread, butter, and milk for the day—may be placed, and not, as

now they usually are, on shelves over the bed; a room also to contain the clothes of the patients—not to be placed as they now are in boxes close to, or, what is worse, under the patients' beds. If there are nurses' rooms, large windows in them, so that they may have a view of the patients (and no green blinds allowed in these rooms, so as to do away with their use). Of course it is not requisite to mention the necessity of having hot and cold baths, lifts, etc. In an hospital such as I have mentioned, there should be at least three large staircases: one in each wing for the *patients* (and if the wings are long, two may be required); and one in the centre of the building for the use of those in the hospital not patients. All these staircases should have an opening in the roof, filled in with perforated zinc, and covered for protection from rain by a raised zinc chimney or cowl. Such a plan has been adopted at St. George's Hospital with good results. The windows in the wards should be like those in use in the Middlesex and St. George's, opening by a very simple arrangement in three or four divisions, the quantity of open space being regulated according to the quantity of fresh air required. As to the grand point, *ventilation*, I must confess that I have very little faith in what is called "scientific" ventilation, and I have seen a good deal of it. The ventilation of an hospital may be effected in a different mode to what may be required in large buildings containing a vast number of people, such as churches and theatres. I believe the ventilation of an hospital to be a very simple matter. Let the wards be built as I have advised; the windows kept almost constantly open, however small a portion of them; the staircases, halls, and corridors large, and warmed when necessary with hot water; Dr. Arnott's ventilators in the chimneys; all water-closets being well shut from, although communicating with, the wards; all offensive dressings, etc., to be immediately removed from the wards. Regarding the size of wards, I think they should not be too large nor too small; from twenty to twenty-five beds in each; from fifteen-hundred to two-thousand cubic feet of space to each patient; wards not too lofty; windows reaching within nine inches of the ceiling; and at least six feet space between the beds. Wards thus constructed, and proper attention being paid by the attendants to the means of ventilation, will be kept as sweet and pure as rooms can be containing a number of sick people. I cannot conclude these remarks without strongly expressing my decided opinion of the *absolute necessity* of every hospital containing convalescent wards. Such wards have lately been constructed in St. George's Hospital; but as they were made at my suggestion, and after my plans, I would rather quote what is thought of them by others. The following is from the Annual Report of the hospital, just published:—"The two day wards at the top of the hospital, used as convalescent wards, have proved very beneficial; and the Weekly Board consider the following extract from a clinical lecture, delivered at the hospital by Mr. Prescott Hewett, one of the surgeons to the hospital, will be very acceptable and interesting:—"As for pyæmia, in hospital practice, that, I am happy to say, is less frequent in the wards of St. George's Hospital than it used to be; indeed, for the last two or three years, our wards have been remarkably free from this bane of surgery; and for this improvement there is no doubt that we are mainly indebted to our convalescent wards—the large well aired rooms which have lately been built at the top of the hospital. These convalescent wards I consider to be of the utmost use, not only to the patients who are thus enabled in all weathers to get out of their own wards, but also to the patients who may still be obliged to remain in bed; the general wards are relieved of a certain number of patients during a great part of the day, and both sets of patients thus have a purer atmosphere to breathe." There is also one other subject well worthy the consideration of governors of hospitals; the desirability of spending a little money in

ornamentation of the wards. £40 or £50 will go a long way, in a large hospital, in giving to the wards an appearance of something like decorative art; and such a modest outlay will tend to enliven the spirits and hasten the cure of many a patient now doomed to have nothing on which to rest a restless eye than the eternal whitewash of most hospitals. A little shade of colour introduced into the wash for the walls, with a party-coloured border, is all that is required, with a few well selected engravings. To perfection in drainage it is hardly necessary to allude. The remarks I have ventured to bring before you are necessarily brief, and only touch on some of the most salient points in hospital construction. If I had more time, I would lay before the profession some extended observations; but I thank you for the space you have afforded me.

OPERATION DAYS AT THE HOSPITALS.

MONDAY..... Royal Free, 2 P.M.—Metropolitan Free, 2 P.M.—St. Mark's for Fistula and other Diseases of the Rectum, 1.15 P.M.—Samaritan, 2.30 P.M.
TUESDAY..... Guy's, 1½ P.M.—Westminster, 2 P.M.
WEDNESDAY... St. Mary's, 1 P.M.—Middlesex, 1 P.M.—University College, 2 P.M.—Royal Orthopaedic, 2 P.M.
THURSDAY..... St. George's, 1 P.M.—Central London Ophthalmic, 1 P.M.—London, 1.30 P.M.—Great Northern, 2 P.M.—London Surgical Home, 2 P.M.
FRIDAY..... Westminster Ophthalmic, 1.30 P.M.
SATURDAY..... St. Thomas's, 1 P.M.—St. Bartholomew's, 1.30 P.M.—King's College, 1.30 P.M.—Charing Cross, 2 P.M.

POPULATION STATISTICS AND METEOROLOGY OF LONDON—JULY 12, 1862.

[From the Registrar-General's Report.]

	Births.	Deaths.
During week.....	{ Boys.. 882 Girls.. 825 }	1707 1065
Average of corresponding weeks 1852-61		1747 1155
Barometer:		
Highest (Tu.) 29.902; lowest (Sun.) 29.313; mean, 29.600.		
Thermometer:		
Highest in sun—extremes (Tu.) 116 degs.; (Wed.) 86 degs.		
In shade—highest (Tu.) 75.5 degrees; lowest (Fri.) 44.7 degs.		
Mean—58.2 degrees; difference from mean of 43 yrs.—3.4 degs.		
Range—during week, 30.8 degrees; mean daily, 17.2 degrees.		
Mean humidity of air (saturation = 100), 85.		
Mean direction of wind, S.W.—Rain in inches, 0.73.		

TO CORRESPONDENTS.

. All letters and communications for the JOURNAL, to be addressed to the EDITOR, 37, Great Queen St., Lincoln's Inn Fields, W.C.

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

IS ALCOHOL FOOD?—SIR: I admire your ingenuity in evading a disagreeable question far more than your editorial courage. I must keep you to the point, and again ask, What amount of evidence will content you? You have challenged proof, and you have taken advantage of your position to attack me in an offensive manner. I accept your challenge, in spite of your being in possession of the hill. You blench from the combat. Unless you are prepared to enter the lists fairly, I must consider you an intellectual craven. I trust, however, that you have something knightly in you, and that you are not *vox et preterea nihil*—a medical Sir Andrew Aguecheek—who only ventures to cope with a Viola, and fears those who seem "cunning of fence".

I am, etc., THOMAS INMAN.

Liverpool, July 12th, 1862.

[This is the last letter of Dr. Inman's, done in this style, which we shall publish. We are surprised that he is blind to the impropriety of his language. EDITOR.]

RELIGIOUS SERVICE AT THE MEETING OF THE ASSOCIATION.—SIR: The commencing of our annual meetings with a religious service is a proposition which (so far as I have mentioned it to others) has been met with but one dissentient voice. The common reply has been that of Dr. Stewart—an expression of surprise that so reasonable a suggestion should have been so long delayed; and a cordial assent has been given to the proposal in my letter of the 21st ult. (signed X. P.), suggesting that on the coming anniversary the oversight should be corrected. As it is highly probable that there will be a larger attendance of members this year than ever has been before, the opportunity is peculiarly fitting for learning the mind of the Association. It is therefore my intention to bring the question forward in the form of a resolution. I shall, if possible, commit it to more able hands than my own; but if it be judged better that the unknown X. P. should take the initiative, he will not shrink from the responsibility. In anticipation of this duty, I shall be glad to receive communications from any who may not be able to attend the meeting; and this, whether they are in favour or not. Though "peace at any price" is not my motto, when a principle, which seems to me important, is involved, I wish ever to assert my own convictions with full consideration of, and proper deference to, those of others who may differ from me. I am, etc., WILLIAM OGLE.
Derby, July 14th, 1862.

I presume it will not be necessary to give any more formal notice than this. W. O.

SIR: I believe that many members of the British Medical Association approve of our annual meeting being inaugurated by a religious service. Mr. Davies, of Pershore, and others who think with him, are not obliged to attend such service; but those who look upon the art of medicine as a very sacred thing, and duly feel the responsibility of practising it, will gladly avail themselves of an opportunity to celebrate the offices of praise and thanksgiving. I apprehend that many dignitaries of our church would feel complimented by being asked to preach on such an occasion. At all events, I hope that the matter will be earnestly taken up by the Council. I am, etc., AN ASSOCIATE.

Bath, July 15th, 1862.
SIR: I take leave to add my name to the number of your correspondents who advocate the opening of the proceedings of the approaching annual meeting with Divine Service, or, at any rate, the holding service at some appropriate period during the meeting. The subject cannot too soon come under the careful consideration of the Managing Council. Where there is a will, there is a way. The will, probably, has not always been prominently shown among the medical profession as a body. I am, etc., WILLIAM MARTIN.

Brighton, July 15th, 1862.

DR. W. B. MUSHET.—Your Letter shall appear next week.

COMMUNICATIONS have been received from:—Mr. RICHARD GRIFFIN; Dr. LATHAM; Dr. W. OGLE; Mr. F. DAVIES; Dr. JAMES RUSSELL; Dr. INMAN; Mr. F. H. SANKEY; Dr. H. PORTER; Dr. THOMAS WILLIAMS; Mr. WILLIAM COPNEY; Dr. W. B. MUSHET; and Dr. FLEMING.

BOOKS RECEIVED.

1. The Medical Profession in Great Britain and Ireland; with an Account of the Medical Organisation of France, Italy, Germany, and America. By Edwin Lee, M.D. Parts I and II. London: 1857.
2. The Mammary Signs of Pregnancy and Recent Delivery. By J. Lumley Earle, M.D. London: 1862.
3. Parturition without Pain. By James Townley. London: 1862.
4. The Treatment of Gonorrhoea without Specifics. By J. L. Milton. Second edition. London: 1862.
5. The Establishment and Management of Cottage-Improvement Societies. By W. A. Greenhill, M.D. London: 1862.
6. Schweizerische Zeitschrift für Heilkunde. Erster Band.
7. On Pelvic Hæmatocele. By Dr. Byrne, New York.

ADVERTISEMENTS.

Third Edition, price 2s. 6d., Plates,

The Ear in Health and Disease,
with Remarks on the Prevention of Deafness. By WILLIAM HARVEY, F.R.C.S., Surgeon to the Royal Dispensary for Diseases of the Ear.

H. RENSCHAW, 356, Strand, London.