

from its style that it has much much concern in presenting a fine racy bit of sensational writing than in improving the institutions concerned. This was very strongly manifested in the case of Flora Maclean, which may be in the memory of your readers; and it is again coming clearly out in an investigation which is being made in connection with the Royal Infirmary. Some time ago, a paragraph appeared in a Belfast paper in which it was said that most of the nurses in the Glasgow Royal Infirmary are Roman Catholics, and that they use their influence to favour their coreligionists in every way. It was also stated that they occasionally tried to make proselytes, urging patients to see the priest rather than the chaplain, and showing very little diligence in sending for the latter when requested by patients. The Protestant Institution of Glasgow seems to have taken up the matter, and sent a communication to the directors. The directors answered, giving an extract from a report by the chaplain, in which he states that he has never found any evidence of favouritism on the part of the Catholic nurses, and has always been called with the utmost readiness to see patients who needed attention. The publication of this by the Secretary of the Infirmary seems to have been rather premature, as the Protestant Society is desirous of conducting a full inquiry. The newspaper referred to has now stepped in, and is engaging itself with publishing rumours and statements which are only calculated to prejudice the public. It should not be lost sight of, that it matters not what the religion of nurses may be, if they do their duty as nurses and do not interfere with the religious convictions of the patients.

In connection with the Flora Maclean case, Dr. Tannahill, the Physician to the Maternity Hospital, was some time ago arrested on the charge of a breach of the Anatomy Act. He was immediately liberated on bail. On Monday last, the sympathy of the profession was to some extent shown for him in re-electing him an Examiner in Midwifery at the Faculty of Physicians and Surgeons. At the same meeting, the Faculty elected as President Dr. Andrew Buchanan, lately Professor of Physiology in the University. Some doubt the wisdom of this step, considering the advanced age of Dr. Buchanan; but it must be regarded by every one as a graceful act to bestow this honour on one who has so long been deservedly esteemed. We believe that the contest would have been a much closer one had it not been for the injudiciousness of the correspondent of a contemporary, who, in a way that irritated many of the Fellows, discounted any opposition, and gave it out that the appointment was virtually settled.

The institution of a qualification in Public Health by Glasgow University has been followed by the announcement of lectures on this subject. Dr. Simpson will give a course in the University. It is announced that Dr. Christie will give a course during the ensuing session. The profession is looking for some intimation from Dr. Russell, the medical officer of health, that he intends to begin a class. There can be no doubt that, from his position, such a class would be doubly instructive.

## PARIS.

[FROM OUR OWN CORRESPONDENT.]

### Plombières.

I HAVE just returned from a short holiday excursion, and on my tour paid a visit to Plombières. While there I was much surprised to learn that the place is little frequented by British invalids or tourists. This may be accounted for in some measure by its being little known in England, for in the latest editions of some of the works on the Spas of Europe Plombières is not even named. From what I have seen of the place, I consider it worth being brought more prominently to public notice. For the little I know about Plombières and its spas I am indebted to Dr. Bottentuit, one of the consulting physicians, who kindly showed me over the place, and explained to me the composition of the different springs, and the maladies for which they are best suited. Indeed, Dr. Bottentuit has brought out a neat little book entitled *Guide des Baigneurs aux Eaux Minérales de Plombières*, from which intending visitors, whether for health or pleasure, can obtain most useful information as to the topography of the town, its antiquities, its baths, the composition of its waters, and the maladies in which the latter are indicated. Plombières is beautifully situated at the bottom of a valley in the Vosges mountains, and, although its waters were well known to the ancients as possessing certain medicinal properties, it does not seem to have been much resorted to by invalids until within the last fifteen or twenty years, when Napoleon III made it what it now is, one of the most attractive pleasure resorts of France. The climate of Plombières is temperate, and the air bracing and pure; but, from its altitude, which is one thousand three hundred and ten feet above the level of the sea, it is subject to frequent changes of tem-

perature, which necessitate certain precautions in the way of clothing, etc. The population is about one thousand eight hundred, and almost every house in the town is either an hotel or boarding-house, and from this circumstance, notwithstanding the smallness of the town, visitors experience no difficulty in finding lodgings. Its principal source of revenue is its mineral waters, which alone produce not less than £40,000 a year. Nothing is neglected to render the town as attractive as possible, and, besides the various forms of amusement got up for the season, visitors will find other inexhaustible sources of pleasure in the numerous promenades and places of excursion with which the surrounding country abounds. The waters are obtained from twenty-seven springs, which, according to Dr. Bottentuit, yield seven hundred and thirty cubic *mètres* of mineral waters in the twenty-four hours, the temperature of which ranges from 50 deg. Fahr. to 163.4 deg. Fahr. For the sake of convenience, Dr. Bottentuit divides the springs into four groups:—1. Ordinary cold water; 2. Chalybeates; 3. Saponaceous mineral waters; 4. Thermo-mineral waters, and, from the most recent analysis, the waters of Plombières may be considered distinctly alkaline and chalybeate, the degree of mineralisation varying according to the spring from which they issue. They are chiefly used as baths, but they are also taken internally to a considerable extent, and the maladies for which they have been found useful are diseases of the stomach and intestines in every variety and form, diseases of women, gout, rheumatism, diseases of the nervous system, and diseases of the skin.

The season opens officially on May 15th and closes on September 15th; but, if the weather be at all fine, it is prolonged even to the middle of October. Plombières, which is about twelve hours' distance by railway, including the diligence from Paris, is easily accessible to travellers; but, in order to render it still more so, the diligence is to be done away with, as the railway will be extended to the town, and will be completed in time for the next season.

Plombières will certainly repay a visit, as it seems to me to possess all the requirements necessary for the comfort and happiness of its residents; it is comparatively cheap, quiet, remarkably healthy, and endowed by nature with some of the most beautiful scenery in the world; so that travellers, whether in search of health or pleasure, always leave it with a desire to return to it again and again.

I may mention, *en passant*, that it was in this town that Robert Fulton, the celebrated American engineer, taking advantage of the presence of the Empress Josephine in 1804, tried his first two experiments with his liliputian boat on wheels on the Eaugronne, a small stream issuing from the mountains and running through the town, to show the power of steam as a progressive agent even uphill or against a strong current.

## ASSOCIATION INTELLIGENCE.

### THAMES VALLEY BRANCH.

THE next general meeting will be held at the Richmond Infirmary on October 17th, at Five o'clock. Members who may be willing to read papers are requested to communicate at once with the Honorary Secretary. Papers are already promised by Mr. G. F. White and Dr. Atkinson.

There will be a dinner after the meeting at the Greyhound Hotel at seven o'clock. Charge 7s. 6d., exclusive of wine.

F. P. ATKINSON, M.D., *Honorary Secretary*.

Kingston-on-Thames, October 1877.

### WEST SOMERSET BRANCH.

THE autumnal meeting of this Branch will be held at the Railway Hotel, Taunton, on Thursday, October 18th, at 5 P.M.

The following question has been settled by the Council for discussion after dinner:—"What in your opinion is the best way of managing the Third Stage of Labour so as to diminish the risk of *Post Partum Hæmorrhage*?"

W. M. KELLY, M.D., *Honorary Secretary*.

Taunton, September 15th, 1877.

### BATH AND BRISTOL BRANCH.

THE first meeting of the Session will be held at the York House, Bath, on Wednesday, October 31st, at 7.15 P.M.: H. MARSHALL, M.D., President, in the Chair.

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

6, Belmont, Bath, October 1st, 1877.

### SOUTH-EASTERN BRANCH: EAST AND WEST SURREY DISTRICTS.

A CONJOINT meeting of these Districts will take place at the Red Lion Hotel, Dorking, on Thursday, October 18th, at 3.45 P.M. Mr. CHARLES W. CHALDECOTT in the Chair.

Dinner at 6 P.M. precisely. Charge, exclusive of wine, 7s. Gentlemen intending to be present at the dinner are requested kindly to give notice by October 15th to Mr. Napper, Broad Oak, Cranleigh.

JOHN H. GALTON, } *Honorary Secretaries.*  
A. ARTHUR NAPPER, }

October 1877.

### STAFFORDSHIRE BRANCH.

THE fourth annual meeting of this Branch will be held at the Railway Hotel, Stoke-upon-Trent, on Thursday, October 25th, at 4 P.M. An address will be delivered by the President, Dr. ARLIDGE.

Dinner at 6 P.M. precisely. Tickets, exclusive of wine, 7s. 6d. each. Members intending to be present are requested to communicate as soon as possible with one of the Honorary Secretaries.

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

Wolverhampton, October 1st, 1877.

### SOUTH MIDLAND BRANCH: AUTUMNAL MEETING.

THE twenty-first autumnal meeting of the South Midland Branch was held at the Infirmary, Aylesbury, on Thursday, September 27th; W. MOXON, Esq., President, in the chair. About twenty gentlemen were previously entertained at a sumptuous luncheon given by Robert Ceely, Esq., and Charles Hooper, Esq., Honorary Surgeons to the Infirmary. There was a numerous attendance of the members of the Branch.

Thomas Wynter, Esq., of Winslow, was proposed in due form as a member of the Association.

HENRY TERRY, Esq., then brought before the notice of the meeting the British Medical Benevolent Fund, and urged the members to support so valuable an institution.—ROBERT CEELY, Esq., and CHARLES HOOPER, Esq., supported Mr. Terry; and several subscriptions were collected in the room.

In reference to the appointment of a Co-Secretary at Bedford, Mr. KIRBY SMITH agreed to continue the duties of the office without assistance until the next annual meeting.

Dr. BUSZARD then read an interesting case of Spinal Meningitis simulating Rheumatic Fever.—A short discussion followed.

G. P. GOLDSMITH, Esq., related a case of Spinal Caries without Curvature, causing Paralysis.

Dr. DICKSON read a Peculiar Case of Strangulated Hernia, in which, after reduction by taxis, perforation of the bowel took place from ulceration. The specimen was shown to the members.

Dr. DICKSON also related a case of Rheumatic Fever, in which salicine was administered without benefit. Rapid improvement took place after frequent doses of the tincture of perchloride of iron.

KIRBY SMITH, Esq., read an interesting case of Malignant Disease of the Clavicle, in which he was compelled to remove the whole bone.

CHARLES HOOPER, Esq., exhibited some remarkable specimens of Biliary and Renal Calculi, etc.

The usual votes of thanks were passed.

Dr. O. FARRELL, in a brief and appropriate speech, proposed a vote of thanks to Robert Ceely, Esq., and Charles Hooper, Esq., for their kindness and hospitality in entertaining the members at luncheon.—This was seconded by H. TERRY, Esq., and carried unanimously.

The meeting then terminated.

Some of the gentlemen afterwards visited the wards of the Infirmary, where some cases of interest were shown by the Honorary Surgeons.

The next meeting will be held at Peterborough, under the Presidency of Dr. T. J. Walker, in May or June 1878.

### NORTH OF ENGLAND BRANCH: AUTUMNAL MEETING.

THE autumnal meeting of this Branch was held at the Council Chamber of the Town Hall, Stockton-on-Tees, on Tuesday, September 25th; he President, S. W. BROADBENT, Esq., occupied the chair; and there were present thirty-three members and three visitors.

At noon, a number of the members met at the Stockton Hospital, and were conducted over that institution by Dr. R. W. Foss of that

town and Dr. Laidler of South Stockton, who explained the plan of the building.

*New Members.*—Five new members were elected.

*Papers.*—The following papers were read.

1. THE PRESIDENT: Short report of a case of Embolism of the Superior Vena Cava.

2. DR. LAIDLER: Short account of a case of Extraction of a Foreign Body (Pen-case) from the Left Bronchus. This case occurred at South Stockton, where a lad aged 13 (who was present at the meeting) had, in playing, swallowed a small pocket pen-case, which was extracted, after some difficulty, by Dr. Laidler, by the aid of the bronchial plummet, which he has invented, and which was shown.

3. DR. MURPHY exhibited and explained a retractor for keeping open the incision after tracheotomy while a tube is being introduced or a foreign body extracted. He also read a paper on Uterine Catarrh.

4. DR. ANDERSON read a report of a case of Intestinal Paralysis, successfully treated by the constant electrical current and strychnine.

*Notice of Infectious Disease.*—Dr. EASTWOOD brought forward the subject of the importance of giving early information to sanitary authorities in cases of zymotic diseases. He read a portion of the report of the Committee on the Registration of Diseases of the Association, which was adopted at the annual meeting at Manchester, and stated that the matter had become a local one in consequence of having been brought before the Darlington Rural Sanitary Authority, of which body he was the Chairman. The question, he said, had been referred to the Darlington Board of Guardians, who were about to present a memorial to the Local Government Board praying for a Royal Commission to inquire into it. In conclusion, he asked the meeting to support the Committee on the Registration of Disease of the Association, and proposed the following resolution:

"That the members of this Branch cordially support the action of the Committee on the Registration of Diseases, passed at the annual meeting of the British Medical Association; and, whilst being ready to give every assistance in the suppression of zymotic diseases, they distinctly recognise that it is the proper duty of every householder to give notice to the sanitary authorities of the existence of such diseases."

Mr. S. E. PIPER seconded the resolution, which was supported by Drs. Philipson and Mackie, and carried unanimously.

*Patients* were introduced by Drs. Dale, Laidler, Foss, and Philipson.

*Votes of Thanks.*—Mr. JOHN FARQUHARSON proposed a vote of thanks to the readers of the papers, which Dr. MOORE seconded, and which was carried by acclamation.—Dr. GIBSON proposed, and Dr. EASTWOOD seconded, that the best thanks of the members be given to Drs. Foss and Laidler for their kindness in showing them round the hospital.—On the motion of the PRESIDENT, a vote of thanks was also accorded to the Mayor and Corporation of Stockton for the use of the Council Chamber for the purposes of the meeting.

*Dinner.*—The members and their friends afterwards dined together at the Black Lion Hotel; the President in the chair, and Dr. Philipson in the vice-chair; there being also present the Rev. D. R. Falconer, vicar of Stockton, the Rev. Thomas Law, vicar of St. James's, Stockton, and Mr. Coroner Settle.

### READING BRANCH: ANNUAL MEETING.

THE twenty-second annual meeting of this Branch was held at the Athenæum, Reading, on Wednesday, September 26th. There were twenty-one members present.

Dr. SHEA (President) read a very able address on Public Health; for which the cordial thanks of the Branch were accorded him, with a request that it should be published.

The usual business of the Branch having been transacted, the members adjourned for dinner to the Queen's Hotel.

ST. ASAPH (RURAL).—Dr. Lloyd Roberts states that, although no necessity had arisen for legal proceedings, yet he had, with the inspector of nuisances, visited various parts of the district for the purpose of considering special plans for its better sanitary regulation and of giving directions as to the best methods for preventing the spread of zymotic diseases. He points out, in common with some other Welsh medical officers, that a large proportion of the deaths of children under one year are uncertified, the proportion in his district having increased to 60 per cent. In common with most other localities, the death-rate in 1876 was low; but in one parish—Llanfairtalhair—diphtheria had been prevalent, especially amongst young children. He considers that much benefit would accrue to rural districts if the power of making by-laws for the regulation of buildings were extended to them. The death-rate for the year was 19.92, and the birth-rate 30.21.

The next question, as to the *post mortem* evidences of starvation, to which all else should have been subordinated, receives but scant attention from Dr. Greenfield, who contents himself with disputing the *norma* adopted by the medical witnesses for the weights of the abdominal organs as well as for the body-weight; but if he mean to insist that the weights assigned to the liver and kidneys in this case are not highly abnormal, I believe he will stand alone in his opinion.

It is to Dr. Payne that we must look for the chief arguments against the theory of starvation. Certainly, nothing more remarkable is to be found in the whole of these dissertations than Dr. Payne's mode of dealing with this most essential part of the medical testimony for the prosecution. After enumerating the signs of death from starvation, as they are presented by the stomach and intestines of persons destroyed by cancer of the oesophagus, in whom these organs are found to be "pale, anæmic, perhaps contracted and attenuated to the last degree", Dr. Payne flatly denies that these conditions were present in the body of Harriet Stanton. It is true, that nothing was said in evidence as to contraction of the intestines; but they are certainly described as being "pale and exsanguine" as well as being entirely empty of food and fæces, while Mr. Longrigg spoke to the walls of the stomach being thin. There is something almost disingenuous in Dr. Payne's remark that the congestion of the stomach and duodenum was "evidence that the digestive organs had been in use", when he knew and admitted that this congestion was due to the stimulus of food that had been recently taken. His contemptuous dismissal of the suggestion made by the Attorney-General, that untimely or excessive feeding after starvation might produce inflammation of the peritoneum (of the stomach and duodenum), naturally provokes the question, what experience Dr. Payne may have had of starvation and its treatment; and why it is that persons rescued from shipwreck or from long imprisonment in a flooded mine are always fed at first with so great caution as to the quantity and quality of the nutriment given. What are the dangers to be apprehended from overfeeding in such cases, if gastritis be not one of them? And if gastritis, why not peritonitis? The step from inflammation of the mucous membrane of the stomach to that of its serous coat is not generally considered an improbable sequence. And may we not regard it as highly probable that undue feeding with solids in the last few days of Harriet Stanton's life had the principal share in hastening her death, and that it affords a rational explanation even of the cerebral symptoms that preceded dissolution, and which bore some analogy to the convulsions of children from overfeeding? If this view be correct, it disposes of Dr. Payne's assertion, that "the symptoms before death were inconsistent with death from starvation alone".

In regard to the other evidences of starvation, Dr. Payne is strangely silent, never so much as alluding to the atrophic state of the liver and kidneys; but he asserts that "there is no evidence of any special atrophy of the digestive organs from disease", though the precise meaning of this assertion is not at all clear, as atrophy *from disease* would not imply an effect of starvation. Nor is any allusion made to the ecchymoses and petechiæ found on the trunk and lower limbs, notwithstanding that these are recognised signs of the dyscrasia resulting from bad or insufficient food.

It is needless to pursue the argument farther. I venture to think that enough has been said to show that when every deduction has been made for incompleteness in the examination after death, and for want of precision in recording all the appearances, the results of that examination still afford very strong presumptive evidence that the subject of it died from starvation and neglect. It may not be a typical case of death from starvation; it may not have exhibited all the pathological changes ascribed to that mode of death; but it afforded data that were consistent with the general evidence, and completed the chain of proofs against the prisoners.—I am, sir, your obedient servant,

Guildford, October 10th, 1877.

HENRY TAYLOR.

## OBITUARY.

HENRY LAWSON, M.D.

THE death of Dr. Henry Lawson, Assistant Physician and Lecturer on Physiology at St. Mary's Hospital, is announced. Dr. Lawson graduated with distinction in the Queen's University, Ireland, and subsequently applied himself to the study of biological science both as a writer and a lecturer. He held the office of editor of the *Monthly Microscopical Journal* for the Royal Microscopical Society, and was for some years editor of the *Popular Science Review*, and for a short time of the *Practitioner*, in connection with the late Dr. Anstie. Dr. Lawson had for very many years suffered severely from time to time from painful forms of neuralgia, and has published a valuable work on

the treatment of sciatica and other similar nerve-affections by the subcutaneous injection of morphia, based in the first instance upon his own case.

## MILITARY AND NAVAL MEDICAL SERVICES.

SURGEON-MAJOR ALFRED CLARKE has been appointed to succeed Surgeon-Major J. A. Marston in the Sanitary Branch of the War Office. Dr. Marston has sailed for India to take up the appointment of Secretary to the Surgeon-General of India.

## MEDICAL NEWS.

### MEDICAL VACANCIES.

THE following vacancies are announced:—

- BERKHAMSTEAD UNION—Medical Officer for the Herts and Bucks District. Salary, £50 per annum and fees. Applications to be made on or before the 15th instant.
- BRENTFORD UNION—Medical Officer for the Ninth District.
- CASTLE WARD UNION, Northumberland—Medical Officer to the Stamfordham District. Salary, £20 per annum, and fees. Applications to be made on or before the 13th instant.
- CHARING CROSS HOSPITAL—Assistant Physician and Assistant Surgeon. Applications to be made on or before November 2nd.
- EDINBURGH SCHOOL OF MEDICINE—Lectureship on Physiology. Applications on or before the 18th instant.
- HOO UNION—Medical Officer of Health and Public Vaccinator. Salary, £120 per annum, and extras. Applications to be made on or before the 24th instant.
- LOCHGILHEAD and KILMORICH, Parish of—Medical Officer. Salary, £60 per annum and fees. Applications to be made on or before November 1st.
- MANCHESTER TOWNSHIP—Assistant Medical Officer for the Workhouse Hospital.
- ROTHERHAM HOSPITAL—Resident House-Surgeon. Salary, £100 per annum, with board and furnished apartments. Applications to be made on or before the 15th instant.
- ST. ASAPH UNION—Medical Officer for the Llanfairtalhaiarn District.
- STIRLING DISTRICT ASYLUM, Larbert—Assistant Resident Medical Officer. Apply to James Maclaren, Esq., Medical Superintendent.
- WESTMINSTER GENERAL DISPENSARY—Physician. Applications to be made on or before the 20th instant.
- WESTMINSTER HOSPITAL—House-Physician. Applications to be made on or before the 20th instant.

### MEDICAL APPOINTMENTS.

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

- \*CASSELLS, James Patterson, M.D., appointed Aural Surgeon to the Glasgow Royal Infirmary, and Lecturer on Aural Surgery in the Royal Infirmary Medical School.
- \*LAMB, Joseph, M.R.C.S., appointed Medical Officer to the Post Office, Birkenhead.

### 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 announcement.

#### BIRTH.

TUCK.—On October 2nd, at Seaford, Sussex, the wife of \*Buckmaster Joseph Tuck, M.R.C.S., etc., of a daughter.

#### MARRIAGE.

RICHARDS—WILSON.—On the 4th instant, at All Saints', Bromsgrove, by the Rev. and Hon. Adolphus Massey, \*J. Peeke Richards, Medical Superintendent of the Middlesex County Asylum, Hanwell, to Harriett Wilson, younger daughter of John Wilson, Esq., of Greenwich.

M. JEAN PAUBLAN has bequeathed ten thousand francs in aid of the movement now on foot in Paris for the nursing of new-born infants.

M. NOEL GUENEAU DE MUSSY has been made Officer of the Legion of Honour; and M. Denis Dumont, Physician to the Hôtel Dieu of Caen, has been made knight of the same order.

MEDICAL CORONER.—Mr. Wood, Surgeon, of Kirkby Moorside, who has been ten years Deputy Coroner for the North Riding of Yorkshire, was last week elected Coroner for the same district at Pickering, in place of the late Mr. Ness.

DR. BELL FLETCHER has presented to the Birmingham Art Gallery a picture by Guido of St. Sebastian, as a memorial of his gratitude to the borough for the great kindness he had experienced during forty years in Birmingham.

WESTMINSTER HOSPITAL MEDICAL SCHOOL.—The following gentlemen have gained the Entrance Scholarships, the examination for which were held on the 2nd, 3rd, and 4th instant: 1. Hibbert (Houldsworth, £100); 2. Walsh (£50); 3. Pratt (£20).

ST. MARY'S HOSPITAL MEDICAL SCHOOL.—The following gentlemen have been elected: Mr. R. H. S. Spicer to the Scholarship in Natural Science; Mr. J. B. F. Eminson to the Exhibition in Natural Science; and Mr. F. H. Butler to the Extra Scholarship in Natural Science.

## 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.—Royal Orthopaedic, 2 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.—King's College, 2 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.—Royal Westminster Ophthalmic, 1.30 P.M.—St. Thomas's, 1.30 P.M.

THURSDAY.... St. George's, 1 P.M.—Central London Ophthalmic, 1 P.M.—Charing Cross, 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), 4 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.—Royal London Ophthalmic, 11 A.M.—East London Hospital for Children, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—St. Thomas's, 1.30 P.M.—Royal Free, 9 A.M. and 2 P.M.

## MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

MONDAY.—Medical Society of London, 8.30 P.M. A short Address by the President, Dr. George Buchanan. Dr. P. M. Braidwood (Birkenhead), "On Pyæmia" (epitome of Fothergillian Essay).

TUESDAY.—Pathological Society of London, 8.30 P.M. The following Specimens will be shown by—Dr. Wickham Legg: 1. Aneurysm of the Left Ventricle of the Heart; 2. Aneurysm of the Anterior Communicating Artery of the Brain; 3. Free Balls of Fibrin in the Left Auricle, with Mitral Stenosis; 4. Complete Obliteration of the Aorta. Dr. P. Irvine: 1. Destructive Pneumonia from Pressure on Bronchus; 2. Two Cases of Abdominal Aneurysm. Mr. Christopher Heath: Conclusion of Case of Cystine Calculi. Dr. Barlow: Aneurysm of the Anterior Cerebral Artery. And other specimens.

THURSDAY.—Harveian Society of London, 8 P.M. Dr. William Squire, "On Cases of Acute Pneumonia in Children".

FRIDAY.—Medical Microscopical Society, 8 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 BRITISH MEDICAL JOURNAL, are requested to communicate beforehand with the printer, Mr. Thomas Richards, 37, Great Queen Street, W.C.

PUBLIC HEALTH DEPARTMENT.—We shall be much obliged to Medical Officers of Health if they will, on 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, 37, Great Queen Street, W.C.; 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., London.

## CHANCERY VISITORS.

SIR,—A few lines, if you will allow me, to say that my letter on the above subject in the JOURNAL of September 15th was neither intended as a complaint or accusation, but, as I said, to corroborate, as I thought, Dr. Winn's remarks in a former letter (date April 28th), which I beg to refer you to, and the questions which I put were intended for him to answer or not, which he did clearly and to the point. In the concluding editorial remarks which you have favoured me with, you seem, I think, to have quite missed the actual bearing of the question at issue, which I look upon as this: "Is it desirable or not that," as Dr. Winn says, "it should be in the power of a single visitor to send in a report, without any further reference to the Masters of Chancery or any appeal (as thought desirable by a writer on this subject in a former number of the JOURNAL), as it might lead to abuse, as it would be in his power to materially injure any proprietor against whom he had a prejudice?" Now the object of my letter was to bring forward a case which happened about five or six years ago, and which I thought tended very much to prove—from the very exceptional manner of the visit and conduct of the visitor—was an instance where there was such a bias or prejudice, not a personal spite: and my opinion is, that the visitor in question, in giving his report, trusted not so much to the actual facts he saw as he did to his preconceived prejudiced imagination. Whether I am justified in thinking as I do, or whether the visitor was justified, as you say, is not the question. The real question, as I take it, is whether it be desirable for the public, or fair towards the asylum proprietors, that a single visitor should have this power without any reference whatever; and it is a question of very great importance as affecting a great number of the members of our Association who are proprietors of asylums, and therefore I consider Dr. Winn deserves thanks for bringing this matter forward for consideration.—I am, yours obediently,

October 8th, 1877. RESIDENT PHYSICIAN AND SUPERINTENDENT.

D. A. (Hull).—The Coroner's Court is an open one, and whoever feels interested in the evidence given has a right to attend.

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, not later than *Thursday*, Twelve o'clock.

ADVERTISERS are requested to take notice that the regulations of the Post Office do not allow letters to be addressed to initials and directed to any Post Office in the United Kingdom, but letters may be addressed to initials to the JOURNAL Office or any stated address other than a Post Office.

## THE IDENTIFICATION OF PATIENTS.

SIR,—May I be allowed to call your attention to a practice, which is followed by some of the leading London and provincial medical men, which is injurious in its results, and entirely contrary to all professional rules? The practice I allude to is to be found in the relation of cases when the real initials of the patients consulting them are inserted in their reports in the medical journals, with their occupation, their position in life, and often the county in which they live. Such a practice is utterly wrong in hospital cases; but in recording the cases of private patients, who are well known in their own neighbourhood, and whose friends have access at the club to the medical papers, it is very injurious and annoying. Every patient has a right to expect that his case is as private in the hands of a leading London physician or surgeon as it is in the hands of his own medical man; and does not expect, because he happens to be a clergyman, a county J.P., a D.L., or a nobleman, that in the report of his case (often carelessly reported) his initials, his position, or his county, shall be publicly printed in the medical journals, which come into the hands of every medical man in his district, and often into the hands of his non-medical neighbours and friends. There are some leading medical men in London and the provinces to whom, from their following this practice, it is perfectly unsafe to send a patient.—I am, dear sir, yours faithfully,

ARTHUR JACKSON.

Sheffield, October 1877.

\* \* The practice to which Mr. Jackson refers is undoubtedly reprehensible. We apprehend that those who fall into it do so from negligence. We frequently in such cases strike out characteristic initials—indeed, whenever the necessity is apparent. But medical authors ought to exercise great care never in relating cases to identify their patients in any manner which could be disagreeable to them, or unless they have express authority.

## THE NATIONAL FUNDS INSURANCE ASSOCIATION.

IF the gentleman who in the number of the BRITISH MEDICAL JOURNAL for September 8th asked a question respecting the above subject, will send his name and address to the editor, he shall receive a reply, giving him the information of which he is in quest.

DR. J. G. DAVEY, of Northwoods, Bristol, forwards to us a pamphlet dated 1856, in which, in considering the subject of the defects in medical legal inquiries, he urges the appointment of medical arbitrators as assessors.

## THE LATE SUSPECTED CASE OF POISONING IN COMBE-DOWN.

SIR,—In a notice of the late suspected case of poisoning in Combe-Down, in your paper of September 22nd, you state that "the presence of copper was not satisfactorily proved". If chemical tests have any value whatever, then not only was the presence of copper in the viscera of the deceased submitted to me for analysis proved, but abundantly and indisputably proved, and samples containing the copper produced in Court. These samples are still in my possession. It would have been more convincing had you pointed out the fallacy in the scientific evidence showing whether its unsatisfactory character rested either in the tests applied or in the method of applying them. Not being a medical man, I have not presumed to offer any opinion as to the cause of death, my only duty having been to search for the presence or absence of poison. In connection with this case, the following facts should be borne in mind.

1. A quantity of copper, equal in weight to .63 grain of cupric oxide, was extracted from those portions of the viscera actually analysed, giving a total of 4.36 grains for the whole of the viscera sent for analysis. This, it may be remarked, is certainly more than the few hundredths of a grain mentioned in your notice.
2. This amount could only have been a fractional portion of the total taken, as the greater part was expelled, probably by vomiting and evacuations.
3. The poison found was actually absorbed in the tissues, and was therefore in the system some days before death.
4. The collar of a night-dress, proved to have been one which the deceased wore during her illness, was stained with a salt of copper.
5. A bottle containing a salt of copper (not the one produced in Court) was proved to have been sent to the premises of the deceased, and to have been left there about May last. This bottle has entirely disappeared, the last person who owned to having seen it being the man who took it there.

Till these facts are satisfactorily explained, the case must at least be regarded as one of great suspicion, and worthy of the closest investigation.—I am, sir, your obedient servant,

J. W. GATEHOUSE, Public Analyst for the City of Bath.

36, Broad Street, Bath, October 1877.

\* \* We could nowhere find in any of the reports that copper had been obtained in the metallic state from any of the parts examined; and, considering the facility with which this metal may be separated as such if really present, we hold the analysis to be unsatisfactory. A greenish colour of the ash, and the production of a blue colour by the solution of a dark residue in ammonia, are neither sufficient nor satisfactory in a medico-legal case. Salts of nickel produce the last-mentioned reaction. Nothing short of the production of metallic copper should be relied upon. As to quantity, our correspondent intimates that he extracted only .63 grain. The 4.36 grains are based on an arithmetical calculation which may be right or wrong.

SIGMA.—1. We are not aware of any reputable American or Colonial Medical Schools which grant degrees to persons out of their own countries; and in any case, no such degrees would be recognisable in the United Kingdom. 2. A registered person is not required to pass the minor examination of the Pharmaceutical Society before carrying on the business of a chemist and druggist.

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.

#### INQUIRY WITHOUT INQUEST.

SIR,—Inquests without inquiry appear to be common enough; but where the inquiry, including a *post mortem* examination of the body, precedes the inquest, will you favour me with your opinion as to the legality thereof?—I am, etc.

October 3rd, 1877.

A MEMBER B. M. A.

\*\*\* We do not understand the difficulty. Inquiry always precedes inquest, unless the facts are *prima facie* such as to call for immediate inquest. A coroner must ascertain by inquiry whether in any doubtful case an inquest is called for.

OUR attention has been called to a correspondence in the *Wrexham Guardian* relating to an inquest held on a patient who died at the Wrexham Infirmary from injuries received in a railway accident. Dr. Pearce, the coroner, called as witnesses the house-surgeon of the infirmary and another gentleman, a surgeon unconnected with the infirmary, but who had witnessed the accident in the first instance, and who had from time to time seen the deceased at the infirmary by courtesy of its officers. In explanation of this course, it is alleged that the coroner has a feud with the medical officers in the infirmary. We do not know how this may be; but, even if it may be true, it does not necessarily follow that it influenced the coroner in the course he pursued. But, in any case, it was obviously wrong and improper, if he needed other evidence than that of the house-surgeon, not to have called the visiting surgeon under whose care the patient was, and who performed the operation which his injuries necessitated. The strictures of "Observer" in the *Wrexham Guardian* appear, therefore, to be not uncalled for.

#### A CAUSE OF INFANT MORTALITY.

SIR,—Under the above heading I observe in the *BRITISH MEDICAL JOURNAL* for September 29th, page 454, that a child said to be fed on tops and bottoms, biscuits, arrowroot, oatmeal, cornflour, cow's milk, condensed milk, and aniseed, was said to be literally starved to death. If this be the way to cause starvation, I do not think I have ever known a child during my professional career that ought to have escaped death from starvation. I have always advised mothers who consulted me on the matter to beware of a diet of starchy food, but was not aware that farinaeous food, with milk included, was equally dangerous. The fact is, in my experience, that most children are fed much in the same way as the one referred to was said to be starved. I should be very much pleased if this letter causes some discussion on the very important subject of infants' feeding. In the meantime, with so many facts (plump infants) in my experience, I feel rather sceptical as to the above being at all a ready means of starvation.—I am, etc.,

L.R.C.S.

SIR,—On page 454 you say that cow's milk, arrowroot, and oatmeal are not proper food for children, and that a child was starved at Islington for want of proper food. My little girl is fed with the above-named articles and thrives very well. Will you be kind enough to tell me what better food I can give her? and you will oblige

Brecon, South Wales, October 4th, 1877.

A FATHER.

L. M. (Knottingley).—The following might answer the purpose stated. Medicine: Handbooks of Aitken, Bristowe, or Roberts. Pathology: Handbook of Sieveking and Jones, revised by Payne. Midwifery: Playfair or Leishman. Therapeutics: Sydney Ringer, or Synopsis of Brunton. Forensic Medicine: Taylor, or Woodman and Tidy. Toxicology: Taylor, and Reese.

A MILITIA SURGEON will see that the question was asked last week. If not answered, he had better write to the Secretary of the Branch in question.

#### HOMŒOPATHIC PRACTICE.

ONE of the busy practitioners of Philadelphia has, by an odd coincidence, recently been called to three serious cases, all of which had previously been in the hands of homœopaths, and in each of which had been made a most stupid error in diagnosis. One of these cases was a nephritis of severe type, but which had not been recognised by the homœopath, who had not made a single examination of the patient's urine, which was found by the regular physician to contain three-fourths albumen. Upon questioning the patient's wife as to the diagnosis of the homœopath who had been treating the case over six months, he was told that "the doctor said it was sloughing of the liver and decomposition of the bowels". It never has been satisfactorily explained why it is that homœopaths, aside from their peculiar dogma, are generally so poorly educated in medicine. But this fact may explain the unwillingness of homœopaths when ill to be treated by one of their own school.—*Boston Medical and Surgical Journal*.

E. R. D.—It would afford us great pleasure to do what is suggested, not only for one but for all the services; but the difficult problem is how to find space for such long lists.

JOHN O'GAUNT (Lancaster).—The presence of arsenic as an impurity in aniline dyes is, we believe, due to the use of defective methods and substances in the process of manufacture. It is not a necessary ingredient, but a frequent impurity.

#### PETROLEUM AS A PREVENTATIVE OF PLUMBISM.

SIR,—I have looked in to-day's *JOURNAL*, with some interest, for a theory to account for the alleged value of petroleum as a preventative of plumbism, as mentioned in the *JOURNAL* of September 29th. I have been in the habit of recommending small (3j) daily doses of Epsom salts to those who seem particularly susceptible to the poison, with the view of neutralising the lead as it enters the system; and in some factories I believe that it is the custom to have a supply of diluted sulphuric acid from which the men may drink. But if the petroleum should really prove reliable, I should be glad to spread the fact amongst the sufferers from this painful complaint.—Yours obediently,

J. B. E.

We are much obliged to Mr. Smithers for his communication.

#### MOLES ON THE FACE.

SIR,—I would be very thankful to hear of the experience of others in removing moles off a lady's face. What is the best plan to secure the least disfigurement and mark during and after the removal? What are the respective advantages of nitric acid, a ligature, and scalpel?—Yours truly,

A MEMBER.

LEECHES.—According to *L'Union Médicale*, leeches may easily be kept alive by the following method. They should be placed in water, to which a solution of salicylic acid of the strength of three per cent. is added, in the proportion of thirty drops to the *litre* of water.

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.

#### A DIET OF RICE.

SIR,—A gentleman living in this neighbourhood is very fond of rice, and lives on it to a great extent. During the last year or so, he has found his sight becoming worse; and, on mentioning it to a friend, he was told that it was in consequence of eating rice, and that giving rice to poultry caused them to go blind. Can any of your readers give any explanation of such an idea being entertained? and, as to the poultry, if there be any truth in the assertion?—I am, etc.,

Richmond, Yorkshire, October 1877.

THOS. CARTER.

DR. BOYD MUSHET (New Brighton, Cheshire) is desirous, on behalf of a brother medical practitioner, of obtaining the present address of Dr. Brown-Séquard.

#### A CENTENARIAN.

DR. D. E. FLINN of Brownhills communicates the following case of longevity which he lately met with in his practice.

Mary Egerton, widow, mother of ten children (nine still living), the eldest being over eighty-one years of age, died at Brownhills, Staffordshire, on the 22nd ult., in her 110th year, in full possession of all her faculties. She was able to take part in household duties up to within ten days of her decease. Her age can be authenticated by three of her children, who reside in the immediate district.

In reply to various inquiries which have been addressed to the office during the last few weeks, we are informed that Dr. Marion Sims's present address is 2, Rue d'Albe, Paris.

WE are indebted to correspondents for the following periodicals, containing news, reports, and other matters of medical interest:—The Birmingham Daily Post; The Durham Chronicle; The Harrogate Herald; The Sunderland Times; The Lincolnshire Chronicle; The Bromsgrove Weekly Messenger; The Manchester Courier; The Broad Arrow; The Cork Examiner; The Cork Daily Herald; The Rotherham and Masbro' Advertiser; The Liverpool Daily Courier; The York Herald; The North Wales Chronicle; The Sheffield Daily Telegraph; The Blyth Weekly News; The Glasgow Herald; The Nottingham Journal; The Eastbourne Standard; The Scarborough Daily Post; The Isle of Wight Observer; The Sussex Daily News; The Metropolitan; The Leeds Mercury; The Belfast News Letter; The Devonport Independent; The St. Pancras Gazette; The Bath Herald; The Western Morning News; The Hull News; The Redditch Indicator; The Derby Mercury; The Preston Guardian; The Scarborough Express; The Jewish World; The Scotsman; The Cork Constitution; The Freeman's Journal; 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:—

Dr. J. Braxton Hicks, London; Sir William Smart, Haslar; Dr. C. Theodore Williams, London; Mr. F. J. Harvey, Rochester; Mr. C. Steele, Clifton; Dr. W. B. Mushet, New Brighton; Dr. H. S. Purdon, Belfast; A Member: Dr. Russell, Glasgow; A Father; Osborne and Co., Woodhall Spa; Dr. Bacon, Fulbourn; Mr. Vincent Jackson, Wolverhampton; Dr. Francis Warner, London; Mr. J. W. Gatehouse, Bath; Dr. F. B. Atkinson, Edinburgh; Dr. R. Gooding, Blackheath; Our Dublin Correspondent; Dr. Cassells, Glasgow; Dr. D. E. Flinn, Brownhills; Mr. F. Vacher, Birkenhead; Mr. H. R. Gaskoin, London; Inquirers; Dr. Lloyd Roberts, Manchester; W. W.; Our Edinburgh Correspondent; Dr. N. Tyacke, Chichester; The Registrar-General of Ireland; Dr. W. Ogle, Derby; Dr. R. W. Batten, Gloucester; E. P. W.; The Registrar-General of England; M.; Mr. A. Napper, Cranleigh; Dr. Clifford Allbutt, Leeds; The Secretary of Apothecaries' Hall; Dr. Wallace, Liverpool; Our Paris Correspondent; Dr. J. Lloyd Roberts, Denbigh; Our Correspondent with the Army of Ahmed Mukhtar Pasha; Dr. Robert Saundby, Birmingham; Dr. Donovan, Ballincolley; L. N.; The Secretary of the Medical Society of London; Mr. C. T. Aveling, London; Dr. Goldie, Leeds; Mr. J. V. Richards, Hanwell; Dr. C. Radclyffe Hall, Torquay; Mr. H. A. Satchell, Groombridge; J. B. E.; Dr. R. A. B. Lithgow, Wisbeach; Dr. W. W. Ireland, Larbert; Dr. Levinge, Stapleton; Rev. V. Edlin, Norwood; An Audacious Practitioner, Torquay; Dr. Tripe, Hackney; Messrs. Chapman and Co., London; Dr. Byrom Bramwell, Newcastle-upon-Tyne; Dr. Thin, London; Dr. D. Pike, London; Mr. W. W. Wagstaffe, London; Dr. H. K. Hitchcock, Lewisham; Mr. Arthur Cooper, London; Dr. George Shann, York; A Militia Surgeon; Mr. Thomas Carter, Richmond, Yorkshire; Dr. Clement Godson, London; Mr. Arthur Jackson, Sheffield; Dr. Walter Bernard, Londonderry; Dr. Robert Lawson, Banstead; Mr. S. R. Holdsworth, Wakefield; John O'Gaunt, Lancaster; Resident Physician Superintendent; Mr. E. R. Denton, Leicester; Mr. T. E. Amyot, Diss; Mr. F. J. Gant, London; Mr. Berkeley Hill, London; Dr. Gowers, London; Mr. N. A. Humphreys, London; The Secretary of the Medical Microscopical Society; Mr. Grant, Birmingham; Dr. Howard, Paris; Dr. Abercrombie, Bradford; Dr. Bourneville, Paris; Mr. Lardner Green, Salisbury; Mr. H. N. Smithers, Kirby Moorside; Mr. Groves, London; Dr. Elgar Buck, Leicester; Dr. John Dougall, Glasgow; Dr. Churton, Leeds; Mr. Manley, Brandon; Dr. Shepherd, London; Dr. Styrar, Isle of Man; Mr. Kent Jones, Vochriew; Associate, Landport; Mrs. Morgan, Cricklade; Mr. Wright, London; Dr. Lilly, Hatton; D. A., Hull; Dr. Joseph Bell, Edinburgh; etc.

#### BOOKS, ETC., RECEIVED.

Th. Philosophy of Laughter and Smiling. Second edition. By George Vasey. London: J. Burns. 1877.  
The Hair in Health and Disease, partly from Notes by the late George Naylor, F.R.C.S. Eng. By E. Wyndham Cottle, M.A. Oxon., F.R.C.S. Eng. London: J. and A. Churchill. 1877.