

was still within the capsule, and was never dislocated on to the dorsum illi.—Mr. WALSHAM thought that the top of the ligamentum teres, described in this case, was by no means rare in early hip-joint disease.—Dr. LEDIARD had a specimen of hip-joint disease taken from a boy aged fourteen, in which the bone was clearly dislocated.

Sarcoma of the Scapula in an Infant followed by Multiple Sarcomata.

—Mr. MORGAN narrated the case of an infant four weeks old, who was brought to him at the Great Ormond Street Hospital with a lump over the acromion process of the left scapula. The tumour was hard, of the size of a nut, and the skin was easily movable over it. Three days later, the lump was larger, and another had appeared rather lower down. Three days afterwards, several small tubercles had appeared under the skin of the back, chest, and abdomen. There was no cough. The belly increased in size, but the rest of the body rapidly wasted. The child died five weeks after it had been first seen, having passed no water for twenty-four hours. *Post Mortem Examination.*—A large hard tumour was found on the upper part of the left scapula. It grew beneath the periosteum. On section, it was firm. There was no degenerative process. Three large and several small deposits were found in the heart. The large deposits were of the size of filberts, and, on section, yellow softening was found in their centres. They presented the appearance of encephaloid deposit in the liver. At the back of the abdomen was a large mass, measuring five inches long by three wide; this was found to be the right kidney. It consisted of masses of soft new growth. The exterior of the organ was smooth. The left kidney presented much the same appearances on a smaller scale; the external surface of this kidney was lobulated and irregular. There were many patches of disease in the left suprarenal capsule, and some scattered patches in the liver. Under the microscope, the growth was found to consist of round, elongated, and a few spindle-shaped cells with large nuclei. There was no alveolar structure, and no myeloid cells. The irregularity in the shape of the cells appeared to point to their having grown under pressure. Mr. Morgan stated that he had been unable to find a record of the occurrence of sarcoma at so early an age. He thought it possible, however, that some cases which had been reported as cancer in babies were in reality sarcoma.—The PRESIDENT expressed some doubt as to the primary disease having occurred in the scapula.

SELECTIONS FROM JOURNALS.

MEDICINE.

GUBLER ON SPECIAL INFLAMMATION OF TENDONS IN LEAD-POISONING.—M. Gubler (*Gazette Hebdomadaire*, Sept. 6th) pointed out at a meeting of the French Association for the Advancement of Science an unusual variety of deformity and lesion of the tendons, which he had observed for the first time in a patient suffering from lead-poisoning. This lesion consists in a sort of plastic and fungoid synovitis, seated in the sheath of the extensors on the dorsal surface of the hand. He thought it was rather to be associated with nutritive disorder caused by lead-paralysis, than with the action of the poison itself. The second case, which he had observed in a patient suffering from cerebral paralysis of saturnine origin, confirmed him in this idea. It was, however, difficult not to be reminded of the disease described by Garrod under the name of saturnine gout; and the necropsy which he had occasion to perform led M. Gubler to satisfy himself that there were neither tophic nor uric acid products, but that the case was one of special tendinous lesion. Legros, who examined the patient, recognised necrosis of the primitive tendon sheathed in a tendinous tissue of new formation. There was here an analogy with the invaginated sequestrum in the case of central necrosis. M. Gubler has seen this deformity after paralysis *à frigore* in a coachman who had suffered from the effects of cold rain falling on the hands. From these various facts, M. Gubler thought it might be concluded that the disorder was one of nutrition, due to paralysis, from whatever cause arising. M. Verneuil believed rather in the action of the poison than in nutritive disorder due to paralysis. He laid stress on the fact that similar disorders occurred in syphilis without prior paralysis.

FREQUENCY AND ETIOLOGY OF EPILEPSY.—Dr. Berger (*Deutsche Zeitschrift für prakt. Med.*, 1878, No. 21; and *Centralblatt für die Med. Wiss.*, No. 46) has had the opportunity of studying 105 cases of epilepsy, which have partly come under his own observation and partly been collected by others; and gives the following statements on the frequency and etiology of the disease. In 65.93 per cent. of the cases, the disease first showed itself in the time between infancy and the twentieth year; but much more frequently than has been accepted hitherto during the first four years of childhood. The female sex is

particularly exposed to it at the age of fifteen to twenty, and the male sex in the years between thirty and forty. This difference may be explained by the beginning of puberty in women and by the excesses committed by men at that time. The cessation of the menses has not the least influence on epilepsy, which very seldom appears for the first time in old age. Dr. Berger observed it once in an old woman aged seventy-four, in whom, after having been perfectly well all her life, the first attack of this disease was produced by a very violent fright. Epilepsy is often hereditary, as the author has distinctly traced in 23 cases out of 71 which he had studied for the purpose of elucidating the question. He has never observed the first outbreak of the disease occur either before the beginning of puberty or after the thirtieth year. In both sexes, and especially in women, epilepsia gravior is the most common form. The author gives a series of observations on the etiology of epilepsy, which tend to illustrate the different experiments that have been made to produce epilepsy artificially. The following were the principal causes. A traumatic affection of the median nerve caused epilepsy in a man; disturbances of the sexual organs in women had the same effect. (One was a case of hæmelytrometra, which was subsequently operated on; the other, cessation of the menses caused by a severe cold.) Four cases may be classed under the head of epilepsy caused by injury. The patients (three male, one female) had sustained injuries to the head, either through a blow, fall, or box on the ear, and the disease subsequently manifested itself either directly afterwards, or after weeks or even months had elapsed, while in the meantime the only thing the patients complained of occasionally were diffused headaches. The next cases belong to the form of epilepsy caused by affection of the cortical substance, especially in syphilitic persons (according to Fournier, Charcot, and others). Among these, he gives a very full description of a case of epilepsy in a man aged thirty-eight, who had been several times under treatment for syphilis, and who was subject to epileptiform attacks that did not differ in the least from general epilepsy. He was cured by a very energetic anti-syphilitic treatment. Two further cases recorded describe vaso-motor epilepsy in a girl aged nineteen, and a very interesting case of epilepsia gravior occurring also in a girl aged nineteen after poisoning with carbonic acid. In the treatment of the disease, the author has used several methods with varying success. Hystero-epileptic patients were the only ones that derived any benefit from Chapman's method of application of ice or cold water to different parts of the body; true epilepsy was never cured either by this method or by electricity. In vaso-motor epilepsy, the constant current proved very useful. Some authors have highly commended the effects of bromide of camphor and bromate of zinc; but Dr. Berger does not agree with them; neither has he seen any satisfactory results produced by atropin and curare; nitrite of amyl, if inhaled in time, sometimes proved efficient in cutting short the paroxysm. The most favourable result has been caused by bromide of potassium, if given in large doses (from six to twelve grammes, equal to one and a half to three drachms, daily); the disease sometimes only manifested itself again after two years, but it never was completely cured. Bromal-hydrate has a similar effect to that of bromide of potassium (Steinauer).

SEPTICÆMIC ERUPTIONS.—In 1868, M. Verneuil proved the existence of several different cutaneous eruptions as taking place during purulent infection. About the same time, Dr. Braidwood was giving special attention to the study of one of those peculiar forms of pyæmic eruptions which bear a very close resemblance to the erythema observed in scarlatina. M. Guéniot has tried to prove, in accordance with the well-known fact that women who have been recently delivered are often subject to cutaneous eruptions, that scarlatiniform erythemata had been observed, the so-called puerperal *scarlatinoïde*. In addition to the above-mentioned two classes of eruptions, M. Claudien Aulnas adds a third, which has also been observed in the course of purulent internal diseases. He suggests that, as they all three might be traced to the same pathological cause, it would be advisable to class them under the head of septicæmic eruptions. M. Aulnas divides all the cases of eruptions caused by septicæmia which have come under his notice into three groups: 1. Those caused by surgical septicæmia; 2. Those caused by puerperal septicæmia; and 3. Those caused by septicæmia arising from some internal disease. Cases arising from the cause No. 3 are very rare. M. Aulnas quotes only three as having come under his own experience; the first resulting from pneumonia, the second caused by suppurative hepatitis, and the third occurring in a patient who suffered from purulent pleurisy. In all these cases, as well as in the eruptions proceeding from surgical pyæmia, as was observed by M. Verneuil, death occurred a short time after the first symptoms of the eruption had been noticed.—*Revue Mensuelle de Méd. et de Chir.*

creasing its present comparatively small income of £2,839 from annual subscriptions by £1,000. We hope the Hospital Committee may succeed in their own special part of the work of reform, and reduce their annual expenditure to £7,500. It is as immoral for institutions as for individuals to be chronically in debt. We would add one suggestion. The profession and the general public are at last alive to the need for efficiently checking hospital abuse. A system of official inquiry, such as now exists at the Queen's Hospital, under which applicants are examined in the institution before they receive relief, is good in intention, and may often prevent abuse; but no inquiry of this kind can be complete until patients are followed to their homes, and there required to produce satisfactory evidence that their social circumstances are such as to entitle them to continue to receive medical charity at a hospital. Such an inquiry might be easily and economically conducted, if all the hospitals of a town united in employing inspectors to visit regularly the applicants for hospital relief at their homes, and report to the authorities of the respective institutions as to the fitness of such persons to continue to be patients.

ASSOCIATION INTELLIGENCE.

BIRMINGHAM AND MIDLAND COUNTIES BRANCH.

THE third meeting of the session will be held in the Examination Hall, Queen's College, on Thursday, December 12th. The Chair will be taken by the President, Dr. TIBBITS, at 3 o'clock P.M.

The following papers are promised.

Dr. M. F. Anderson: The Mineral Theory of Consumption and Allied Diseases.

Dr. Rickards: Cases of Enteric Fever, with Comments.

Members are invited to exhibit patients, pathological specimens, new drugs, instruments, or appliances, at the commencement of the meeting.

JAMES SAWYER, M.D., } *Honorary Secretaries.*
EDWARD MALINS, M.D., }

Birmingham, December 4th.

SOUTH-EASTERN BRANCH: EAST SURREY DISTRICT MEETINGS.

THE next meeting will be held at the Greyhound Hotel, Croydon, on Thursday, December 12th, at 4 P.M.: ALFRED CARPENTER, M.D., J.P., in the Chair.

Dinner will be provided at 6 P.M. precisely: charge, 6s., exclusive of wine.

The following communications are promised.

1. Dr. Wm. Ord: On Rheumatoid Arthritis clinically considered.

2. Dr. Duncan: On the Pathology of Spasmodic Affections.

3. Dr. Philpot: On some causes of Typhoid Fever.

4. Dr. Richardson: Cases of Fractured Patella.

5. Mr. Wm. Soper will exhibit Models of his Hospital and Portable Drain Disinfectors.

JOHN H. GALTON, M.D. Lond., *Honorary Secretary.*

Woodside, Anerley Road, S.E., November 19th, 1878.

BATH AND BRISTOL BRANCH.

THE second meeting of the session will be held at the York House, Bath, on Thursday, December 12th, at 7.15 P.M.; Dr. HENSLEY, President, in the Chair.

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

Bath, November 1878.

THAMES VALLEY BRANCH.

THE next meeting of this Branch will be held at the Greyhound Hotel, Richmond, on Thursday, December 19th, at 6 P.M.

The following papers have been promised.

Dr. Tilbury Fox: Rodent Ulcer of the Face and its Treatment; with Microscopical Demonstration.

Dr. Fenn: Functional Nervous Disorders simulating Organic Disease.
G. F. White, Esq.: Case of Gall-Stone (with specimen), and Case of Abscess of Liver.

Dinner will be provided after the meeting.

FREDK. J. WADD, M.B., *Honorary Secretary.*

Richmond, November 28th, 1878.

CORRESPONDENCE.

A NATIONAL MUSEUM OF HYGIENE.

SIR,—The increasing need of facilities for obtaining a practical knowledge of Sanitary Appliances and their uses, and of other matters in connection with health, induces us, in the interest of the public, to set forth the claims of the Parkes Museum of Hygiene.

The Museum, which has been established for the purpose of diffusing a practical knowledge of Sanitary Science, is calculated to meet the need referred to, and although quite in its infancy, the Parkes Museum contains objects relating to Life-Protection, Dietetics, Clothing, Furnishing, Engineering, and Architecture, in fact, every branch of Hygiene. The Library already consists of between 300 and 400 volumes, exclusive of pamphlets.

It is gratifying to be able to state that Her Majesty the Queen has marked her approval of the undertaking by contributing £30 to the Fund, while the Council of University College have aided the Executive Committee by temporarily placing a large room (area 3,500 square feet) at their disposal, together with a second room for the purposes of the Library.

It cannot be too widely known that it is intended to extend the benefits of the Museum to all classes, so that not only professional men, but owners of property, employers of labour, artisans, and others, both men and women, may be able to study at their leisure the subjects in which they are most interested.

In order that the Museum may become a great Central Institution for the instruction of the public, an endowment is absolutely necessary to meet the working expenses, independently of the probability that it will ultimately become necessary to erect a separate building for its reception. The Executive Committee, therefore, confidently appeal for pecuniary support to all those who while being interested in Technical Education and Sanitary Science, have the inclination and the means to give such assistance.

The Committee will not only be glad to receive subscriptions of money, but also books and pamphlets in any language, Statistical tables, Maps, Plans and other Drawings, Models, Apparatus or Specimens illustrating any branch of Hygiene.

Subscriptions may be paid to the Treasurer, Mr. Berkeley Hill, 55, Wimpole Street, W. Cheques should be crossed "Union Bank" and Post Office Orders made payable at Vere Street.

All communications relating to the presentation of articles to the Museum should be addressed to the Curator, Mr. Mark H. Judge, Parkes Museum, University College, Gower Street, W.C. A detailed prospectus, which has been kindly prepared for the Committee by Mr. Twining of Twickenham, and further information, will be forwarded on application to the Curator.—We are, etc,

WM. JENNER, M.D., *Chairman to the Executive Committee.*

W. R. GOWERS, M.D. } *Honorary Secretaries.*

G. V. POORE, M.D. }

The Parkes Museum of Hygiene, University College, London,
December 3rd, 1878.

PAY WARDS IN HOSPITALS.

SIR,—I trust the urgent representations you have made on the subject of the proposed "pay wards" at St. Thomas's Hospital will have their due effect upon the authorities, and that the suggestion will be abandoned. In this matter we must look to the staff of the hospital to form our first line of defence; but I am sure they will be well supported by the profession at large, and that they will resist the introduction of a system which would be injurious alike to consultants and general practitioners.

As you have observed, the Home Hospital movement is quite beside the point. It aims merely at providing "medical lodgings", which would probably be used, not only by the well-to-do, but also by the rich; and the question of the doctor's fees would be left untouched.

For the class of persons who are immediately above those for whom the hospitals are intended, I hope provision will be made by means of Provident Hospitals, such as that which Cannon Erskine Clarke is now trying to start at Wandsworth Common.

Both these reforming movements—the Home Hospital and the Provident Hospital—have received the sanction and approval of the profession; but the introduction of "pay wards" into the general hospitals will, I trust, be steadily resisted.—Yours faithfully,

Southborough, December 2nd, 1878. WM. FAIRLIE CLARKE.

THE DENTAL DIPLOMA COMMITTEE AND THE RECENT MEETING OF THE GENERAL MEDICAL COUNCIL.

SIR,—I must ask you to allow me space for a word or two in reference to the above, seeing that my name was prominently introduced into your report of the proceedings. Having for the last twenty years been a supporter of every movement which commended itself to my judgment as calculated to advance the interests of my profession, I was naturally prepared to espouse the objects contemplated in the appointment of the above Committee. My position as one of the honorary secretaries entitles me to speak with authority as to the working of the Committee; and, notwithstanding all the cunning insinuations thrown out from time to time by the editor of the *British Journal of Dental Science*, and notwithstanding all the magniloquent speeches at the General Medical Council, I defy any one to show that the motives or actions of the Dental Diploma Committee have been anything unbecoming either to gentlemen or professional men. The *bona fides* and transparency of our exertions have now been fully substantiated. After a most careful investigation, founded upon a full history of our proceedings, presented to the Council of the Royal College of Surgeons in Ireland by a deputation of which I was a member on Saturday, November 30th, that Council passed the following resolution.

"That, having heard from the deputation of the Dental Diploma Committee a full statement of the origin, objects, and history of their Committee, this Council feel bound to express their conviction that the gentlemen composing the Dental Diploma Committee were actuated throughout by the sole desire to benefit and elevate their profession, and that their united action in this matter was honourable and disinterested. At the same time, the Council regret that, through the wording of letters and circulars issued by the Dental Diploma Committee, and through the zeal of some of its members, an unfounded impression was created that reflected injuriously on the character of this College."—I am, sir, yours faithfully,

RICHARD ROGERS, L.D.S.R.C.S.I.,

Honorary Secretary, Dental Diploma Committee; Member of the Dental Reform Committee; Member of the Odontological Society of Great Britain.

58, Regent Street, Cheltenham, December 4th, 1878.

PUBLIC HEALTH AND POOR-LAW MEDICAL SERVICES.

REPORTS OF MEDICAL OFFICERS OF HEALTH.

BRIDGEND AND COWBRIDGE RURAL.—Dr. Bates sends us a copy of a special report presented by him to his Board, which does not throw a very pleasant light on the sanitary state of the villages in the vale of Glamorgan. At a place called Piccadilly, where a case of typhoid fever had occurred, the cause was distinctly attributable, according to Dr. Bates, to the stagnant drainage in front of the houses of the patient and those of the immediate neighbours, and the using of the water of the River Shaw (well known to be dangerously impure in consequence of its pollution by the sewage of the town of Cowbridge) for drinking and dietetic purposes. In the same report, Dr. Bates speaks of several grave nuisances which require abatement at Llanblethian and Lantwit Major, and of the dangerous condition of the White Well and the unfinished channelling at Cowbridge.

ROCHDALE.—Dr. Mitchell Wilson prefaces his report for the September quarter by apologising for its "very unsatisfactory" character. Three hundred and ninety-eight deaths occurred in the borough during the quarter, equal to an annual rate of 22.4 per 1,000; the average of the same quarter of the four previous years being 332. Ninety-three deaths occurred from zymotic diseases, 27 of these being from diarrhoea. The infantile mortality this year has been alarmingly high; 49 per cent. of the deaths have been in children under five years of age, and 27 per cent. in children under one year. Many of the causes of these latter deaths are clearly allied in their origin, such as those from diarrhoea, tabes, marasmus, and those accompanying teething. A very large excess of these deaths occurred in children who had been deprived of their natural food. Scarletina caused 38 deaths in the quarter. Nearly every fatal case was reported from houses where proper nursing and isolation were quite impossible. Of the deaths, 60 per cent. occurred in back-to-back houses, which are estimated to comprise 30 per cent. of the dwellings in the town.

THE SAFFRON WALDEN BOARD OF GUARDIANS AND MR. BUCK.

The official inquiry on this case took place on November 22nd, and we learn that Mr. Buck proved completely all the statements which he has publicly made; but the guardians, on their side, showed that the order to attend Wright's wife in her confinement in 1874 was given because Wright himself was then ill, and thereby unable to work; that although the relieving officer had given an order for Mr. Buck's attendance on Wright's children in April 1877, the extras ordered by him, and Mr. Buck's further attendance on the children, was not confirmed at the next board meeting, but, the relieving officer having neglected to apprise Mr. Buck of the guardians' decision, that gentleman continued his attendance until the children recovered. To the complaint made by Mr. Buck that his letter remained unanswered, it was admitted by two of the guardians that he had been discourteously treated, and an explanation having been requested of the clerk why he had not made Mr. Buck acquainted with the Board's views, that official replied that his correspondence would be very voluminous if he were to take any notice of the complaints of Poor-law medical officers.

A curious thing happened during the inquiry. Wright made application to the Board for an order for Mr. Buck to attend his wife in labour. The Board, after discussion, decided to let him have one on loan. The poor fellow, it would appear, thereupon decided to engage a midwife; she got into difficulty, and Mr. Buck was called out of church to assist. The relieving officer was also called out to give an order. This he granted. The case being a complicated one, Mr. Buck will receive a fee of £2. Fortunately, in the confusion, the relieving officer neglected to get Wright's signature to the loan, and therefore the Board has no legal hold on him; though it is hardly conceivable that it will be possible to get any money returned from a man whose income, with a wife and eight children to keep, does not exceed £12s. 6d. a week.

PUBLIC HEALTH MEDICAL APPOINTMENTS.

LEIGH, William Watkin, M.R.C.S., appointed Medical Officer of Health for the Llanfabon Sanitary District, *vice* John Leigh, F.R.C.S., resigned.

MEDICAL NEWS.

APOTHECARIES' HALL.—The following gentlemen passed their examination in the science and practice of medicine, and received certificates to practise, on Thursday, November 28th, 1878.

Collier, Mark Percell Mayo, Turnham Green
Gimlette, Thomas Desmond, Merton Road, Southsea

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

Gilkes, Malin D'Oyley, Guy's Hospital
King, Ernest Edward, Middlesex Hospital
Rigby, John, Guy's Hospital
Seymour, John Rusby, London Hospital
Shaw, William Wright, St. Bartholomew's Hospital
Whickham, Walter, St. Bartholomew's Hospital

KING AND QUEEN'S COLLEGE OF PHYSICIANS IN IRELAND.—At the ordinary monthly examinations for the Licences of the College, held on Monday, Tuesday, Wednesday, and Thursday, November 4th, 5th, 6th, and 7th, the following candidates were successful.—For the Licence to practise Medicine.

Baile, Thomas William	Mackie, William James
Bell, Thomas Vesey	Reeves, Francis Casement
Corr, Richard James	Twiss, George Edward
Fennell, David	

For the Licence to practise Midwifery.

Mackie, William James	Reeves, Francis Casement
Magner, Edward	Twiss, George Edward

MEDICAL VACANCIES.

The following vacancies are announced:—

BIRMINGHAM AND MIDLAND EYE HOSPITAL.—House-Surgeon. Salary, £100 per annum, with apartments, board, and attendance. Applications on or before the 10th instant.

CARLISLE DISPENSARY.—Junior House-Surgeon. Salary, £50 per annum, with apartments, coals, and gas.

CELEBRIDGE UNION.—Medical Officer for Kilcock Dispensary District. Salary, £115 per annum, including £15 as Sanitary Officer, but exclusive of Vaccination and Registration Fees. Election will take place on the 13th instant.

CORNWALL COUNTY ASYLUM.—Assistant Medical Officer. Salary to commence at £100 per annum. Applications on or before the 18th instant.

CUMBERLAND INFIRMARY.—Assistant House Surgeon. Salary, £60 per annum, with board, lodging, and washing. Applications on or before January 1st, 1879.

GLOUCESTER COUNTY ASYLUM.—Senior Assistant Medical Officer. Salary, £150 per annum.—Junior Assistant Medical Officer. Salary, £100 per annum, with board and lodging. Applications on or before the 18th instant.

HULL GENERAL INFIRMARY.—Honorary Physician.

SLIGO DISTRICT LUNATIC ASYLUM.—Assistant Medical Officer. Must be unmarried, act as apothecary, be doubly qualified, possess a diploma in midwifery, and have at least two years' medical practice. Salary, £100 per annum and rations, or £50 in lieu of rations, with furnished apartments, fuel, light, etc. Election in December.

ST. BARTHOLOMEW'S HOSPITAL—Casualty Physician. Applications on or before the 16th instant.
WANDSWORTH AND CLAPHAM UNION—Medical Officer. Salary, £40 per annum, with fees. Applications on or before the 16th instant.
YORK DISPENSARY—Resident Medical Officer. Salary, £130 per annum, with furnished apartments, coals, and gas. Applications on or before the 12th instant.

MEDICAL APPOINTMENTS.

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

*BARR, James, M.B., appointed Physician to the Stanley Hospital, Liverpool.
 *BRADSHAW, J. D., M.B., appointed Pathological Registrar to the Manchester Royal Infirmary.
 CUNDELL, G. R., M.R.C.S., appointed Medical Officer to the Royal Botanic Gardens, Kew.
 FIRTH, Charles, M.B., elected Assistant-Surgeon to the Norfolk and Norwich Eye Infirmary, *vice* H. S. Robinson, M.R.C.S., promoted to the surgery.
 GRAY, John H., M.B., appointed Resident Medical Officer to the Wandsworth Common Provident Dispensary.
 HILL, T. Wood, L.R.C.P.Ed., appointed Surgeon to the Chelsea, Brompton, and Belgrave Dispensary.
 HUGHES, William H., M.R.C.S., appointed Honorary Surgeon to the Ashton-under-Lyne District Infirmary.
 *TORRANCE, R., L.R.C.S.Ed., appointed Honorary Medical Officer to the Throat and Ear Hospital, Newcastle-upon-Tyne.
 WHITE, Percy H., M.B., appointed Assistant-Surgeon to the City Provident Dispensary and Surgical Appliance Association.

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.

ADAMS.—On November 30th, at Ripplingale, Lincolnshire, the wife of George Norris Adams, M.D., of a daughter.

MARRIAGE.

DAVISON—TAYLOR.—On November 28th, at the Parish Church, Leeds, by the Rev. F. J. Wood, assisted by the Rev. E. W. Hobson, James Edgar Davison, M.D., Carlton House, Sharrow, Sheffield, to Sarah Lucy, third daughter of the late Samuel Taylor, Hyde Terrace, Leeds.

DEATHS.

*LITTLETON, Thomas, M.B., at Plymouth, aged 56, on December 2nd.
 MOFFAT.—At Graham's Road, Falkirk, N.B., on December 1st, Annie K. Gay, the wife of Robert Moffat, M.D.
 POOLEY.—On November 27th, at Townhead, Rochdale, Charlotte Louisa, youngest daughter of Joseph Wright, Esq., Eden Vale, Dublin, and beloved wife of *Richard C. Mason Pooley, L.K.Q.C.P.I., L.R.C.S.I., etc.
 SHAW, Henry Edwin Farnell, M.R.C.S.Eng., Sutton Coldfield, Warwickshire, aged 68, on December 4th.

DR. MACKESY of Waterford has been elected Mayor of that town for the coming year.

ST. THOMAS'S HOSPITAL.—The Entrance Science Scholarship of £40 has been awarded to Mr. W. Hull of Acton.

MR. WILLIAM HUGH HUGHES has been appointed certifying surgeon under the Factories Act for the districts of Ashton-under-Lyne and Dukinfield.

PRESENTATION TO DR. HEATON.—The Council of the Leeds Medical School have presented to Dr. Heaton a handsome silver salver, on the occasion of his resignation, and as an acknowledgment of his services as treasurer for many years.

SOCIETY OF STUDENTS OF MEDICINE.—At a meeting of this Society, held on November 28th, in London, it was unanimously decided that a Branch of the Society should be established. The following office-bearers were elected: *Vice-President*: Mr. Thomas Dutton, L.R.C.P.; *Honorary Secretary and Treasurer*: Mr. James Gilbert, Charing Cross Hospital. Gentlemen wishing to become members are requested to apply to Mr. Gilbert, Charing Cross Hospital, Strand, from whom all particulars can be obtained. All gentlemen who are members of any of the Provincial Branches of the Society, and are now residing in London, and who may wish to join the London Branch, are requested to inform Mr. Gilbert. The next meeting of the Society will take place on December 12th, at 8 P.M.

POISONING BY INFANTS' MIXTURE.—The Manchester city coroner has held an inquest on the body of Richard Goodier, aged five weeks. The mother, Mary Jane Goodier, said the child, which was naturally delicate, had been ill, and she went to a druggist, asked for Infants' Preservative, and obtained some medicine called "Infants' Friend". She gave the child eight drops of the medicine at night and again two nights afterwards, shortly after which it went to sleep. It never woke again, although Dr. Woodcock and Dr. Smith saw the infant, and tried to rouse it; but it continued in a comatose condition until its death. Dr. Smith stated that he had no doubt death had resulted from opium

poisoning. Alfred Walker, druggist's assistant, said that Infants' Preservative was a patent medicine. Not more than four drops of the "Infants' Friend" should be given to a baby under four weeks of age, but an ordinary child would not be injured by eight drops. It was a soothing medicine for restless children, and was not so strong as "cordial" or "sleeping-stuff". Deceased might have been weak, and have a special tendency to be overcome. The jury returned a verdict of "Died from the effects of an overdose of a narcotic poison called 'Infants' Friend', given as medicine".

BELFAST ROYAL HOSPITAL.—The annual meeting of the subscribers to this institution was held last Monday, presided over by the Mayor of Belfast. From the annual report, we learn that the number of students in attendance on the hospital for clinical instruction has been 186 during the winter session and 128 during the summer session, being an increase on the preceding year of 62. The prosperous state of the Medical School is a subject of congratulation, and, the hospital being the principal institution for admission of accidents in addition to other classes of disease in a large manufacturing town like Belfast, ample opportunities are afforded for learning medical and surgical practice, and for understanding the best method of treatment in cases of emergency. There was an increase of intern patients during the past year of from 1,737 to 1,818, while the number of extern patients has largely increased. The collections for the year show an increase of about £200 over that of last year, also the sums obtained from paying patients; but a considerable falling off occurred in the donations and bequests, and the subscriptions from the working classes, who, as deriving most benefit from the institution, should rather increase their contributions than take the contrary course. The Convalescent Home in connection with the hospital has been furnished and occupied by patients; but £1,000 is still required to place the home entirely out of debt. Hospital Sunday last year produced £562, against £528 the preceding year. During the year ended August 31st, 1,720 new cases were admitted to the wards, which, with 98 cases remaining from the previous year, make a total of 1,818; of these, 112 died, 15 being moribund on admission. One hundred and eighty-eight surgical operations were performed with a mortality of 9, equal to 4.7 per cent. The average mortality for both medical and surgical cases amounted to 6.1 per cent.

LONDON HOSPITAL MEDICAL CLUB.—A social meeting of this Club was held on the evening of November 28th, at the Grosvenor Gallery Restaurant. Mr. Corner of Poplar occupied the chair. Thirty-seven gentlemen sat down to dinner. Among the members present were: Mr. Curling, F.R.S.; Dr. Langdon Down; Mr. John Couper; Mr. S. Cartwright; Dr. Barnes; Mr. Streatfield; Mr. Liddle of Bow; and several of the staff of the hospital. Sir Joseph Fayrer, K.C.S.I., was one of the guests, and responded for "the Army, Navy, and Reserved Forces". Mr. Curling introduced the toast of "The Chairman", a former pupil and house-surgeon, in very complimentary terms. The toast of "The London Hospital Medical Club", given by Mr. Liddle, was acknowledged by Dr. Christie of Ealing and Mr. Osborne Johnson of Basingham, Newark. Dr. Tidy toasted "The Visitors" and Dr. Barnes "The Secretary" (Mr. Rivington). The London Hospital Medical Club was founded in 1838. Its objects were exclusively convivial, and its average number of members was about fifty. Two dinners took place every year. The subscription was fixed originally at two guineas. In 1851, one dinner was dropped, and it was arranged that the subscription should not exceed twenty-five shillings. In 1867, the London Hospital Medical College Dinner or Biennial Festival was instituted by the Medical Council of the School, independently of the Club, which was then an exclusive body, and did not fulfil the important end of acting as a bond of union between the great body of the *alumni*. In 1870, the meetings of the Club and the Biennial Festival were alternated. Last year, the Medical Club was entirely reorganised, for the purpose of encouraging as many London Hospital men to join its ranks as possible. A subscription of five shillings a year was instituted, and it was decided that there should be two dinners each year, one in May and the other in November, the latter meeting not to take place in the years of the biennial festivals. Under the new rules, the Club has already more than doubled its number of members (now one hundred and twelve), and the funds in hand have reached £120. This money will be invested, and, when larger funds have accumulated, the proceeds will be devoted to some object of general utility connected with the interests of the *alumni* of the London Hospital Medical School. It is felt by the members that the Club should serve a higher purpose than mere conviviality, and that the strongest bond of union amongst the *alumni* of a hospital must ever be combination for some beneficial end. We have much pleasure in commending the London Hospital Medical Club to the favourable notice of former students of the School.

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, 1.30 P.M.—London, 2 P.M.—Royal London Ophthalmic, 11 A.M.—Great Northern, 2 P.M.—Samaritan Free Hospital for Women and Children, 2.30 P.M.—Cancer Hospital, Brompton, 3 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—St. Thomas's, 1.30 P.M.—St. Peter's, 2 P.M.
THURSDAY	St. George's, 1 P.M.—Central London Ophthalmic, 1 P.M.—Charing Cross, 2 P.M.—Royal London Ophthalmic, 11 P.M.—Hospital for Diseases of the Throat, 2 P.M.—Royal Westminster Ophthalmic, 1.30 P.M.—Hospital for Women, 2 P.M.—London, 2 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.—St. Thomas's (Ophthalmic Department), 2 P.M.
SATURDAY	St. Bartholomew's, 1.30 P.M.—King's College, 1 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.—London, 2 P.M.

MEETINGS OF SOCIETIES DURING THE NEXT WEEK.

MONDAY ..	Medical Society of London, 8.30 P.M. Microscopical Evening. Dr. Tilbury Fox will give illustrations of—1. The Histology of Psoriasis; 2. The Histology of Dysidrosis; 3. The Histology of Molluscum Contagiosum; 4. The Histology of Disseminated Follicular Lupus (a new clinical condition).
TUESDAY ..	Royal Medical and Chirurgical Society. 8 P.M.: Ballot. 8.30 P.M.: Mr. Barwell, "Three Cases of Distal Deligation of the Carotid and Subclavian Arteries for Innominate Aneurism." Mr. Dalby, "On Disease of the Mastoid Bone".
WEDNESDAY ..	Hunterian Society. 7.30 P.M.: Council Meeting. 8 P.M.: Dr. Sutton will bring forward a "Case of Hæmatinuria," and "Cases illustrative of Disease resulting from an Overworked Brain." Mr. Rivington will show a "Case of Excision of the Wrist".
FRIDAY ..	Clinical Society of London, 8.30 P.M. Mr. Hutchinson, "Two Cases of Popliteal Aneurism treated by Esmarch's Bandage." Dr. Whipple, "Case of Perforation of the Appendix Cæci." Dr. Cayley and Mr. Lawson, "Intestinal Obstruction: Gastro-enterotomy: Recovery." Dr. Crocker, "Case of Scleroderma" (living specimen).

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.

COMMUNICATIONS respecting editorial matters, should be addressed to the Editor, 161, Strand, London; those concerning business matters, non-delivery of the *JOURNAL*, etc., should be addressed to the General Manager, at the Office, 161, Strand, London.

WE CANNOT UNDERTAKE TO RETURN MANUSCRIPTS NOT USED.

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

WOLSTAN FLEETWOOD DIXIE, Esq., M.D., late of the Pacific Steam Navigation Company, is urgently requested to communicate at once with A. B., care of Mr. Crabtree, printer, Keighley, Yorkshire.

SAYRE'S TREATMENT OF SPINAL CURVATURE.

SIR,—Can you refer me to a practical account of Sayre's method of treating spinal curvature for one's guidance in treating a patient at her own cottage.—Yours, etc., November 29th, 1878. A. L.

* Dr. Sayre has published his own account in a work entitled *Spinal Disease and Spinal Curvature: their Treatment by Suspension, and the Use of Plaster-of-Paris Bandage*. By Lewis A. Sayre, M.D., of New York, Professor of Orthopaedic Surgery in Bellevue Hospital Medical College, New York, etc. With 21 photographs and numerous woodcuts. Crown 8vo. 10s. 6d. It is published by Messrs. Smith, Elder, and Co.

PREPARATIONS OF PHOSPHORUS.

SIR,—“A Member” will obtain the information he requires about phosphorus in the formulae issued by Messrs. John Richardson and Co., Leicester. These give the proportions and combinations. I consider the preparations reliable and satisfactory.—Yours faithfully, M.D.

* The phosphorus combinations in Richardson's case of phosphorus sugar-coated pills are extremely good, and the pills themselves very nicely made and coated.

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, 161, Strand, London, and not to the Editor.

SOCIAL ESTIMATION OF THE PROFESSION.

WE have received several communications on this subject. They shall appear in next week's *JOURNAL*.

FILTRATION OF DRINKING-WATER.

SIR,—With reference to Mr. J. W. Nishigama's letter in the *JOURNAL* of November 23rd, I learn from it that he makes the following objections to my paper on “Filtration of Potable Water”, and I beg leave to reply to each.

Objection 1. He states, “The action of spongy iron is not different from that of charcoal.” *Reply:* How does he prove this? The effect is really produced in a different manner. Spongy iron yields nothing to water. Charcoal yields phosphates, which are objectionable.

Objection 2. “Who would think of keeping water for three weeks?” *Reply:* True; but one wants to be certain that it will not be rendered impure if so kept; also, that if stored, the water shall remain fit for drinking. Sometimes only a few days are required for the water to become bad.

Objection 3. “With regard to the lasting quality of the animal charcoal compared with spongy iron, the former is likely to last quite as long as the latter—if anything, longer.” *Reply:* This is totally at variance with the results I obtained. I adhere to my statement that spongy iron is the more lasting.

Objection 4. “Mr. Notter was fortunate in finding the low form of organic life in the water filtered through animal charcoal, as I have never been able to obtain any.” *Reply:* I repeat they are so developed after filtration through animal charcoal, but not after spongy iron. I beg to refer Mr. Nishigama to the sixth report of the Rivers Pollution Commissioners. They state: “The property which animal charcoal possesses in a high degree of favouring the growth of low forms of organised life is a serious drawback to its use as a filtering machine for potable waters.”

Objection 5. “Spongy iron renders water unpalatable from the taste of iron.” *Reply:* Mr. Nishigama seems ignorant of the construction of spongy iron filters. No iron is brought away in the water.—I remain, sir, your obedient servant, Netley, Nov. 26th, 1878. J. LANE NOTTER, F.C.S.

SIR,—Will you kindly advise me in the following case? A medical man is attending his own wife, but the labour being a complicated one, he sends for a brother practitioner some few miles off for assistance, who, at once, I need scarcely say, attends. He calls again to see his patient, at request. Can he offer a fee for his attendance? or would it be better to acknowledge his kindness by a present?—I am, sir, your obedient servant, ETHELLE.

* A fee would, no doubt, be declined: the latter course is the more delicate.

MR. WALTER LATTEY.—We do not doubt that Mr. Lattey's communication will receive attention from the Council to whom it is addressed: to publish it meanwhile would, we fear, inflict injury, which it is desirable to avoid. If the evil should remain unredressed after appeal to that body, we shall be prepared to discuss the subject publicly. At present, we think it more useful to abstain from doing so.

ANÆSTHESIA IN ACCOUCHEMENTS.

SIR,—I am engaged to attend a lady in her confinement next month. She insists upon having chloroform administered, and states that her husband or her nurse can do so. She objects to calling in a second medical practitioner, as I advised her. Do I make myself legally responsible, in case of accident, if I concur with her request? I have never heard of a similar case, and should be obliged if you would kindly express an opinion as to the course I should pursue.—I am, dear sir, yours faithfully, DILEMMA.

ERRATA.—In the *JOURNAL* of November 30th, page 795, column 2, under the heading “Scarlatina and Surgery”, for the last word in the first paragraph—“hypothesis”—read “synthesis”.—At page 797, column 2, line 32, for “three-drachm doses” read “half-drachm doses”; and at lines 45 and 56, for “four ounces” read “four drachms”.—At page 814, column 1, line 1, for “Irish” read “Dublin”; and line 3, for “20.1” read “20.1”.—At page 817, column 1, line 27, for “resinous” read “urinous”.

THE JUDD STREET DISPENSARY.

SIR.—The thanks of the profession are due to you for openly denouncing the proceedings of the medical officers of this dispensary. Their circulars say that the dispensary is only for “persons of small means”; but why do they send them broadcast to so many shopkeepers? For I have seen the circulars on the counters of respectable tradesmen in the neighbourhood. If such proceedings be not checked, the next generation of young medical men will have great difficulty in making a start in the struggle for life, unless they already possess the means to do so.—Yours, etc., AN OLD SUBSCRIBER.

AN “EX-DRESSER” should give his name, and state precisely what he means and to what facts he refers, as the basis of the vague opinions which he expresses.

TERMS OF ART.

SIR,—The *cacothès scribendi*, the rage—I might almost say the mania—for using long-sounding words, as Horace would write *susquipedalia*, six footers, *sive Graecæ, sive Latina*, or even *Græco-Latina*, may, to the younger members of our profession, give some *déjà*; as, for example, laparo-elytrotomy, cephalotripsy, *cum multis alis*, in the last number of the *BRITISH MEDICAL JOURNAL*; but to those of us whose memory is failing and whose sight is growing dim, the constant recurrence to Schrevelius or Adam Littleton is but a wearisome task to all who are fast verging into the serene and yellow leaf, as is the case with yours obediently, JOHN WATSON, L.S.A. 1824, M.R.C.S.L. 1825.

* Could Mr. Watson suggest any shorter and equally precise equivalents? The words have the advantage of being internationally current in science, and appear to us to be correct and necessary. But no doubt those who use them are open to suggestion.

In reply to a military correspondent (Reading), we may say that it is impossible to publish more than a proportion of the letters addressed to us by army medical officers on the subject of the recent Warrant, and we avoid acknowledging them by name, in order to save such correspondents from any possible official annoyance. But all such correspondence receives our most careful consideration, and it greatly assists us in arriving at the opinion entertained by different classes and individual officers in the department. Of this knowledge, we endeavour to make the best use in the interests of the departments and of the service.

I think, that a bruise in which the skin is uninjured may also induce (?) an attack of scarlet fever.—I am, etc.,
 GEORGE RICHMOND MOORE, M.R.C.S.
 Hartlepool, November 15th, 1878.

HOSPITAL PRACTICE VERSUS APPRENTICESHIP.

MR. I cannot help thinking that Mr. Leigh takes far too disparaging a view of hospital practice, and I am not surprised if the knowledge he obtained during his attendance at a hospital was meagre in the extreme. He draws a picture of hospital practice in its pessimist form, and one of apprenticeship in its brightest, and then compares the two, with a result that no one would be surprised at. Now, I am one who believes in the substitution of hospital practice for the old form of apprenticeship; and, as an advocate of the former, I should like, with your permission, to point out one or two of what I conceive to be its faults.

1. Students are too apt to think that, after they have gone their round with the physician or surgeon, they have learned all that is to be learned in the wards for that day. The student should be encouraged to visit the wards at all reasonable hours, to examine cases alone and form his own opinion, and then compare them with the teacher when next he goes his round, noting where they agree and disagree, and the reasons for so doing. By this means he will find out where he is at fault, and so avoid the same error next time, and he will also have the satisfaction of having his opinion corroborated when he is right.

2. There is a very natural tendency among students to follow a particular teacher on account of his reputation as a physician or surgeon, leaving other men with only a few followers. This, I think, is a great mistake, as it frequently happens that these minor lights are more capable of imparting their knowledge than those of greater magnitude. A good plan would be for the number of students following any one teacher to be limited to the proportion of students to teachers. This would prevent the crowding to a great extent. The first year of my hospital practice I spent following the most popular surgeon; but I found there was such crowding that it was frequently impossible to get near enough to hear the remarks made upon a case, and still more difficult to get near enough to examine it. I always after that year chose a man who had few followers, and with a beneficial result.

3. In all hospitals, as far as I am aware, there are no means of insisting upon the regular attendance of students in the wards. If every teacher had a list of the names of those students who were apportioned off to him, and this list were called over two or three times a week—the certificate for attendance at hospitals not depending merely upon payment of fee, but upon number of answers to the roll call, as in the lecture-room—students would be more regular.

Let these faults be mended, and then I have no hesitation in saying that the knowledge obtained in a given time by a student in the hospital will be greater than that obtained by an apprentice (supposing them to be of equal mental capacity and assiduity), whose experience at the time of arrival at the medical school generally consists of dispensing for some four years for one individual, and getting into one groove, attendance on a few chronic pauper cases, and now and then a dim outline of an extraordinary case.

I should like to say more on this matter, but I fear I am pressing upon your time and space.—I am, yours truly,
 A YOUNG SURGEON.

TREATMENT OF THREATENED DEATH FROM CHLOROFORM.

SIR,—As death following the administration of chloroform usually (from the recorded *post mortem* appearances) takes place from failure of the heart's action, with ventricular diastole, it becomes a question whether the action of digitalis on the heart, either by the subcutaneous injection of digitaline, as soon as the slightest failure of the pulse appears, or by a dose of tincture of digitalis, given before the chloroform is administered, might not be effectual in warding off the failure of the heart's action. Dr. Fothergill has shown that, when the frog's heart has been brought to a complete standstill in diastole by a poisonous dose of aconite, and digitalis administered, the distended ventricle gradually recovers itself, and returns to its usual condition as to contraction and dilatation. There is no therapeutic effect more apparent than that digitalis acts on the human heart in the same way as it does on that of the frog. It remains, however, for experiment to determine whether digitalis, injected as digitaline, would act sufficiently speedily to be of service in a case of chloroform poisoning. A few trials on dogs or cats would at once show the probability or the reverse of digitalis as a remedial agent being of service to humanity in such extremes.

Our tender-hearted legislators have decreed that none but those licensed shall so experiment, and hence I am unable to make the few chloroformings necessary to settle the point. The trials would be merely to see whether, after chloroform had been administered to an extent to stop the heart's action, any and how large a dose of digitaline administered hypodermically would or would not restore it. It might be necessary to repeat the process several times to be sure that the result or results are the effect of the digitalis and not coincidences. Careful comparative experiments, with and without digitalis administered before the chloroform, would also indicate the power of the drug to antagonise the act on of chloroform. Even without these experiments, if I had a patient threatened with dissolution from chloroform inhalation, I should not hesitate to try injection of about one-fiftieth or one-sixtieth of a grain of digitaline, in addition to the other remedies which have proved of more or less avail.—Yours faithfully,
 T. M. LOWNES, M.D.

PRESCRIBING DRUGGISTS.

SIR,—I beg to draw your attention to the enclosed, the two latter of which are appearing as advertisements in the *Daily Chronicle* of Newcastle-upon-Tyne nearly daily. Such conduct is surely reprehensible, Mr. Bell being a regularly qualified practitioner.—Your faithfully,
 ASSOCIATE.

"*Chemists and Druggists*."—SIR,—I have read with pleasure in your issue of today your valuable and appropriate remarks on a subject touching the interests of an intelligent and in most cases highly educated body of tradesmen. My sole object in writing this letter is the fact that I am of opinion that the revival of the obsolete Act of George III for the purpose of persecution was unjustifiable and unnecessary. Why should a responsible and conscientious chemist (who, in most cases, is thoroughly conversant with the nature and composition of drugs, their administration and effects) not be allowed, when he is applied to, to recommend a very trifling remedy for the throat, or be permitted to remove a little wax from the ear, and afterwards prescribe a glycerine lotion, or, as you say, recommend a common place remedy for a cold on the chest, without the risk and annoyance of being hauled before a public court, and possibly landed in a penalty of £20 and costs? We are aware that there is an abundance of philanthropy in the medical profession, and public institutions are springing up in every hole and corner of the town; but the necessitous public generally either do not care for the advice tendered, or, perhaps, more correctly speaking, wish to be thoroughly independent of such charitable institutions. Others not able to pay for a doctor's prescription, or finding that their case does not demand expensive treatment, seek for a little advice from their family chemist. I cannot but think that the Act is especially harsh upon them

when it is remembered that there are hundreds of unqualified assistants—many of whom are old men and others married—who never intend to qualify, practising under the wing of qualified practitioners, living at great distances from the residences of their principals, and attending poor persons suffering from the most critical diseases, prescribing for them, and signing their certificates in case of death. My name at one time appeared on a committee which has for its object the prevention of chemists from prescribing, but after carefully considering the above facts, I withdrew my name and discontinued my subscription.—I am, etc., ANTHONY BELL.—Eldon Square, November 12th, 1878.

"We understand that Dr. Bell of Newcastle has in the press a work on *Pulmonary Consumption*, a subject to which he has given special consideration for a number of years."

"6, Eldon Square.—Dr. Bell is leaving this house for more extensive and commodious premises in the Square."

WE are indebted to correspondents for the following periodicals, containing news, reports, and other matters of medical interest:—The Western Morning News; The Cornwall Gazette; The Freeman's Journal; The Somerset and Wilts Journal; The Somersetshire Advertiser; The Eastern Morning News; The Irish Times; The Chicago Times; The Manchester Guardian; The Berkshire Chronicle; The Glasgow Herald; The Oswestry Advertiser; The Edinburgh Daily Courant; The Middlesex County Times; The Liverpool Evening Albion; The Daily Courier; The Glasgow Evening News; The Liverpool Mercury; The Weymouth Telegram; The Yorkshire Post; The Coventry Herald; The Wisbech Advertiser; The West Briton and Cornwall Advertiser; The League Journal; The Liverpool Daily Post; The Newport and Drayton Advertiser; The Exeter and Plymouth Gazette; The Kelso Chronicle; The Fifehire Herald; The Merthyr Express; The Carnarvon and Denbigh Herald; The Surrey Advertiser; The Stroud News; The Scotsman; The Manchester Courier; The West Middlesex Advertiser; The Western Mail; The Essex Advertiser; The Melbourne Argus; The Midland Free Press; The Cork Constitution; The East London Observer; The Leeds Mercury; The United Service Gazette; The Citizen; The Gloucestershire Standard; The Southport Visitor; The Wrexham Advertiser; The Edinburgh Courant; The Lincolnshire Express; The Hull Advertiser; Saunders's Irish Daily News; The Daily Express; 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. Marion Sims, Paris; Mr. T. Spencer Wells, London; Dr. T. Clifford Allbutt, Leeds; Dr. Arthur W. Fox, Bath; Mr. Howard Marsh, London; Dr. R. Farquharson, London; Mr. T. Holmes, London; Mr. E. T. Davies, Liverpool; Mr. R. L. Bayley, Stourbridge; Dr. Birkbeck Nevins, Liverpool; Mr. A. E. Oldham, West Hartlepool; Dr. Kinkead, Galway; Dr. Malins, Birmingham; Dr. Greenfield, London; Dr. Bradley, London; Dr. Gilbert, Connecticut, U.S.A.; Dr. Sawyer, Birmingham; Mr. Burdett, London; Mr. W. Lewis, Cardiff; Dr. Whalley, Bradford; Dr. Henderson, Helensburgh; Mr. J. Macnab, Stirling; Mr. W. A. Hunt, Yeovil; Mr. T. Leeds, Sheffield; Mr. Bridgman, Berkeley; Mr. Murrell, London; Mr. G. Harvey, Wicksworth; Dr. L. S. Forbes Winslow, London; Dr. Mackey, Brighton; Dr. W. F. Coles, Croydon; Mr. R. Goodwin, Ashbourne; Mr. R. Clement Lucas, London; Our Paris Correspondent; Our Berlin Correspondent; Mr. Teale, Leeds; Our Birmingham Correspondent; Mr. C. Orton, Newcastle-under-Lyme; Mr. C. F. Dennet, Bad Wildungen; A Member; Mr. Richard Davy, London; M.R.C.S. Eng.; Mr. J. White, Wigan; Dr. Martin, Boston; Mr. E. C. Bousfield, Tewkesbury; Mr. J. A. Hedges, Leighton Buzzard; Mr. Job Watson, Hemingford Grey; Mr. L. Armstrong, Newton Abbot; Mr. H. Wyld, Hadfield; Mr. W. J. Marsh, Truro; Dr. Fairlie Clarke, Southborough; Dr. C. N. Gwynne, Sheffield; Mr. J. G. Hyndman, Cincinnati; Dr. Cheadle, London; Our Aberdeen Correspondent; Dr. Heaton, Leeds; Mr. O'Duffy, Dublin; Dr. S. Felce, London; Dr. Leared, London; Mr. J. H. Morgan, London; Mr. Knapton, Shirley; Mr. T. Jones, Manchester; Our Dublin Correspondent; Our Glasgow Correspondent; Mr. R. Rogers, Cheltenham; A Physician, Oxford; Dr. Bristowe, London; Dr. Tidy, London; Dr. J. S. Walker, Hanley; The Registrar of the University of London; Mr. Torrance, Newcastle-on-Tyne; An Ex-Dresser of Mr. Lister's; Mr. Pownall, Chiltoncum-Hardy; Dr. Mackey, Brighton; A Would-be Bicyclist; Mr. Alexander Ford, Harrogate; M.R.C.S. Eng.; Dr. Mushet, New Brighton; Dr. C. A. Ewald, Berlin; Mr. J. H. Craigie, London; Mr. S. Wilkinson, Leeds; Dr. G. W. Thomson, Haywood; Dr. A. Stephenson, Nottingham; Dr. E. Waters, Chester; Old Soldier; Dr. H. G. Rawdon, Liverpool; etc.

BOOKS, ETC., RECEIVED.

The Diseases of Women. By a Physician. London: Cassell, Petter, and Galpin. 1878.
 A Handbook of Nursing for the Home and the Hospital. By C. J. Wood. London: Cassell, Petter, and Galpin. 1878.
 A Treatise on Surgery in its Principle and Practice. By T. Holmes, M.A. London: Smith, Elder, and Co. 1878.
 Total Abstinence: A Course of Addresses. By Benjamin Ward Richardson, M.D. London: Macmillan and Co. 1878.
 Elements of Comparative Anatomy. By Carl Gegenbaur. Translated by F. Jeffrey Bell, B.A. London: Macmillan and Co. 1878.
 On Artificial Disinfection as a means of preventing the spread of Infectious Diseases. By the Rev. J. H. Timms. London: J. and A. Churchill. 1878.
 On the Treatment of Pulmonary Consumption by Hygiene, Climate, and Medicine. By J. Henry Bennet, M.D. Third Edition. London: J. and A. Churchill. 1878.
 Cyclopaedia of the Practice of Medicine. By Dr. H. von Ziemssen. Vol. iii. London: Sampson Low, Searle, and Rivington. 1878.