

attendance upon the permanent staff has generally been complained of as a source of loss. From this they will now be relieved when brigade dépôts are formed, but they will continue to be employed on this duty when no army medical officer is available. Until the 31st of December next it will not be known how many militia medical officers accept the new terms, and until then I cannot undertake to enter upon a full consideration of the facts, nor can I give any pledge as to my action.

Leprosy in India.—In reply to Sir P. O'Brien, Lord GEORGE HAMILTON said it was not the intention of the Government to give effect to the suggestions of Dr. H. V. Carter embodied in his report relative to leprosy and leper asylums in Norway with reference to India. They have directed further inquiry to be made in India with a view to ascertain the correctness of the conclusions at which Dr. Carter had arrived.

Wednesday, August 9th.

The Cruelty to Animals Bill.—In moving the second reading of the Cruelty to Animals Bill, Mr. CROSS traced the history of the question from the rise of the strong feeling against the practice which led to the appointment of the Royal Commission to the Bill which had been based on the Report. The result of the Report had been to show a general tendency to humanity among those who practised vivisection, but there had certainly been cases of cruelty. The great principle of the Bill was that no person should be permitted to perform experiments, except under restrictions, and that no unnecessary pain should be inflicted on animals. Experiments must only be performed with a view to acquiring new knowledge, for the alleviation of human suffering, in a registered place, and by persons holding a licence. The animals during all the time of the experiments must be kept under the influence of anaesthetics, and the experiments shall not be performed in medical schools or hospitals, nor for the mere attainment of manual skill. Touching on the changes in the Bill, which, he said, did not infringe its principle, Mr. Cross explained that special licences will be granted to the highest class of experimentalists, which will not require registration; that special licences will be granted for experiments without anaesthetics, and also for experiments on dogs and cats; and that prosecutions in these cases must be conducted by the Secretary of State, and not by a common informer. Invertebrate and cold-blooded animals will be exempted from the Bill.—Dr. WARD, who had given notice of his intention to move the rejection of the Bill, said that, after the changes made in it, he would not push his opposition so far, but characterised the agitation and the Bill based on it as groundless and absurd.—Sir J. LUBBOCK supported the Bill, and expatiated on the scientific value of the results of vivisection.—Mr. HOLT, on the other hand, would be content with nothing less than the abolition of vivisection; and read various passages from the evidence to show that the Report was biased.—Mr. LOWE pointed out that the Bill created a new law, for the present law only protected domestic animals from torture, and denounced with much indignation the proposal to put under the ban of exceptional legislation and to rank with body-snatchers men of the highest training, who had performed the greatest services to mankind. He recommended that Parliament should deal with the whole law of cruelty to animals, and that physiological experiments should be accepted so long as they were not wanton and not cruelly conducted.—Mr. WYNDHAM urged, as objections to the Bill, that it registered the place instead of the certificate and the licence of the individual, created a system of inspection by the Home Secretary, and insisted upon reasons being given for experiments.—Dr. PLAYFAIR observed that if this proposal to legislate on what was but an insignificant corner of this question was meant to preface the introduction of a larger and more general measure, applicable to all animals alike, he should not say a word against it; but if the public conscience was to be fully satisfied, he thought they would have to go further. He admitted that there was reason for legislation, in the fact that physiologists had laid upon themselves, for a long time, a moral obligation to make their experiments with the least possible suffering to animals by placing them under the influence of anaesthetics. With regard to the alterations made in the Bill by the Home Secretary since its introduction, he considered that, upon the whole, they would make it more acceptable to a large number of the medical profession; for it would now make statutory what physiologists had long made customary.—Mr. FORSTER, as a member of the Royal Commission on the subject, admitted that he had entered on the inquiry with a bias against vivisection; but he had left it with the conviction that, if it were justifiable to give pain for any purpose, it was so, under certain restrictions, for the purposes of science.—The Bill was then read a second time.

MILITARY AND NAVAL MEDICAL SERVICES.

INDIAN MEDICAL SERVICE.—The following candidates were successful at both the London and Netley examinations, having passed through a course of instruction at the Army Medical School, Netley, August 1876.

		Marks.		Marks.	
1.	Tomes, * A.	5816	13.	Henderson, W. G. H.	4426
2.	Meredith, E. B.	5220	14.	Doyle, B.	4412
3.	Mawson, W. A.	4902	15.	Cobb, R.	4266
4.	Maitland, J.	4856	16.	Stephens, A. E. R.	4259
5.	MacGregor, J.	4837	17.	Cadge, W. H.	4220
6.	Peevor, G. H.	4818	18.	Hunter, J.	4085
7.	Dantra, S. H.	4746	19.	Swaine, C. L.	4067
8.	Macdonald, D. J.	4650	20.	Smith, M. H.	3966
9.	Stewart, A. K.	4625	21.	Dalal, K. A.	3920
10.	Walker, G. L.	4502	22.	Boyd, H. W. B.	3886
11.	Hamilton, H.	4462	23.	Farrell, P. J.	3662
12.	Halpin, J. N.	4440			

* Gained the Herbert Prize.

NAVAL MEDICAL SERVICE.—The following candidates were successful at both the London and Netley examinations, having passed through a course of instruction at the Army Medical School, Netley, August 1876.

		Marks.		Marks.	
1.	Thomas, R. Th.	5170	7.	Sibbald, T. M.	3120
2.	Cree, W. E.	4105	8.	Thompson, Wm.	3042
3.	Crocker, H. L.	4005	9.	Yeo, R. F.	2775
4.	Popham, T. D.	3945	10.	Armstrong, J. B.	2548
5.	Colthurst, L. T.	3703	11.	Smith, Geo.	2536
6.	Kellard, J. T. W. S.	3150	12.	Cuffe, G. M.	2353

MEDICAL NEWS.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—The following gentlemen, having undergone the necessary examinations for the diploma, were admitted members of the College at a meeting of the Court of Examiners, on August 2nd.

Clark, Frederick, Fenchurch Street
Conolly, Paul B., Somerset Terrace, N.W.
Duke, Thomas, Kennington Park Road
Dutton, Edward G., L.S.A., Hammersmith
Gibson, William, Middlesbrough-on-Tees
Griffiths, Gilbert S., L.S.A., York Street, Portman Square
Hare, Evan H., Putney
Hindle, George, L.S.A., Over Darwen
Mears, William P., Bromley, E.
Moullin, Charles W. M., Porchester Terrace
Parkinson, Sidney G., L.S.A., Northampton
White, Charles H., Tufnell Park
Williams, Alfred G., Carmarthen
Wood, Edward J., Higham

The following were admitted members on the 3rd instant.

Bevan, Richard, L.S.A., Redruth
Boodle, George Adolphus, L.S.A., St. John's Wood
Bullen, Beresford R., L.S.A., Upper Kennington Lane
Cuming, Charles H., Devonport
Dowding, Alexander W. W., L.S.A., Ampthill
Eve, Frederic S., L.R.C.P. Lond., Ockendon
Fabien, Lewis, Trinidad
Gathergood, Benjamin W., L.S.A., Lynn
Glyn, Herbert A., M.B.Aberd. & L.S.A., Gloster Street, W.
Hatch, William K., M.B.Aberd., Shrewsbury
Hume, Frederick N., Meonstone
Mahony, Lawrence F., L.S.A., Dalston
Paul, Reginald, L.S.A., Langport
Rowbotham, Arthur J., Woolwich
Sandwith, Fleming M., Wimbledon
Stevenson, Leader H., Bexley

At a meeting of the Council, on the 7th instant,

Burroughs, John B., of Clifton, was admitted a Fellow of the College; his diploma of membership bearing date January 25th, 1828.

APOTHECARIES' HALL.—The following gentlemen passed their examination in the science and practice of medicine, and received certificates to practise, on Thursday, August 3rd, 1876.

Davis, Frederick Howard, Dawley, Salop
Denby, Timothy Curtis, Infirmary, Bradford, Yorkshire
Lake, William Wellington, Ilford, Essex
Lithgow, Thomas George, Kensington Park Road

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

Burgess, William Milner, St. Bartholomew's Hospital
Cary, Joseph, London Hospital
Davies, David S., St. Thomas's Hospital
Giffard, Henry Edward, St. Bartholomew's Hospital
Harris, Frederick A., St. Thomas's Hospital
Langton, Herbert, St. Bartholomew's Hospital

Leah, William, Queen's University, Birmingham
 Newman, Arthur J., Middlesex Hospital
 Revell, Richard Carter, Middlesex Hospital
 Swann, Alfred, Queen's University, Birmingham

[In the pass-list of July 27th, the address of Robert Alexander Jackson, Norfolk Square, should have been "53, Notting Hill Square".]

UNIVERSITY OF CAMBRIDGE.—The following gentlemen passed the recent examination in State Medicine.

PART I.—*Sanitary Science*—Certificates: C. H. Allfrey, M.D., F.R.C.S.; B. Davies, M.D.; K. M. Downie, M.D.; H. Finch, M.R.C.S.; A. S. Lethbridge, M.D.; T. Moore, F.R.C.S.; J. B. Siddall, M.D.

PART II.—C. H. Allfrey, M.D., F.R.C.S.; B. Davies, M.D.; K. M. Downie, M.D.; H. Finch, M.R.C.S.; A. S. Lethbridge, M.D.; T. Moore, F.R.C.S.; J. B. Siddall, M.D.; J. Simpson, M.D.; A. Sheen, M.B., M.C.; F. H. Spencer, M.B., M.C.; E. W. Symes, M.D.

MEDICAL VACANCIES.

THE following vacancies are announced:—

BANBURY UNION—Medical Officer for the Middleton Cheney District.

BRIGHTON AND HOVE DISPENSARY—Resident Medical Officer and Dispenser. Salary, £130 per annum, with furnished apartments, etc. Applications on or before September 4th.

BRISTOL—Parochial Medical Officer for the Third District.

DOVER HOSPITAL—House-Surgeon. Salary, £100 per annum, with furnished apartments, etc.

HALIFAX INFIRMARY—House-Surgeon. Salary, £80 per annum, with board, lodging, etc.—Also, Assistant House-Surgeon. Salary, £50 per annum, with board, etc. Applications on or before August 15th.

HOSPITAL FOR WOMEN, Soho Square—House-Physician. Applications on or before August 31st.

NORTHAMPTON GENERAL INFIRMARY—Surgeon. Applications on or before August 28th.

NORTH STAFFORDSHIRE INFIRMARY, Stoke-upon-Trent—House-Surgeon. Salary, £120 per annum, with furnished apartments, etc.—Also, House-Physician. Salary, £80 per annum, with furnished apartments, etc. Applications on or before August 30th.

OSWESTRY—Parochial Medical Officer for the Ruyton District.

SUSSEX COUNTY HOSPITAL, Brighton—House-Surgeon. Salary, £80 per annum, with board and lodging. Applications on or before August 23rd.

SWANSEA HOSPITAL—Resident Medical Officer. Salary, £100 per annum, with board, furnished apartments, etc. Applications on or before August 16th.

WESTERN GENERAL DISPENSARY, Marylebone Road, N.W. Honorary Physician. Applications on or before August 14th.

WESTMINSTER HOSPITAL—House-Physician. No salary. Board and lodging. Applications on or before August 12th.

WHARFEDALE UNION—Medical Officer for the Second District.

MEDICAL APPOINTMENTS.

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

CRICHTON, George, M.B., L.R.C.S.Ed., appointed House-Surgeon to the Lancaster Infirmary.

DEELEY, Ambrose, L.K.Q.C.P.I., appointed District Surgeon to the Salford and Pendleton Royal Hospital, *vice* A. M. Edge, M.D., resigned.

FAIRBROTHER, Alex., M.D., F.R.C.P., appointed Consulting Physician to the Bristol Royal Infirmary.

PIERRE, Gustavus Frederick, L.R.C.P.Ed., appointed Attending Medical Officer to the Belfast Charitable Institution, *vice* H. Purdon, L.R.C.S.Ed., resigned.

SHAW, J. E., M.B., appointed Assistant Physician to the Bristol Royal Infirmary, *vice* Dr. H. Waldo, promoted.

*WALDO, H., M.D., appointed Physician to the Bristol Royal Infirmary, *vice* Dr. A. Fairbrother.

WHITTLE, Edward George, M.B., appointed Surgeon to the Hospital for Sick Children, Brighton, *vice* R. Ingle, M.D., resigned.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths, is 3s. 6d., which should be forwarded in stamps with the communication.

DEATH.

*GRANTHAM, Thomas P. J., M.R.C.P., late of Burgh-le-Marsh, Lincolnshire, at Falsgrave, Yorkshire, aged 62, on August 4th.

MORE SUCCESSFUL PROSECUTIONS OF ILLEGAL PRACTITIONERS.—The Medical Defence Association has recently been successful in obtaining convictions under the Medical Act of 1858 in two cases of illegal medical practice. In the first case, the prosecution was instituted by the Central Association; and the offender was a man named Balls, who has been practising as a surgeon for some years past in Bermondsey. He was formerly assistant to a surgeon, since deceased, named Richmond; and on his door-plate he had the following inscription: "Mr. T. C. Balls, (from) Richmond's, Surgeon." The case was heard at the Southwark Police Court on July 21st, and a penalty of £5 was inflicted. In the second case, the proceedings were instituted by the East London Defence Association; and the defendant was a chemist named S. H. Witherington, who resides at 410, Wandsworth Road. The case was heard at the Wandsworth Police Court on July 24th, when it was proved that the defendant had falsely pretended to be a "doctor" and a "surgeon", and the magistrate inflicted a penalty of £15 and costs.

OPERATION DAYS AT THE HOSPITALS.

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

TUESDAY Guy's, 1.30 P.M.—Westminster, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Royal Westminster Ophthalmic, 1.30 P.M.—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.

LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

CORRESPONDENTS not answered, are requested to look to the Notices to Correspondents of the following week.

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.

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*.

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

WE CANNOT UNDERTAKE TO RETURN MANUSCRIPTS NOT USED.

COMMUNICATIONS respecting editorial matters, should be addressed to the Editor; those concerning business matters, non-delivery of the JOURNAL, etc., should be addressed to the General Manager, at the Office, 36, Great Queen Street, W.C.

COMMUNICATIONS TO THE "JOURNAL".

WE have again to impress upon our correspondents that, as the bulk of communications addressed to the JOURNAL is considerably in excess of its space, the task of selection will be greatly facilitated by the observance of studied conciseness.

ASSOCIATE wishes to know (1) where Dr. Horace Green's pamphlet on *Follicular Ulceration of the Pharynx* can be found; (2) The *Diagnosis of Cutaneous Erysipelas from Scarlet fever*.

A QUESTION OF ETIQUETTE.

SIR.—Would you favour me with your opinion on the following case? On my return from visiting country patients, I find a message left with my assistant, from a neighbouring gentleman, "that he desires me to visit him as soon as I could". On arriving at his residence, I find him suffering from an injury for which he has not been (yet) treated. He informs me that he presumes it will offend his former attendant, but he desires to place himself under my care. Do I commit a breach of etiquette by undertaking his case?—I am, etc., OCTOPUS.

August 8th, 1876.

* Provided that the attendance of Octopus is at the express desire and with the free will of the patient, we are of opinion that there is no breach of etiquette.

ALCOHOL IN MEDICINE.

SIR.—A certain section of the profession—I believe a small one—is setting its face against the use of alcohol in medicine. I shall be glad if you will allow me to ask one or two questions. Has the time come when it is considered that the use of stimulants may be discredited? Do "teetotal" practitioners (I use the word in no sense of scorn) substitute beef-tea and milk for wine and brandy? If not, what stimulants are they in the habit of using? Spirit of chloroform, on account of the alcohol, is inadmissible, and, it may be added, the tinctured and concentrated infusions of the *Pharmacopæia*. Ether, again, is itself of an intoxicating nature, and, therefore, logically speaking, no more deserving of use than brandy. Perhaps carbonate of ammonium is, from the teetotaller's point of view, the most appropriate stimulant, though in large doses probably this would have an effect somewhat similar to that of other stimulants in large doses. But can ammonia always be borne? I am attending a case of extreme prostration following the eruption of scarlet fever. The little patient has a poor appetite, and is very capricious. Small quantities of champagne, given frequently (when she can take nothing else), revive her, and, I trust, will carry her forward, until she can take more of her usual nourishment. She has tincture of iron, well mixed with syrup, every three hours; therefore, carbonate of ammonium would be unsuitable, and, even were it not so, it would be a difficult matter to get her to take ammonia in sufficient quantity. I need only mention this one case in which alcohol seems to be invaluable. Would it not be as unreasonable to erase the preparations containing opium from the *Pharmacopæia* as to forbid the use of brandy?

I should not have ventured to write what to many would appear an unnecessary letter, had I not read strong editorial remarks in the JOURNAL against the use of alcohol—notably one in which you state that a practitioner, in attending "teetotal" families, should invariably be guided by "teetotal" views.—Yours, etc., SHEFFIELD, August 1876.

T. LEEDS.

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.

AMERICAN ASYLUMS.

THE leading article on the Sheffield Meeting of last week contains an important misprint, by which the word "Senats" is substituted for "Secret" reports. The article was transmitted by telegraph from Sheffield, and the mistake occurred in transcription.

TREATMENT OF LABOUR WITH DEFORMED PELVIS.

SIR.—As regards "An Associate's" patient with deformed pelvis, I would suggest that, if the conjugate diameter of the pelvis be less than three inches, he should bring on premature labour by dilating the os uteri by means of elastic bags. (Vide *Obstetric Operations*, Barnes.) When this should be done, depends on the size of the pelvis. If the conjugate diameter be three inches, it should be done when pregnancy has advanced eight months; if it measure two inches and three-quarters, at seven and a half months; if two inches and a half, at seven. Less than that, he might try it at six and a half months, but with little hope of saving the child; and if the conjugate diameter be less than two inches, it is then impossible to save the child, so the sooner labour is brought on, the better. The *Medical Times* for June 8th, 1850, publishes three cases in which M. Delfrayasse seems to have arrested the growth of the fetus by administering once a day for the last two months of pregnancy six or eight drops of a mixture containing a scruple of iodine and two of ioduret of potassium dissolved in an ounce of water. Two of the cases occurred in the same patient. Pregnancy went on to the full time, and the children were all born alive and well. One weighed twenty-two ounces and three-quarters, the other twenty-three ounces and a half, less than the former children of the same patient; and the third, three pounds and a half less than those the patient had previously borne. Should "An Associate" fail to get his patient's consent to have premature labour brought on, he might try this method.

—Faithfully yours,

Sunderland, July 29th.

JAMES MURPHY.

If an Associate, who asks in the number of July 29th for information respecting the treatment of labour with deformed pelvis, will send me his address, I will forward him a pamphlet relating to the same.

CLEMENT GODSON, M.D.

8, Upper Brook Street, Grosvenor Square, W., July 1876.

ANIMAL VACCINATION.

SIR.—Since you seem to ask for more information on the above subject, by appending the editorial note, "The information is rather vague", to my letter of the 11th July, I beg to forward you the enclosed statement with which I have been favoured by my friend Dr. J. Elischer, M.D. Pesth. This gentleman has only recently left England after a stay of several weeks, having been sent by the Hungarian Government to study gynaecology, as taught abroad.

"An accidental observation was made, that the cow's udder was as sensitive to the vaccine-lymph as the human skin, and that healthy lymph inoculated on the cow went through exactly the same process as the Jennerian vaccination in human beings. Lymph obtained in this manner from the inoculated cow can be employed with the same result on man. In this way we have a perfect protection against the accidental inoculation of any disease by means of unhealthy lymph; partly because certain diseases (as syphilis) do not exist in the cow, partly because other diseases are much more readily diagnosed in animals, on account of their lower organisation—viz., a diminution of appetite is a very trustworthy symptom of disease in the cow. The pure lymph of the cow, when examined both with the naked eye and microscopically, is not to be distinguished from that of man. Without any pain or bad consequences, a much larger quantity is obtained than from the child (viz., four to six times as many pustules). Wherever there is an agricultural school, or a great number of cows, there is no difficulty in establishing an institution for the production of healthy cow-lymph: and such institutions exist, as the Royal Cow-pox Institution in Dresden, Saxony; another in Wagnerschloss, county Zips, Hungary; and others in Galicia and Styria, Austria. I have employed with success lymph obtained from these several institutions. In these establishments the lymph is taken from the cows, under the inspection of the officers of health; and, according to circumstances, the lymph is either distributed gratis to the parish medical officers, or sold to pay expenses. The average price of a quantity sufficient to vaccinate two children is two shillings. This lymph produces, according to my experience, an eruptive fever on the fourth or fifth day; less often, after a longer interval, in some less susceptible children. From this time on, the process proceeds as usual. The same course takes place in the inoculated cows, which are changed from month to month: this can be so arranged that the milk-production is not interfered with."

If any of your readers wish for more information on the subject, I shall be happy to supply it.—I remain, yours faithfully,

BERNARD ROTH, M.R.C.S. Eng., L.S.A.

48, Wimpole Street, W., August 1876.

REGISTRATION OF FOREIGN DEGREES.

SIR.—Will you allow me a small space in your JOURNAL to reply to the letter signed "M.B.", which appeared in a recent number? By the tone of "M.B.'s" letter, he appears to think that "M.D. Brussels" spoke slightly of British degrees, whereas such was not the case. "M.D. Brussels" merely maintained that many foreign degrees in medicine are obtained after tests quite as difficult and searching as many British ones. Comparisons are odious; nevertheless, after such an unwarranted attack as has been made upon foreign degrees, I think it only right and just to say that the degrees in medicine obtained from some continental universities—such as Paris, Vienna, Berlin, Brussels, Heidelberg, Bonn, Giessen, etc.—are held in far higher repute by many British graduates than those obtained from some of our own universities. "M.B." informs us that operations on the dead body form a portion of the examinations for qualifying to practice held by all the best medical examining boards in these countries, and seems inclined to ridicule the ignorance displayed by "M.D. Brussels" in not knowing this; but I think before "M.B." ridicules the ignorance of "M.D. Brussels", he had better be quite certain that he himself is right in his assertion. Which are the colleges in which operations on the dead body form part of the examinations for a license to practice?

With regard to foreign degrees being conferred on registered medical practitioners after passing the necessary examinations, without any length of residence

being required, I quite agree with "M.B.", that such degrees are obtained. But is not that precisely what we have been agitating for in England for some time back? and are we not about to have similar facilities for obtaining degrees in medicine from the University of Durham, and I hope also Cambridge? Again, "M.B." finds fault with foreign graduates because they are coached by professors prior to entering for examination. What an absurdity! was not "M.B." coached prior to entering for his degree at T.C.D. (or elsewhere, as the case may be)? "M.B." seems to think that no degrees in medicine are ever conferred in the British Isles without a degree in art having first been obtained. Such, however, is not the case. In a few of our universities no one but a graduate in arts can proceed to take his degree in medicine or surgery; but in the majority no degree is necessary, a preliminary examination merely being required, as for a license from a College of Physicians and Surgeons.

No one in the present day can obtain a license to practice without having first of all satisfied his examiner that he has had a sound classical education, therefore I presume that every registered practitioner is a fit and proper person to be admitted to examination for an university degree. It is not all who can afford to send their sons to a British University. A man may have two sons entering the medical profession—C. is sent to T.C.D. and takes his B.A., M.B., and C.M.—G. is sent to a medical school and takes his L.R.C.S.I.; is it not hard that the L.R.C.S.I. cannot at a future time, when he finds he has money and time to spare, present himself for examination for an university degree? Foreign universities are liberal, and accept such licentiates as candidates for their degrees, which are not inferior to, and in many cases are superior to the British degrees, and on that account incur the foolish and jealous displeasure of a few of the younger British graduates. Let not "M.B." imagine that the British graduate is held in higher esteem, or considered to be more learned in his profession than the foreign graduate, simply because the one may register his degree, and the other may not. A physician of a candid and liberal spirit ought never to take advantage of what a nominal distinction and certain privileges give him over other men, who are, in point of real merit, his equals, and will feel no superiority but what arises from superior learning, superior abilities, and more liberal manners.—I am, sir, yours faithfully,

FOREIGN GRADUATE.

WE are indebted to correspondents for the following periodicals, containing news, reports, and other matters of medical interest: The Birmingham Daily Post; The Leeds Mercury; The Glasgow Herald; The Manchester Courier; The Hull News; The Hastings and St. Leonard's Independent; The Nottingham Daily Guardian; The Worcester Chronicle; The Islington Gazette; The Bolton Weekly Journal; The Brighton Examiner; The Hastings and St. Leonard's Observer; The Metropolitan; The Whitehall Review; The Yorkshire Post; The Bromsgrove, Droitwich, and Redditch Weekly Messenger; The Redditch Indicator; The Cambrian; The Bristol Daily Times; The Southport Daily News; The Jewish World; 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, ETC. HAVE BEEN RECEIVED FROM:—

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