

deepened. On *post mortem* examination, there was found mitral and tricuspid stenosis, the mitral most marked; it would not admit the tip of the little finger. When the auricle was cut into, a little fluid escaped. There was also found a clot adherent to the heart-wall. Death occurred from gradual extension backward of this clot into the pulmonary vessels.

Complete Obliteration of the Aorta.—Dr. WICKHAM LEGG brought forward such a specimen. It occurred in a man aged 20, who was found dead. At the *post mortem* inspection, the large size of the internal mammary artery excited attention. It was found that there was complete obliteration of the aorta for about one quarter of an inch, after which it assumed its natural size. The ductus arteriosus would admit a fine bristle. The compensating anastomoses were chiefly of the mammary and superior intercostal vessels. Only twelve or fifteen such cases were on record. There were two alleged causes of this condition put forward. One was that the contraction of the ductus arteriosus extended to the aorta. In a child but twenty-one days old, a clot was found in the ductus extending into the aorta, and accompanying it was commencing closure. The other view was that of Rokitsanski and Peacock, that there was a congenital vice. In some cases, the ductus was found patent, and other defective malformations existed, as hare-lip, etc. In most cases, the aortic valves consisted only of two cusps.—Dr. COUPLAND related some particulars of such a case observed, but not diagnosed in life. It was thought to be a multiple cirroid aneurism, and was located about the middle of the scapulæ. The man died of fatty degeneration of the heart. The constriction was not quite complete: it looked as if a cord had been tied around the aorta at the point of junction of the ductus arteriosus. The arteries above and below were enormously enlarged. The first intercostal artery was as large as an ordinary brachial. The internal mammary was also very large.—Mr. SYDNEY JONES said that long ago he showed to the Society a specimen where the transversalis colli and the intercostals were greatly enlarged. There was complete occlusion for half an inch going on from the ductus arteriosus: it was an extension of the closure going on in the duct.—Mr. WAGSTAFFE asked if there were any signs pathognomonic of such a condition.—Dr. COUPLAND replied that it might be suspected if the cirroid condition of the arteries was local and on both sides.—Dr. WICKHAM LEGG said Oppolzer had once made a successful diagnosis of it; and this had been done five or six times in Germany and in Holland.—Dr. HILTON FAGGE said it had once been diagnosed by Dr. Walshe.

Case of Cystic Calculi.—Mr. CHRISTOPHER HEATH then related further particulars of a case which he had brought before the Society two years ago. Then the specimens consisted of two calculi from the urethra and one from the bladder. The patient was cut, and got well. Since then, he had been relieved by lithotripsy, and lost sight of. He was brought into the hospital in a dying state. The bladder was inflamed, and one kidney was full of pus. The *post mortem* calculi in the bladder were softer than those removed by operation. In answer to a question from the President, Mr. Heath said no other member of the man's family had cystic oxide calculi.—Dr. C. J. HARE said cystine was persistently found in the urine in such cases.—The PRESIDENT spoke of a case of cystic oxide in a gentleman who had it for twenty-five years. The cystine was always present in the urine, yet the patient was in good health.

Destructive Pneumonia from Pressure on a Bronchus.—Dr. PEARSON IRVINE exhibited a specimen of such destructive pneumonia in a man aged 43. He had been ill for some months with hoarseness and other symptoms of an aneurism. There was no history of syphilis. There were dyspnoea, pain over the left side, and then dullness over the back. The right lung was resonant. At the *post mortem* examination, there was found an aneurism of the ascending aorta, which had grown backwards so as to compress the left bronchus at its origin. There was an ulceration of the bronchial wall. The portion of the lung compressed by the aneurism was the most healthy piece of the whole lung. The pleura was thickened. The lung contained cribriform cavities filled with a yellow grumous fluid. The right lung was healthy. There was no existing description of the exact disease. Last year he had shown a like case. It might arise in this way: there was gradual and at first slight emphysema of the lung; and then, as the pressure on the bronchus increased, neither air nor secretion could pass; and, the secretion being retained in the lung, the destructive process was set up. There was scarcely any clot in this aneurism, and he had observed that aneurisms with little clot in them exerted greater pressure on parts around than aneurisms containing much clot. In the case of destructive pneumonia shown by him last year, the bronchus was closed by contraction from syphilis.—The PRESIDENT asked as to the nature of the fluid in these cavities.—In reply, Dr. IRVINE said it consisted of blood, pus, and disintegrated blood-cells.—Dr. BARLOW

had seen a case where a pen was lodged in the bronchus of a child. Ulceration followed; the products went down the bronchus, and a destructive pneumonia followed. The contents of the ragged cavities were purulent. Sir William Gull thought this form of pneumonia due to pressure on the vagus.—Dr. GREENFIELD said accumulated secretion and suppuration followed pressure on a bronchus. Pressure on the vagus might have something to do with it.

SELECTIONS FROM JOURNALS.

SURGERY.

TREATMENT OF PARTIALLY RUPTURED PERINÆUM.—Dr. Jenks (*Detroit Medical Journal*, June), at the annual meeting of the Michigan Medical Society, described an operation for the cure of partially lacerated perinæum, original with himself, substantially as follows. The patient is anæsthetised and placed on the back, and two assistants hold the labia apart. The operator passes two fingers of the left hand into the rectum, and spreads out flat upon them the recto-vaginal septum. In his right hand he takes a pair of scissors, sharply pointed and slightly curved, and passes them beneath the mucous membrane at a point where it meets the skin of the left labium majus. A portion of the mucous membrane on that side is dissected up without once allowing the point of the scissors to emerge, and the same process is continued right across the median line, and the membrane on the right side dissected up in the same manner, until the points of the scissors are brought around to the place of entrance. No blood flows during this procedure, except where the handles of the scissors pass beneath the mucous membrane. The part dissected up is then removed with round pointed scissors, and should resemble in shape a butterfly with the wings spread, the head of the insect pointing upwards in the vagina. Sutures are then applied, and the operation is complete. It is sometimes necessary to narrow the anterior wall of the vagina for cystocele as the result of laceration of the perinæum, and this should be performed but a short time before the operation on the perinæum, as otherwise the same condition soon results again for lack of support. Instead of a V-shaped piece, the author removes a T-shaped piece, the arms being at the junction of the uterus and vagina.

THE ACTUAL CAUTERY AND ITS EMPLOYMENT IN CUTANEOUS SURGERY.—In an article in the *Charleston Medical Journal and Review* for January 1877, Dr. Piffard recommends the employment of the actual cautery in cutaneous surgery as being specially adapted for some kinds of tumours and vascular growths. Its employment has been, he believes, much facilitated by galvanocautery batteries of American construction, patented by Dr. Dawson and Dr. Byrne, and one not patented by the Galvano-Faradic Manufacturing Company of New York. In acne rosacea, he recommends that the enlarged veins should be just touched by a wire heated to whiteness. The vessel is obliterated, and the infiltration around it is reduced, only a minute punctate scar being left. In the greatly hypertrophied condition, the wire should penetrate the whole depth of the thickened integument. He has in several instances secured obliteration of enlarged veins of the leg by bringing the white hot platinum (heated by electricity) almost in contact with the vein. The platinum should not quite touch the skin, and should be held in position for a minute or more. Certain forms of angioma and nævus are also conveniently treated by cautery. The tendency to spread in the orbicular variety of erythematous lupus can be checked by applying a fine white hot wire along the outer edge of the infiltration and burning through the whole depth of the skin. Dr. Piffard has found the treatment of soft chancre by one good white hot cauterisation result in a speedy cure.

THERAPEUTICS.

PARENCHYMATOUS INJECTION OF ERGOTINE.—Dr. L. Collins, of Guildford, Indiana, in the *The Clinic*, speaks favourably of injecting a solution of ergotone into the tissue of the cervix in cases of subinvolution of the uterus and chronic engorgement of the neck of the organ. He uses a needle about four and a half inches long, attached to a hypodermic syringe; operates through a common glass speculum, first producing local anæsthesia by placing a pledget of cotton, saturated with chloroform, against the os; and throws into the cervical tissue a solution containing two or two and a half grains of Squibb's ergotone. The injections are repeated every six days. Very little local irritation is said to follow, and the pain, if any exist, soon assumes an intermittent character.

the committee of management. This was moved by the Rev. C. W. JONES, and seconded by Mr. R. JOHNSON.

The CHAIRMAN read the rule applying to the stewards, expressing the hope that there would be gentlemen in parishes who would come forward to send their names to the secretary, Mr. Waters, at Ipswich, with the view of electing benefit members.

The MAYOR OF BURY (Mr. Ion), expressing some doubt as to the applicability of the club to the town of Bury, from the fact that the medical men of the town spent a certain portion of the day in attending to the wants of the poorer inhabitants, proposed a cordial vote of thanks to Sir Edward Kerrison for presiding, and for the interest he had shown in starting the club.

Mr. SHORT seconded the motion, saying he had no doubt the club would be a great success and work well.

In replying to the vote of thanks, the CHAIRMAN reiterated what he said in Ipswich, that in towns provident dispensaries should be established. He thanked the medical men throughout the county for their valuable assistance in starting the club.

Dr. W. A. ELLISTON, as a member of the medical staff of the East Suffolk Hospital, said the club would remove the stigma attaching to hospitals of giving gratuitous advice to those who could well afford to pay for it. This was a general grievance. He gave statistics to prove the large increase which had taken place in the number of out-patients of the two county hospitals in the last ten years. The number of out-patients in the Bury and Suffolk General Hospital had increased 25 per cent., whilst those of the East Suffolk Hospital had risen from 1,205 in 1866 to 2,816 in 1876. He moved a vote of thanks to the Mayor and Corporation of Bury for granting the use of the Guildhall for the meeting, which, having been seconded by the Chairman and acknowledged by the Mayor, the meeting terminated, after lasting nearly two hours.

ASSOCIATION INTELLIGENCE.

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 WALES AND MONMOUTHSHIRE BRANCH.

The autumn meeting of this Branch will be held at Dowlais on Thursday, November 8th.

There will be a dinner after the meeting, at the Castle Hotel, Merthyr.

Gentlemen desiring to bring forward papers or communications, or to be present at the dinner, are requested kindly to give notice by November 4th to either of the undersigned.

ANDREW DAVIES, M.D. } *Honorary Secretaries.*
ALFRED SHEEN, M.D. }

October 16th, 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.

PROCEEDINGS OF THE COMMITTEE OF COUNCIL.

At a meeting of the Committee of Council, held at the Freemasons' Tavern, Great Queen Street, London, on Wednesday, the 10th day of October, 1877: Dr. R. W. FALCONER (President of the Council), in the Chair—

A deputation from Bath, consisting of Dr. Goodridge, Mr. Mason, and Mr. Fowler, the joint Secretary of the Bath and Bristol Branch, presented a numerous signed invitation to the Association to hold its Annual Meeting of 1878 in that city.

A cordial and influential invitation was also presented from Cork, inviting the Association to that city to hold its Annual Meeting of 1878.

It was resolved: That the thanks of the Committee of Council be given to the members of the Association and of the profession of Bath for their cordial invitation, and that it be accepted; and further, that Dr. R. W. Falconer be appointed President-Elect.

It was also resolved: That the grateful and cordial thanks of the Committee of Council be given to the members of the South of Ireland Branch for their invitation to meet in Cork next year, but having received an invitation, given at Norwich in 1874, and now renewed, to meet in Bath in 1878, trust that the invitation from Cork will be renewed in 1879, when the Committee of Council feel assured that the visit of the Association to the South of Ireland will be most acceptable to its members.

To the President of the Council and Members of the Committee of Council of the British Medical Association.

We, the undersigned members of the Bath district of the Bath and Bristol Branch of the British Medical Association, are desirous that the Annual Meeting of the Association in the year 1878 should be held in Bath.

While it is impossible that we can in any way compete with the towns of Birmingham, Sheffield, or Manchester, in which the Association has recently held such brilliant and successful meetings, we are willing to use our best endeavours to give the Association a hearty welcome, and afford to the members such hospitality as lies in our power.

The position of Bath as regards its railway communication from the east and west of England, from South Wales and the Midland Counties, as well as from the north, is most central, and presents facilities for a large assemblage of the members.

At a meeting of the Town Council of this city, it was also unanimously resolved:

"That the Council learn with much pleasure that the Bath members have resolved to invite the British Medical Association to hold its next meeting in Bath. It will be a privilege to welcome the Association very cordially in our ancient city, and to co-operate by every means in our power in giving facilities for a successful meeting."

We have also much pleasure in announcing that Randle Wilbraham Falconer, M.D., F.R.C.P., has kindly accepted our invitation to fill the office of President of the Association for 1878.

We trust that the Committee of Council will be pleased to accept our invitation.

(Signed) H. F. A. Goodridge, M.D., F.R.C.P.; R. W. Falconer, M.D., F.R.C.P.; J. S. Bartrum, F.R.C.S.; R. N. Stone, L.R.C.P.Ed., M.R.C.S.; F. Mason, L.R.C.P., M.R.C.S.; H. Hensley, M.D.; J. K. Spender, M.D.; Edwin Skaife; Charles Harper; R. S. Fowler; S. B. Cowan; S. P. Budd; T. Biddulph Goss; R. Carter, M.D.; H. C. Hopkins; T. Cole, M.D.; A. W. Fox, M.B.; Charles Gaine; Louis King; A. B. Brabazon, M.D.; J. J. Mitchell; H. W. Freeman, L.R.C.P.; John Terry; G. E. Lawrence, L.R.C.P.; J. Dudley Saunders; J. Davies; F. W. Hanham; D. Campbell, M.D.; T. K. Green, F.R.C.S.; Richard Colthurst, M.D.

To the President and Members of the Committee of Council of the British Medical Association.

We, the undersigned members of the British Medical Association and of the medical profession resident in Cork and the south of Ireland, have much pleasure in submitting to the Committee of Council our cordial invitation to the Association to hold the next Annual Meeting in 1878 in the city of Cork.

We promise to the Association a hearty welcome to this city, and will endeavour by every means in our power to render the meeting both interesting and agreeable.

(Signed) J. R. Harvey, M.D.; D. C. O'Connor, M.D.; W. C. Townsend, M.D.; W. K. Tanner, M.D.; W. Beamish, M.D.; John Popham; W. J. Cummins, M.D.; — Allcock; J. G. Curtis, F.R.C.S.; Wm. Colles; J. A. Eames, M.D.; J. P. Golding, M.D.; E. R. Townsend, jun.; S. O'Sullivan, M.D.; T. C. Shinkwin, M.D.; — Orton; R. O'Reilly; H. Macnaughton Jones, M.D.; Ringrose Atkins, M.D.; D. C. O'Connor, jun.; J. R. Hayes; D. H. Hadden, F.R.C.S.; W. H. Sandham; J. E. Bull; C. A. Harvey, M.D.; H. Corby, M.D.; D. D. Donovan; W. H. Holmes; J. F. Donovan, M.D.; J. Adderley, M.D.

The remainder of the minutes of the meeting will appear in a future number of the JOURNAL.

phenomenon observed in the intestines during the Irish famine by Dr. Donovan,* and elsewhere by Dr. Martyn;† albeit not a word appears in evidence of the peculiar fœtor exhaled from the body in cases of starvation, one cannot but come to the conclusion, after a careful comparison with the cases above quoted, that insufficiency of food was one great factor leading to the death of Harriet Staunton. The removal to Penge had, of course, some share in the immediate issue. But the possible *tertium quid* which has, since the trial, so agitated the medical and general public is the discovery after death of tubercles in the brain and lung, coupled with the evidence (slight and scanty though it be) of some form of mind-derangement during life.

No medical man denies the possibility of even extreme emaciation from various forms of bodily disease—from functional nervous disorders and even from moral causes alone. But from either of these causes the emaciation is, as a rule, the result of the non-assimilation of the food, it may be, duly taken or properly administered, and evidence of the consumption of food can generally be found after death. The intestines, both small and large, of Harriet Staunton were, however, quite empty, and contained no food or fœcal matter whatever.

On the other hand, in the practices of all medical men cases occur of persistent refusal of the proper quantity of, or of all, daily food, conjoined with neglect of personal attention and cleanliness, in many miserable patients afflicted with but even slight brain-impairment brought on or not by mental worry and distress. One need not dwell on the inevitable ending of such cases, if uncared for and unheeded by their relatives or attendants.

Having now more clearly before them all the probable and possible contributory causes of death, it remains, of course, for the higher authorities to apportion the legal share of each of these causes between the deceased and her four survivors.—Yours obediently,

Bishopsgate, October 16th, 1877.

ROBERT FOWLER, M.D.

UNIVERSITY INTELLIGENCE.

OXFORD UNIVERSITY.

EXAMINATIONS FOR THE DEGREE OF M.B. AND IN PREVENTIVE MEDICINE AND PUBLIC HEALTH.—Examinations for the degree of Bachelor of Medicine will be held early in December. Candidates are requested to forward their names to the Regius Professor of Medicine, before November 24th. Also, it is proposed to hold an Examination in Preventive Medicine and Public Health, in conformity with Statute XII, Titulus Sup. XIX, p. 291, ed. 1877. The Examination is open to all persons who have taken the degree of Bachelor of Medicine in the University of Oxford. Candidates are to send in their names to the Regius Professor of Medicine on or before November 10th.

UNIVERSITY OF CAMBRIDGE.

At a congregation on Thursday, October 11th, Mr. F. M. Balfour of Trinity, was approved as an University teacher in Physiology, and Mr. S. H. Vines of Christ's, was approved as an University teacher in Botany. The following were appointed Examiners: First M.B. Examination: J. W. Hicks, Sidney; C. T. Whitmell, Trinity. Second M.B. Examination: Dr. Humphry; Dr. Galabin. Third M.B. Examination: Dr. Charles West; Dr. Cheadle. Master in Surgery Examination: T. Holmes; G. W. Callender. Dr. Bradbury was appointed Assessor to the Regius Professor of Physic.

The Physical Science Postmastership at Merton Collège has been awarded to Mr. E. T. Milner, of Manchester Grammar School.

QUEEN'S UNIVERSITY, IRELAND.

At the Annual Meeting of the University last week, it was reported that 72 candidates have sought the degree of Doctor in Medicine, and of these 44 have satisfied the examiners; 35 candidates out of 58 have passed for the degree of Master of Surgery; and 25 out of 43 have been deemed qualified for the diploma in midwifery; 115 candidates presented themselves at the second University examination in medicine, of whom 73 have satisfied the examiners; and 154 out of the 198 candidates have been successful at the first University examination in the same faculty.

* *Dublin Medical Press*, February 2nd, 1848.

† *Medical Times and Gazette*, March 30th, 1861.

MEDICAL NEWS.

APOTHECARIES' HALL.—The following gentlemen passed their examination in the science and practice of medicine, and received certificates to practise, on Thursday, October 4th, 1877.

Chicken, Rupert Cecil, Nottingham
Vickerstaff, William Harry, Macclesfield
Walsh, William Arthur Stephenson, Worcester

The following gentleman also on the same day passed his primary professional examination.

Brown, Percy, London Hospital

MEDICAL VACANCIES.

THE following vacancies are announced:—

CHARING CROSS HOSPITAL—Assistant Physician and Assistant Surgeon. Applications to be made on or before November 2nd.

GENERAL HOSPITAL, Birmingham—Two Assistant Physicians, Two Assistant Surgeons, and a Dental Surgeon. Salary, £100 each per annum. Applications to be made on or before the 29th 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.

LOCHGOILHEAD 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.

ROTUNDA LYING-IN HOSPITAL—Assistant Physician. Applications to be made to the Master.

ST. ASAPH UNION—Medical Officer for the Llanfairtalhairn District.

ST. GEORGE'S and ST. JAMES'S DISPENSARY—Physician. Applications to be made on or before the 25th instant.

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.

WONFORD HOUSE HOSPITAL FOR THE INSANE, near Exeter—Resident Medical Superintendent. Salary, £350 per annum, with board, lodging, washing, and attendance. Applications to be made on or before November 3rd.

WORKSOP DISPENSARY—Resident Surgeon. Salary, £120 per annum, with furnished apartments, coals, gas, and attendance. Applications to be made on or before the 27th instant.

MEDICAL APPOINTMENTS.

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

*ASHBY, Henry, M.B. Lond., appointed Assistant Physician to the Liverpool Children's Infirmary, *vice* T. D. Chalmers, M.D., resigned.

HUTCHINSON, John, M.B., appointed Resident Surgical Assistant to the Western Infirmary, Glasgow.

McMURRICH, Malcolm, M.A., appointed Resident Medical Assistant to the Western Infirmary, Glasgow.

McPHAIL, Donald, M.B., appointed Resident Medical Assistant to the Western Infirmary, Glasgow.

McRURY, John, M.B., appointed Resident Surgical Assistant to the Western Infirmary, Glasgow.

ORR, A. B. Seton, M.B., appointed Resident Surgical Assistant to the Western Infirmary, Glasgow.

PATERSON, R. H., appointed Resident Medical Assistant to the Western Infirmary, Glasgow.

*SANDFORD, F. J., Esq., M.D., appointed Medical Officer of Health for the Drayton (Shropshire) Rural Sanitary District, *vice* W. H. Harding, M.R.C.S. Eng.

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.

MARRIAGE.

LITTLE—SHAW.—On the 10th instant, at Buglawton Church, Cheshire, by the Rev. E. Harwood Cooke, M.A., Vicar of Urmston, assisted by the Rev. W. Besant, B.A., Vicar of Buglawton, *David Little, M.D., Manchester, to Marian (Minnie), second daughter of Anthony Shaw, Bank House, Congleton.

ROYAL COLLEGE OF SURGEONS, EDINBURGH.—At the annual meeting of the College, held yesterday, the following office-bearers were elected for the ensuing year. *President*: Patrick Heron Watson, M.D. *Secretary and Treasurer*: Joseph Bell. *Librarian*: David Wilson, M.D. *Council*: Andrew Wood, M.D.; James D. Gillespie, M.D.; James Spence; William Walker; Henry D. Littlejohn, M.D.; John Smith, M.D.; *Ex officio*, Joseph Bell. *Examiners*: Archibald Inglis, M.D.; Peter D. Handyside, M.D.; James D. Gillespie, M.D.; Henry D. Littlejohn, M.D.; Patrick H. Watson, M.D.; David Wilson, M.D.; John Smith, M.D.; Argyll Robertson, M.D.; Joseph Bell; John Duncan, M.D.; Robert J. B. Cunyngham, M.D.; Alexander G. Miller, M.D. *Assessors to Examiners*: William Brown; James Spence; William Walker; James S. Combe, M.D. *Conservator of Museum*: Robert J. Blair Cunyngham, M.D. *Clerk*: James Robertson. *Officer*: John Dickie. *Assistant to Conservator*: James Grandison.

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. Mr. J. Knowsley Thornton, "Removal of Fibroid Uterus and both Ovaries"; Dr. C. Theodore Williams, "A Case of Persistent Pyrexia during Phthisis, reduced by Diet"; Dr. R. J. Lee, "Maternal Impressions".
TUESDAY.—	Royal Medical and Chirurgical Society, 8.30 P.M. Dr. Wm. Miller Ord, "On the (Edema (Myxoedema) observed in the so-called Cretinoid condition of Women".
WEDNESDAY.—	Hunterian Society, 8 P.M. Dr. Moxon, "On some points in the Clinical History of Heart-Disease".
FRIDAY.—	Quekett Microscopical Club (University College, Gower Street), 8 P.M. Dr. James Edmunds, "On the Immersion Paraboloid"; Clinical Society of London, 8.30 P.M. Dr. Henry Thompson, "A case of Hysteria, with Contraction of the Lower Limbs, Anæsthesia, and Ischæmia, in a boy"; Mr. Lawson (for Dr. Aikman), "A case of Injury to the Lower Part of the Spinal Cord, followed by Wasting and Contraction of the Muscles of the Lower Extremities"; Mr. Bellamy, "A case of unusually large Urethral Calculus"; Dr. Dowse, "A case of Cerebro-Spinal Unilateral Sclerosis".

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.

OWING to pressure on our space, we are compelled to omit until next week the letters on Antisepticism of Drs. Marion Sims and John Dougall.

INQUIRY WITHOUT INQUEST.

SIR,—I am sorry my explanatory letter accompanying "Inquiry" was not sufficiently clear to enable you to answer it. That inquiry should always precede inquests I can understand, and I now ask—1. In the event of a soldier being found dead, is it legal or right for the military or medical authorities to remove the body and make a *post mortem* examination? 2. Is it not the coroner's duty and prerogative, in the name of the Crown, to take possession of the body? and if he, after due inquiry, deem a *post mortem* examination necessary, should it not devolve upon him to order it to be made?—I am, sir, your obedient servant,

October 16th, 1877.

A MEMBER B. M. A.

* 1. In every case in which a person is found dead, information should be given to the coroner. Until he has issued his precept for an inquest, there is nothing illegal in the removal of the body or in the making of a *post mortem* examination by the medical or military authorities. 2. It is the coroner's duty in all suspicious cases of death to take possession of the body and direct an inquest if he think it necessary. It also rests with him to order a *post mortem* examination according to his discretion. Any person making a *post mortem* inspection except under his order would be guilty of contempt.

ERRATUM.—In the report last week of Mr. Rivington's remarks at the Royal Medical and Chirurgical Society, for "furuncular hydrocele," read "funicular hydrocele".

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.

DE LISLE ALLEN FUND: AN APPEAL.

Since our last notice of this case, Dr. De Lisle Allen, who for more than two years was incapacitated from following his profession, has died in Bethlem hospital. An appeal is once more made to enable his widow and daughter to keep a home, and to put them in a position to earn a livelihood for themselves. Dr. B. W. Richardson, 12, Hinde Street, Manchester Square, is treasurer; and subscriptions will be received either by him or by the Union Bank of London, Argyll Place, Regent Street.

Signed)

J. E. ERICHSEN, F.R.C.S. F.R.S.,
BENJAMIN W. RICHARDSON, M.D., F.R.S.
J. HUGHLINGS JACKSON, M.D.
THOMAS SMITH, F.R.C.S.

THE LUNACY LAW.

B. M. asks:—What are the provisions under which a husband (medical man) may keep his wife at home, who has been suffering from melancholia and has attempted self-destruction? She has, after judicious treatment under an eminent physician, and through change of air and scenery, rapidly recovered, but there is still a doubt of relapse? May he treat her himself henceforth? And, in case of accident, could the coroner or the Commissioners of Lunacy lay any blame on him, provided she has a keeper during his unavoidable absence?

* * There is no provision in the Lunacy Acts to define the duties of a husband towards his insane wife, which are part of the common law. The need for order and certificates of a single lunatic in a private house under the Lunacy Acts depends entirely upon whether the patient is "kept for profit"; and an insane married woman who had property of her own, which is paid over to her husband by her trustees, might, under the strict letter of the law, be considered as "kept for profit", even while residing in the husband's private house. The law, however, in such a case would have to be put in force by the Commissioners in Lunacy, whose sound judgment and right feeling cannot be doubted. "In case of an accident", the coroner's jury could undoubtedly lay blame if the circumstances justified it; and the Commissioners also could not only lay blame, but they could prosecute—1st, if the lunatic ought to have been placed under certificates, and had not been so placed; and 2nd, if being under certificates, the accident could be attributed to neglect or ill treatment of any kind. The law is made for offenders; but if our correspondent should treat his insane wife in his own house, as we must suppose that he intends to treat her, he has clearly the right to do so, and the Commissioners have no power of interference, nor even of visitation.

THE letters of Dr. Cordwint (Milverton) and Mr. W. H. Jalland (York), relating to changes of address and other matters affecting the business of the JOURNAL, should be addressed to the General Manager, Mr. Fowke, to whom they have been handed.

NEW THEORIES.

The various popular audiences whom Dr. Richardson has addressed during the last week can hardly complain of any want of startling surprises in his addresses. Each rose far above the common-place. Speaking at Leamington at a sanitary congress to a very mixed audience, he developed at length a new theory on contagious diseases, which he entitled the glandular theory, as to which they were hardly in a position to be very critical; while, on the other hand, they must have felt it difficult to know how to accept the new medical theory then and there propounded in the face of those already accepted. At a church congress at Croydon, he is reported to have announced the principle that no hospital ought to exceed twenty-five beds; and at an inaugural address at the Birkbeck Institute, he is reported to have said that the present method of training young men for the medical profession was leading to certain mental ruin. Three rather important theories to have announced *ex cathedra* to popular audiences within so short a space of time.

CERTIFICATES OF CAUSE OF DEATH.

SIR,—Will you kindly give me your opinion on the following case that occurred to me in my practice here during the past week?

A married woman was delivered by a midwife of a living child at 10.30 P.M., and died at 12.25 the same night of retained placenta and *post partum* hemorrhage. A messenger reached my house at 1.30 A.M., who must have been sent for me within only a few minutes of the death of the woman. Was I right in refusing to give a certificate of death? And ought not the coroner, when informed of the facts of the case, to have held an inquest?—Yours truly,

Walton Bank House, Ashbourne, October 14th, 1877.

* * Our correspondent was perfectly right in refusing to give a certificate of the cause of death when he had not even seen the patient. It is in the discretion of the coroner to order an inquest or not; but it seems to us that the sudden death of a woman in childbirth under the hands of a midwife is a case calling for inquiry.

TREATMENT OF EXCORIATION.

SIR,—I shall feel obliged if some of your correspondents will kindly give me their opinion as to the best treatment to adopt for the following case. A gentleman has been troubled for the past two years by an excoriation between the thighs and scrotum, and extending to the perineum. The excoriation gets almost quite well occasionally, but the cure is never complete, as it returns again and again—sometimes as a simple excoriation, that rapidly gets worse, and sometimes as an eruption of itching pustules.—I am, etc.,

L.R.C.P.

POISONING BY NICOTINE.

SIR,—Nicotine poisoning (not criminal, but only accidental) has apparently been rife of late. In the BRITISH MEDICAL JOURNAL of the 22nd ultimo, at page 479, is that of a boy of three or four years of age, he having been blowing soap-bubbles through an old wooden pipe. He lived three days. Where, and who was the medical witness to whom application may be made for information? A second case was that of Francis Morris, aged 55, at Manchester, on the 24th of last month—the medical witness, Mr. J. S. Bridgford, whose address I cannot trace. And a third is noticed in the BRITISH MEDICAL JOURNAL of the 13th instant, at page 536, which occurred to the boy Shore at Lambeth. Who was the medical witness to whom reference may be made?—Yours truly,

CORONER.

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.

MEDICAL ETIQUETTE.

SIR,—If you have space, and will allow me, I should like to elicit the opinion of yourself and the profession as to whether a breach of medical etiquette has been committed under the following circumstances, as I do not remember any similar case to have been reported since I became a member of the profession.

My appointment as medical officer of Health to the Haslingden Local Board expiring on the 29th of September last, it became necessary that the forms of the law should be complied with, hence a formal advertisement was inserted in the *Preston Guardian*, which, as nearly as I can remember, was as follows.

"The Haslingden Local Board will, at their meeting on the 3rd of October next, proceed to the election of a medical officer of health and an inspector of nuisances for the district. (Signed) Thomas Woodcock, jun., Clerk."

As I have several times been reappointed in the rural district, of which I am also medical officer, and no notice has ever been taken of these formal advertisements by other medical men, I this time thought the same would be the case, and I did not even send in an application for reappointment. It came out, however, to my surprise, on the 3rd instant, that I had indeed reckoned without the host, for an application was put in from Dr. Macpherson, a gentleman who settled here about twelve months since, stating that he was willing to take the appointment at £59 per annum, being £41 less than my old salary. Of course, the offer was tempting, particularly to the so-called economists, who are always to be found on every local board, and he obtained five votes; but as seven votes were recorded in favour of my re-election, I was reappointed at my old salary.

I put these facts before the profession without note or comment, and shall be glad for any expression of opinion thereon.—I am, sir, yours truly, Haslingden, October 9th, 1877.

J. A. HARRISON, M.D.

SIR,—Kindly give your opinion upon the following question of medical etiquette in your next issue. A. pays two visits to X.'s house for B., in B.'s absence from home. About six months afterwards, Mrs. X. desires A. to attend her son (aged 15); and, in reply to A.'s request that she will send for B., she says that, though she would have B. if ill herself, her children prefer A., and if A. do not attend she will send for Drs. C. or D. Is A. justified in attending?—Yours, etc., October 1877.

ASSOCIATE.

. Even under the circumstances A. would do well to decline to supplant B. in the house which he had entered as B.'s friendly representative and deputy.

THE "VIN DE BAUDON".

SIR,—We were only made aware to-day, on calling at your office, of the publication in your issue of August 11th of Dr. Andrew Clark's letter, attributing to us the unfair use of his name in our advertisement of the "Vin de Baudon". We beg to enclose a copy of the London Hospital Report, as published in the *Medical Times and Gazette* of May 12th, 1877, and a copy of our advertisement. The report gives great prominence to Dr. Clark's name in connection with the case; and having the care of it, and appearing as it does in a public journal, fully, we considered, justified us in utilising it for advertising purposes; and we appeal to any impartial and competent judge whether we have given undue prominence to Dr. Clark's name, or made other than legitimate use of the report. If, instead of writing to your JOURNAL, Dr. Clark had advised us that the published report was inaccurate, we should at once have complied with his desire, and discontinued using his name.

Regretting this explanation, due to you and the profession, should through ignorance have been so long deferred, and requesting the favour of the early publication of this letter, we are, sir, yours very obediently,

October 15th, 1877.

PAGNY, WALLACE, & CO.

INFANT FEEDING.

SIR,—In reply to the letters of "L.R.C.S." and "A Father" on the above subject in your last issue, I beg to observe that the verdict of the jury at the inquest on the child at Islington was correct and in accordance with the facts, for the following reasons. The child was eight weeks old; the salivary glands of infants do not assume their active functions till the age of from four to six months; without ptyalin, the starch of farinaceous food is not transformed into dextrine and grape-sugar, and is consequently taken into the stomach in an insoluble state, incapable of absorption. Therefore, of the various foods offered to the child in question, the milk only could be useful as nutriment, the other articles being quite incapable of being assimilated. The amineol, I presume, was given as a remedy to ease the griping pains occurring during the use of such a diet.

When ignorance like this is displayed, it is reasonable to suppose the cow's milk was given undiluted, so that the excess of casein it contains was not digested, but added to the troubles the use of the starchy food involved. Under the circumstances, the death of the child cannot be wondered at; and it is to be hoped that the publicity given to the matter by means of the coroner's inquest will have good effect in diminishing the risks to infant life from defective nutrition caused by improper feeding.—Yours obediently,

C. A. OWENS, M.D.

Long Stratton, Norfolk, October 15th, 1877.

MOLES ON THE FACE.

SIR, I strongly advise "A Member" to employ the acid nitrate of mercury in removing moles from the face. The acid should be applied with a splinter of wood and gently rubbed into the part for several seconds, according to the thickness of the growth. Great care should be taken to prevent the acid reaching the surrounding skin. There is absolutely no pain attending the application, and the growth gradually shrivels away, and the slough falls off in about a week. I treated a small warty growth in this manner, which existed on the chin of a lady of considerable personal attractions, some two years ago. She was rather alarmed as to the result, as the acid appeared to be working down somewhat deeply; and I also myself feared that a scar would be the result. The growth has not returned, and a very faint depression alone remains, like a very indistinct small-pox mark. The growth had been repeatedly nipped and cut off, and always grew again, to the patient's great disgust. I have frequently removed small sessile growths from the external ear with the scissors; but there was usually very free hæmorrhage, requiring the use of strong styptics, or even the introduction of a needle. These growths usually contain cartilage, and I should in future employ the acid for their removal. The ligature is certainly efficacious; but it is painful, and by no means neat in its results.—I am, etc.,

LLEWELYN THOMAS, M.D.

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.

SPHYMOGRAM.

SIR,—That word can scarcely be called "current" which is not to be found in any of the text-books, and is not known to the editor of a leading journal; but I do not dispute the priority of Dr. Grimshaw's invention of the above convenient term: I may claim, however, priority of publication in this part of the kingdom. It is not worth talking about. It would be absurd to suppose that any but the greatest inventions are not made by many men independently; but I wish to say concerning the general question of publication of any invention or discovery, small or great, that if after a search in the latest text-books no mention of it is found in them, the inventor should not hesitate, from fear of being told that "everybody knew that," to write to the journals forthwith, so that it may be published or re-published, even again and again if necessary, until it is finally lifted into the text-books and becomes familiar knowledge. If the inventor pursue this plan with respect to all his inventions, both the greater and the less, he will in the end be spared some deep regrets, either selfish or unselfish, or both.—Your obedient servant,

October 1877.

T. CHURTON, M.D.

ERRATA.—The case alluded to in the last BRITISH MEDICAL JOURNAL, at page 552, was that of a man who died at the Denbigh Infirmary, not Wrexham. The inquest was also held in the Denbigh Infirmary.

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. Russell Reynolds, London; Dr. J. Marion Sims, Paris; Dr. Reginald Southey, London; Dr. H. Macnaughton Jones, Cork; Mr. R. P. Oglesby, Leeds; Mr. R. T. Morgan, Cricklade; Mr. Greenway, Plymouth; Dr. Brodie, London; Dr. Wilson Fox, London; Dr. J. B. Bradbury, Cambridge; Mr. T. Spencer Wells, London; Mr. Cumberbatch, London; Dr. Norman Moore, London; M.D. Edin.; Dr. F. Taylor, London; Professor Bentley, London; Dr. J. Wallace, Liverpool; Mr. R. Kershaw, London; Mr. Andrew Clark, London; Mr. F. J. Marshall, London; Dr. A. B. Shepherd, London; M.; Dr. Gillespie, London; Dr. Graily Hewitt, London; Mr. G. Cowell, London; Dr. Burder, Clifton; The Registrar of Owens College, Manchester; Mr. Nunneley, Leeds; Mr. Jacobson, London; Dr. John Curnow, London; Mr. A. Hensman, London; Mr. C. T. Dent, London; Mr. J. G. Garbutt, London; Mr. A. Pearce Gould, London; The Stafford House Committee; Dr. C. Theodore Williams, London; The National Society for Aid to the Sick and Wounded in War; Dr. J. W. Moore, Dublin; Dr. Edis, London; The Registrar-General of Ireland; Mr. Eastes, London; The Secretary of Apothecaries' Hall; Dr. J. Milner Fothergill, London; The Registrar-General of England; Dr. Tripe, Hackney; The Secretary of the Quekett Microscopical Club; Dr. Cunningham, Galway; Dr. Elliott, Mansfield; Mr. Erasmus Wilson, London; The Secretary to the Local Government Board; Dr. Elliott, Carlisle; Dr. Churton, Leeds; Sir William Smart, Haslar; Dr. J. Lawrence Hamilton, London; Mr. M. Blok, London; Messrs. Trübner and Co., London; Mr. J. Wycliffe Jones, Edinburgh; Dr. J. C. Renton, Glasgow; Dr. John Alexander, Glasgow; The Secretary of the Manchester Medical Society; Dr. Llewellyn Thomas, London; Dr. Elgar Buck, Leicester; Mr. Kerswill, St. Germans, Cornwall; Dr. Levinge, Asylum, Stapleton; Dr. Ransome, Manchester; Dr. Brice, Birkenhead; Mr. Alfred Aspland, Dukinfield; Dr. Cordwint, Milverton; Mr. W. H. Jalland, York; Dr. Hugh Miller, Glasgow; Dr. Rees, Newmarket; Dr. Wm. Ogle, Derby; Dr. G. H. Lilley, Hatton; Dr. Wm. Lee, Washington; Mr. H. D. Palmer, Colchester; Dr. Thomas, Sheffield; Dr. Manson, Howden-le-Wear; Sir Joseph Fayrer, London; W.; Mr. Harold Lewis, Bath; Mr. Ingpen, London; X.; Dr. Byrom Bramwell, Newcastle-upon-Tyne; Dr. Robert Fowler, London; Dr. Samuel Wilks, London; Z.; Dr. W. S. Playfair, London; Messrs. Pagny, Wallace, and Co., London; Dr. Francis Warner, London; Dr. Alfred S. Taylor, London; Dr. J. F. Payne, London; Our Dublin Correspondent; Dr. James Stevenson, London; Mr. Balmanno Squire, London; Dr. Greenfield, London; Dr. Trollope, St. Leonard's-on-Sea; Mr. Kent Jones, Vochrin; Mr. Philip R. Littleton, Ashburn; Dr. J. H. Stowers, Lower Tulse Hill; Mr. Bartlett, Birmingham; Mr. R. Clement Lucas, London; Dr. Rabagliati, Bradford; Dr. Owens, Norfolk; Dr. Cookson, Stafford; Mr. Philip Bindley, Birmingham; Dr. Henry Ashby, Liverpool; Our Glasgow Correspondent; Mr. E. Crossett, Cheadle; Mr. C. H. Phillips, Bury; Dr. Maurice Evans, Cardiff; Dr. George Duffey, Dublin; Our Edinburgh Correspondent;

BOOKS, ETC., RECEIVED.

Ophthalmic and Otic Memoranda. By D. B. St. John Roosa, M.D., and Edward T. Ely, M.D. New York: William Wood and Co. 1876.