

first in importance stands their diet. I believe that for the first twenty-four, even thirty-six or forty-eight hours, absolutely *no* food should be given by the mouth—nothing but ice to relieve the thirst, which is inevitable and urgent. If the patient be low, or if sickness continue, then nutrient enemata are invaluable; and here I would remark that a mistake is often made in injecting too much. An ounce and a half or two ounces every two hours is usually sufficient; more is apt to be rejected. The best fluid to inject is strong beef-tea, with or without brandy, or milk. Eggs, I believe, do more harm than good, owing to their proneness to decomposition there; for I need not point out that no true “digestion” takes place in the rectum.

Of drugs, morphia is our sheet-anchor; and in the hypodermic injection we have a rapid, certain, easily controllable, and altogether invaluable method of administration.

Alcohol is usually necessary in the form of brandy or champagne; but one case recovered without alcohol, another without morphia, and a third without either. Calomel and opium will often allay sickness, and this is the greatest foe we have to contend with. Of the ten cases, only *one* was never sick. And here I would draw attention to the two kinds of sickness met with, the early and the late, the unimportant and the serious; that caused by the anæsthetic, following the operation, and rarely lasting twelve hours; and that coming on about the end of the first day, or on the second, and the later its onset the more dangerous is it.

Of the total number of cases, two died and eight recovered; and it is noticeable that the thin and wiry patients made a better fight than the stout and flabby ones.

With regard to the operation itself, the treatment of the pedicle is of primary importance. Of the ten cases, the steel clamp was used in nine, of which two died (but the fatal termination was not, probably, in either case, due to the presence of the clamp). The silk ligature was used in two cases (being returned into the abdomen), both of which recovered. In every case, the hæmorrhage was arrested by catgut ligatures. In one case only was drainage of the peritoneal cavity tried. This patient died on the fourth day of peritonitis; and it was noticeable that the tube did not answer the purpose for which it was introduced, for less than an ounce of fluid came through it during life, while the *post mortem* examination revealed some pints of fluid in the abdomen. That it contributed towards the rapidly fatal termination may admit of argument; but to my mind it seems to be rather a dangerous proceeding. The other fatal case also died of peritonitis, but under very different circumstances. She was going on most favourably for nine days; the clamp was then cut away, and seventeen hours afterwards she was seized with sudden peritoneal pain. Probably some recent adhesion had given way in the wound, and the whole train of inflammation lighted up; whether dependent on the removal of the clamp may be open to doubt, but the sequence was certainly striking. In five other successful cases, the clamp was removed on the seventh, ninth, ninth, twelfth, and eighteenth day; in two others, it was allowed to come away on the twelfth and sixteenth day. I do not think any rule can be laid down for the time of removal of the clamp; but I think we may take a hint from the above fatal case, and not be too anxious to remove it early, unless it is producing undue pressure on the wound, or obstructing the discharge from around the pedicle.

REPORTS AND ANALYSES

AND

DESCRIPTIONS OF NEW INVENTIONS

IN MEDICINE, SURGERY, DIETETICS, AND THE
ALLIED SCIENCES.

THE MATLOCK INVALID COUCH AND MATLOCK BED-REST.

THESE excellent contrivances promise to add largely to the comfort of the acutely sick, the invalid, and the convalescent. They include an adaptation of the Excelsior flattened spiral springs, which long experience has shown to be the perfection of comfort and ease when applied to beds; and thus applied, in suitable framework, they form an invalid-couch which is unexceptionable as an article of furniture, whether as couch or settee, and which affords to the invalid a seat or lounge adjustable at a variety of angles and in a multiplicity of positions—light, easy, yielding, but perfectly elastic. As a bed-rest, it has similar advantages; and, whether for hospital use or in private houses, it is easy to predict an enduring popularity for these inventions. The Matlock Invalid Couch and the Matlock Bed-rest are manufactured by Chorlton and Dugdale, 19, Blackfriars Street, Manchester, who are the proprietors of the Excelsior spring mattress.

SELECTIONS FROM JOURNALS.

GYNÆCOLOGY.

OOPHORECTOMY IN A CASE OF CONGENITAL VAGINAL DEFECT.—At the eighth Congress of German Surgeons, held in Berlin last April, Professor von Langenbeck exhibited a woman, aged 23, on whom he had performed Battey's operation. She had been married three years. The catamenia commenced at the age of 14; and, as was afterwards discovered, the discharge took place *per urethram*, the vagina being entirely absent. The discharge was scanty, but was always attended with severe pain. Coitus was also effected by the urethra. As the menstrual troubles had lately increased to such an extent as to produce epileptiform attacks, Dr. von Langenbeck decided on extirpating the right ovary by Battey's method. He had ascertained by careful examination that the left ovary was wanting, and that the uterus was rudimentary. An incision about two inches long was made in the flank; the pedicle of the ovary was tied with catgut, and sewn to the abdominal wound. The process of healing was uninterrupted; the ligatured remains of the pedicle fell off on the fourteenth day. Menstruation took place on the fifth day after the operation, although one ovary was removed, and the absence of the other had been ascertained both before and during the operation. Dr. von Langenbeck expressed his satisfaction with the result obtained, and recommended the proceeding for adoption in similar cases.—*Wiener Medizin. Wochenschrift*.

LACERATION OF THE CERVIX UTERI.—Dr. Spiegelberg, who has had occasion to operate in ten cases of this affection, gives preference to Emmet's method. (*Bresl. Aerztl. Zeitschr.*, 1879; and *Centralblatt für die Med. Wissen.*, No. 18.) He thinks that chronic endometritis and a disturbance in the progress of involution of the uterus are often due to eversion of the os uteri and to lacerations of the cervix; and that the latter often is the direct cause of endometritis of the neck, and the indirect cause of leucorrhœa and more serious affections of the mucous membrane of the cervix, so as to cause, under certain conditions, sterility and abortion, and perhaps even prove a great impediment to a successful treatment of retroflexion and retroversion of the womb. In some cases, a cure would be effected by healing the lacerations; while in other cases the patient recovered by being kept very quiet and treated antiphlogistically. He does not agree with Emmet in insisting on a preliminary treatment of the affection in every case; he thinks that this is only indicated in cases where the mucous membrane has undergone intense follicular changes. The operation must be performed with antiseptic precautions; but there is hardly any need for anæsthetics. The patient is laid on her back, if the uterus can be easily drawn down; if not, she must be placed either on the right or the left side, according to the lacerations. Spiegelberg uses metal wire. The wire is generally removed on the tenth day, and the patient is allowed to leave her bed on the eighth day. Little must be done in the way of treatment, except keeping her quiet. Out of the author's ten cases, the wound healed by first intention in six; in three, by second intention; and in one case, one side did not heal at all.

TREATMENT OF THE PEDICLE IN OVARIOTOMY.—In an article in the *Finska Läkarsällskapets Handlingar*, Band xix, Dr. F. Saltzman relates the histories of seven cases of ovariectomy recently performed by him, and makes some remarks on questions bearing on the operation. In six of the cases, as in all the similar operations previously described by him, he used the actual cautery in the treatment of the pedicle. The most important objection against this method, namely, that it does not afford a sure protection against secondary hæmorrhage, may, in his opinion, be obviated by taking the precaution to tie each vessel in the pedicle with catgut. If it be desired to again ligature the pedicle, he regards catgut as the most suitable material. From his own observations and from those of others, the author has come to the conclusion that the fear lest the catgut ligature should fail to afford security against secondary hæmorrhage, in consequence of its ready absorption, has been exaggerated. The author points out some inconveniences of the extraperitoneal method of management of the pedicle, among which he especially directs attention to the occurrence of tetanus in some of the cases treated in this way, and sums up by declaring his preference for the intraperitoneal method. This method is applicable in all cases, and the only important point is the choice between the ligature and the actual cautery. He decidedly prefers the cautery when one has to deal with a thick pedicle, especially when no large arteries can be detected in it. The ligature is indicated, in the first place, when the pedicle is comparatively thin, and contains arteries of large calibre; and it is absolutely required in cases where the pedicle

is so short that the cautery-clamp cannot be applied, and where the tumour cannot be shelled out so as to form a pedicle. With regard to the use of the drainage-tube, especially in Douglas's pouch, Dr. Saltzman regards it as applicable only in some very rare exceptional cases. Of his seven operations, two were followed by death. He gives reasons for the use of antiseptics in the operation.—*Nordiskt Medicinskt Arkiv*, Band xi.

OVARIOTOMY.—J. Boye gives in the *Gynäkolog. og Obstetr. Meddelelser*, Band II, an account of twenty-three cases of ovariectomy performed by him in 1876-78, five of which were followed by death. Among the recoveries were several especially difficult operations, and cases in which the patients' condition was very miserable: but the author has become more and more convinced that, so long as the patient is not nearly or actually moribund, neither her condition nor the operative difficulties of the case present any certain contraindications to ovariectomy. Among the five deaths, three occurred from tetanus, in patients operated on in different places and at intervals of several months. In seeking for the cause of the tetanus, the author directed his attention especially to the management of the pedicle. In the first case of tetanus he used the clamp: he then left off the extraperitoneal treatment of the pedicle, and used the catgut ligature: the cautery, he says, requires too long a time, and is unsafe. In the next eight cases the catgut ligature was used: but one of these died of tetanus. In this case, which was believed to be one of double ovarian tumour, one of the tumours was found to be a gravid uterus, much distended with hydramnios: it was punctured, and the operation was completed. A drainage-tube was placed between the edges of the abdominal wound. Abortion at the third month took place four days afterwards; the patient went on well till the tenth day, when she was seized with tetanus, and died five days later. This mishap led Boye to desist from applying the drainage-tube immediately after the completion of the operation. In the third case of tetanus, the author was obliged to apply the clamp quickly to end the operation, as the needle-punctures in the pedicle, which was thick and vascular, continued to bleed after the ligatures were tied. The patient made very favourable progress for some days: but tetanus then set in. The author has endeavoured to discover a method of ligature which will not disappoint, so that the pedicle can be returned into the abdomen with safety, and the operation ended as rapidly as with the clamp. In the next five cases, he used silver thread: the course of the cases was favourable, but the application required too long a time, and two of the patients had pelvic abscess. He then used, in the next six operations, a caoutchouc drainage-tube: one of these cases ended fatally, but the patient was already in a hopeless state before the operation. A caoutchouc tube dipped in a solution of carbolic acid was introduced by means of a strong curette, by which, in order to prevent it from slipping, it was brought through a fold of peritoneum, along the two opposite sides of the pedicle. The ends of the tube lay parallel with each other beyond the pedicle, and were drawn as tight as possible with the fingers, while an assistant tied them together with silk thread. If the pedicle were very thick, or absent, the tube was carried across through the pedicle or the base of the tumour, and was tied on both sides. In one of these cases, peritoneal abscess occurred; but the author thinks that this may have been due to other circumstances. The advantages of this method are these. 1. It can be carried out quickly, nearly as quickly as the application of the clamp. 2. It is very secure. 3. In the cases in which it was used, it was generally not followed by reaction. The first seven cases were operated on without antiseptics; and one died of tetanus; the other sixteen cases were operated on under the spray. Regarding the insertion of a drainage-tube immediately after operation, the author thinks that it is not of any use, as it quickly becomes encapsuled with exudation, so that large quantities of fluid may remain in the abdomen without being able to escape through the tube. The author attaches much importance to bandaging the abdomen as firmly as possible. He treats pelvic abscesses by opening them as early as possible, either by means of a trocar through the rectum, or, if the pus again collect, by making an opening from the vagina and inserting a drainage-tube.—*Nordiskt Medicinskt Arkiv*, Band xi, 1sta Häftet, 1879.

BIRMINGHAM.—The chief feature of the vital statistics of Birmingham for the first quarter of this year is the number of deaths (162) from scarlatina, which is now happily declining all over the town. Whooping-cough was also very fatal, causing 91 deaths. Altogether, zymotic diseases were accountable for 331 deaths, against 405 in the winter quarter of last year. The total number of deaths was 2,545, as compared with 2,592 in the first quarter of 1878, and representing an annual rate of 26.18 per 1,000. No fewer than 220 deaths occurred from phthisis, and 730 from diseases of the respiratory organs.

REPORTS OF SOCIETIES.

OBSTETRICAL SOCIETY OF LONDON.

WEDNESDAY, JULY 2ND, 1879.

W. S. PLAYFAIR, M.D., F.R.C.P., President, in the Chair.

THE USE OF THE FORCEPS AND ITS ALTERNATIVES IN LINGERING LABOUR.

[Continued from page 972 of previous volume.]

THE discussion was resumed.

Dr. ROPER said that the labours to which he had been called to use forceps had been of two kinds. The first kind was a lingering, feeble labour, mostly occurring in women who had had many children, in whom the uterine force was very feeble from the beginning to the end of labour. The pains were very slight, and occurred only at long intervals, and the labour was protracted simply through uterine atony. The soft parts were very lax, and offered but little or no resistance; the child's head lay loosely in the pelvic cavity, and could easily be moved about in any direction; there was no pressure on the maternal soft parts, and no constant contraction of the uterus to arrest the foetal circulation. Such a labour, however long it might last, would almost always terminate naturally by expectancy. If, in such a case, it were decided to deliver with forceps, he had never regarded it as good practice to do so without using ergotine by subcutaneous injection, as an adjuvant. Frequently, however, the manipulation necessary in applying the forceps stimulated both the uterus and the reflex and voluntary expulsive efforts of the patient. Ergot did not always succeed in expelling the child. The uterus under the influence of ergot seemed at times to contract on the child, and thus would speedily destroy its life if it were not quickly liberated. He would not wait longer than ten minutes after the uterus had become ergotised, before applying the forceps. If there were any efficacy in pressure on the fundus uteri to expel the child, this was the kind of case in which it ought to be useful; but he placed no reliance on it as an operation *per se*. While it was a mere mechanical proceeding, yet the manipulation of the fundus uteri to effect this would frequently act as a stimulant to the atonic uterus. In many patients with lax uterine tissue and a flabby state of the soft parts of the outlet, the child was ready to drop out without giving the patient much warning. The second kind of labour, for the most part, occurred in primiparous women who were young and robust, with a powerfully acting uterus, pains of a forcibly expulsive kind occurring frequently, and the expulsion of the foetus being resisted by rigidity or tonicity of the soft parts of the outlet. In such a case, the head was forcibly thrust down with each pain on the floor of the pelvis, distending the perinæum to the thinness of parchment, and yet it did not come through. On cessation of the pain, the head retreated into the pelvic cavity, all tension was relieved, the maternal soft parts were freed from pressure, and the placental circulation was restored during the interval between the pains. Many pains might occur and a long time elapse before the head was protruded; but, so long as the uterus continued to act thus forcibly and rhythmically, the use of the forceps was contraindicated. During all this time, relaxation of the rigid soft parts and moulding of the foetal head were being gradually brought about. If a greater force were applied at one time, as in delivery by the forceps, severe stretching, bruising, and tearing might reasonably be expected. It might, however, happen that the powerfully acting uterus in the end was unable to overcome the rigidity at the outlet. In such cases, the pains became less forcible and occurred at longer intervals; there was less movement or progress of the head with each pain; the uterus, as felt through the abdominal wall, was becoming persistently hard from tonic contraction; on making a vaginal examination, the head would be found immovably arrested or impacted; the labour finally had to come to a standstill. Sound judgment directed how to supplement the failing power of nature by the use of the forceps before the breakdown took place; or when not to do this. Perinæa were sometimes ruptured through into the rectum by the premature use of the forceps, which, he believed, would not have occurred if the cases had been left to expectancy. He then spoke of the application of the forceps in the first stage of a labour where the factor of difficulty was a tedious lingering dilatation of the os uteri, accompanied by pressure on it of the bag of membranes, or of the presenting head itself, when the liquor amnii was discharged. He had never seen a single case of death of either child or mother, nor of damage to the maternal structures, from a protracted first stage of labour; *i. e.*, in a labour otherwise natural, excepting a rigid state of the os uteri—meaning thereby mere physiological rigidity, as in the tonicity of the soft parts of young and robust primiparæ. Structural diseases of the os and trismus of the

ASSOCIATION INTELLIGENCE.

BRITISH MEDICAL ASSOCIATION: FORTY-SEVENTH ANNUAL MEETING.

THE Forty-Seventh Annual Meeting of the British Medical Association will be held at Cork, on Tuesday, Wednesday, Thursday, and Friday, August 5th, 6th, 7th, and 8th, 1879.

President: R. W. FALCONER, M.D., F.R.C.P., D.C.L., Consulting Physician to the Royal United Hospital, Bath.

President-Elect: DENIS C. O'CONNOR, A.B., M.B., Professor of the Practice of Medicine in Queen's College, Cork.

An Address in Medicine will be delivered by ALFRED HUDSON, M.D., M.R.I.A., Regius Professor of Physic in the University of Dublin.

An Address in Surgery will be delivered by WILLIAM S. SAVORY, M.B., F.R.C.S., F.R.S., Surgeon to and Lecturer on Surgery at St. Bartholomew's Hospital.

An Address in Public Medicine will be given by ANDREW FERGUS, M.D., President of the Faculty of Physicians and Surgeons of Glasgow. The business of the Association will be transacted in Six Sections.

SECTION A.: MEDICINE.—*President:* Andrew Clark, M.D., F.R.C.P. *Vice-Presidents:* James Little, M.D.; William Townsend, M.D. *Secretaries:* George F. Duffey, M.D., 30, Fitzwilliam Place, Dublin; Benjamin Spedding, L.R.C.P. Edin., 17, Cherry Mount, Belfast.

SECTION B.: SURGERY.—*President:* Professor W. K. Tanner, M.D. *Vice-Presidents:* W. Mac Cormac, F.R.C.S. Eng.; J. Cooper Forster, F.R.C.S. Eng. *Secretaries:* J. G. Curtis, F.R.C.S.I., 7, Camden Place, Cork; N. J. Hobart, M.D., 33, South Mall, Cork; Stephen O'Sullivan, M.D., 6, Camden Place, Cork.

SECTION C.: OBSTETRIC MEDICINE.—*President:* George H. Kidd, M.D. *Vice-Presidents:* W. J. Cummins, M.D.; Alfred Wiltshire, M.D. *Secretaries:* Professor R. J. Kinkead, M.D., Galway; Fancourt Barnes, M.D., 39, Weymouth Street, London.

SECTION D.: PUBLIC MEDICINE.—*President:* T. W. Grimshaw, M.D. *Vice-Presidents:* H. J. Littlejohn, M.D.; C. Meymott Tidy, M.B. *Secretaries:* J. L. Notter, M.D., Netley; James Martin, L.K.Q.C.P., Portlaw, County Waterford.

SECTION E.: PSYCHOLOGY.—*President:* J. A. Eames, M.D. *Vice-Presidents:* Henry Rayner, M.D.; Herbert C. Major, M.D. *Secretaries:* Oscar T. Woods, M.D., Killarney; Ringrose Atkins, M.D., Waterford.

SECTION F.: PHYSIOLOGY.—*President:* Henry Power, F.R.C.S. *Vice-Presidents:* Professor John J. Charles, M.D.; Reuben J. Harvey, M.D. *Secretary:* W. H. Allchin, M.B., 34, Wimpole Street, London. *Secretary to the Physiological Museum:* C. Y. Pearson, M.D., Cork. *Secretaries to Museum Committee:* T. Gelston Atkins, M.D.; C. Harvey, M.D.

Honorary Local Secretary: Professor H. MACNAUGHTON JONES, M.D., St. Patrick's Place, Cork.

Honorary Assistant Local Secretaries: RINGROSE ATKINS, M.D. Waterford; D. C. O'CONNOR, jun., L.R.C.P. & S. Ed., 2, Camden Place, Cork.

TUESDAY, AUGUST 5TH, 1879.

10 A.M.—Meeting of Committee of Council.

11 A.M.—Meeting of the Council of 1878-79.

3 P.M.—General Meeting. *President's Address;* Annual Report of Council, and other business.

8 P.M.—Reception by the President of the Association and the Local Reception Committee at Queen's College.

WEDNESDAY, AUGUST 6TH.

9.30 A.M.—Meeting of Council of 1879-80.

11 A.M.—Second General Meeting. *Address in Medicine.*

2 to 5 P.M.—Sectional Meetings.

8 P.M.—Reception by the Mayor, Corporation, and Citizens of Cork.

THURSDAY, AUGUST 7TH.

9 A.M.—Meeting of the Committee of Council.

10 A.M.—Third General Meeting. *Reports of Committees.*

11 A.M.—Address in Surgery.

2 to 5 P.M.—Sectional Meetings.

6.30 P.M.—Public Dinner.

FRIDAY, AUGUST 8TH.

10 A.M.—Address in Public Health.

11 A.M.—Sectional Meetings.

1.30 P.M.—Concluding General Meeting.

4 P.M.—Garden Party by Reception Committee at Queen's College.

8 P.M.—Concert by the Reception Committee.

Arrangements have been made for providing a Subsection of Ophthal-

mology and Otology in the Surgical Section. Mr. Jonathan Hutchinson, F.R.C.S., has consented to take the Chair. Dr. James Patterson Cassells, of Glasgow, will act as Honorary Secretary for Otology; and Mr. H. R. Swanzy, of 23, Merrion Square North, Dublin, and Mr. Edward Nettleship, of 4, Wimpole Street, London, will act as Secretaries for Ophthalmology.

There will also be a Subsection of Dermatology in the Section of Medicine. Professor McCall Anderson has consented to take the Chair, and Mr. Malcolm A. Morris, 63, Montagu Square, Hyde Park, W., London, and Dr. Walter Smith, 34, Lower Baggot Street, Dublin, will act as Honorary Secretaries.

SECTIONAL ARRANGEMENTS.

The following communications have been promised in addition to those already enumerated in the JOURNAL of last week. A complete programme of the sectional arrangements will be published in one or more numbers of the JOURNAL before the meeting.

AVELING, J. H., M.D. The Treatment of Chronic Complete Inversion of the Uterus, with cases illustrating the advantages of the direct method of applying gradual Elastic Pressure.

FOX, T. Colcott, M.B. On the Neurotic Origin of Lichen Planus.

HARKIN, Alex., M.D. Chlorate of Potass in the Hæmorrhagic Diathesis.

HAYES, J. R., M.D. Case of Removal of entire Right Parietal and half of Frontal Bones, the result of Burn: Treated by Skin-Grafting: Recovery. (The patient will be exhibited.)

HOWIE, J. M., M.B. A Fatal Case of Autogenetic Puerperal Septicæmia, in which the Symptoms appeared previously to Delivery.

JAGIELSKI, Victor, M.D. The Effect of Koumiss upon the Urine in Health and in Disease.

JONES, Thomas, M.B. Short notes of a dozen Cases of Subcutaneous Osteotomy.

LUSH, W. Vawdrey, M.D. A Case of Embolism into the Right Axillary, Left Brachial, and Right Middle Cerebral Arteries: Recovery.

MAJOR, Herbert C., M.D. The Histology of the Brain in Apes.

MILLER, Hugh, M.D. Puerperal Mortality in Lying-in Hospitals.

PIERCE, F. M., M.D. Auditory Exostoses.

STARTIN, James, Esq. Lupus, and its Treatment by Caustics.

WALTER, William, M.D. The Treatment of *Post Partum* Hæmorrhage by the Intra-uterine Injection of Warm Water.

WHEELER, W. J., M.D. Fracture of the Patella; and the Reports of several Cases treated by the Writer's Splint. (Exhibition of splint, and of a specimen of bony union of the patella.)

WOLFE, J. R., M.D. 1. How to obviate the Complications which render Cataract-operations precarious. 2. The injurious effects of Tea-drinking Habits upon the Nutrition of the Eyeball.

TRAVELLING AND TOURIST ARRANGEMENTS.

THE JOURNEY TO CORK.

Subjoined is a statement of the different ways in which Cork may be reached. All return tickets are available for two months.

1. *Via New Milford.* From New Milford at 8.30 P.M. on arrival of 10.15 A.M. express train from Paddington; arriving at Passage at 8 A.M. Fares from Paddington to Cork, first class, single, £2 8s.; return, £4; second class, single, £1 18s.; return £3 3s.

2. *Via New Milford and Waterford.* From Paddington by express train at 5.15 P.M., arriving in Waterford about 11 the following morning, and at Cork at 4.35 P.M.

3. *Via Bristol.* Steamer from Bristol to Cork, Saturday, August 2nd, at 6.30 P.M. Fares, cabin, single, £1 4s.; return, £1 16s.; from Paddington, first class and saloon, single, £2 2s. 6d.; return £3 8s.; second class and saloon, single, £1 16s.; return, £2 18s. 6d. Average length of sea-passage, 20 hours.

4. *Via Holyhead and Dublin.* a. From Euston Station by Irish mail at 7.15 A.M.; from Holyhead at 2.15 P.M.; from Dublin at 7.45 P.M.; arrive in Cork at 2 A.M.—b. From Euston Station by Irish mail at 8.25 P.M.; from Holyhead at 3.15 A.M.; from Dublin at 9 A.M. and 10.15 A.M.; arriving in Cork at 2 P.M. and 4.35 P.M. On Sunday mornings, the Irish mail trains, first class only, leave Dublin at 9 and 9.30 A.M., and arrive in Cork at 1.20 and 4.33 P.M.—c. From Euston Station by ordinary fast train at 5.15 P.M.; from Holyhead at 1.30 A.M.; from Dublin (North Wall) at 7 A.M. (except Mondays), and Kingsbridge daily at 9 A.M.; arriving in Cork at 2 P.M. (1.20 P.M. on Sundays).—Fares from London to Cork: Irish mail, first class, single, £3 9s. 6d.; return, £5 16s. 6d.; second class, single, £2 12s.; return, £4 7s. 6d.; ordinary train, first class, single, £2 17s.; return, £4 15s.; second class, single, £2 4s.; return, £3 13s. 6d.—Trains leave Dublin (Kingsbridge) for Cork at 6 A.M., 9 A.M., 10.15 A.M., 1 P.M., and 7.45 P.M. (mail).

5. *Liverpool to Cork, by Steamer.* Saturday, August 2nd, at 9.30 P.M.; returning from Cork on Saturday, August 9th, at 6 P.M. Average length of sea-passage, 20 hours. Fare, single, £1 1s.; return, £1 11s. 6d.

TOURIST ARRANGEMENTS.

The following arrangements are available in connection with the Great Southern and Western Railway during the tourist season.

Killarney viâ Mallow. Tickets, available for a calendar month, are issued to Killarney and back from Kingsbridge, Dublin. Fares: one passenger, *a*, £2 10s.; *b*, £2; two passengers, *a*, £4 10s.; *b*, £3 12s.; three passengers, *a*, £6 7s. 6d.; *b*, £5 2s.; four passengers, *a*, £8; *b*, £6 8s.; and so on in proportion up to eight passengers. Tickets are also issued from other stations on the line at proportionate reductions. Passengers may break the journey at Limerick Junction or at Mallow.

Killarney and Connemara Circular Tour. Tickets, available for a calendar month, are issued at Kingsbridge for Killarney, Limerick (or Tralee), Athenry, Galway, Westport, Ballina, and thence, viâ Midland Great Western Railway, to Dublin (Broadstone), at the following fares: One passenger, *a*, £3 1s. 6d.; *b*, £2 2s.; two passengers, *a*, £5 10s. 6d.; *b*, £3 15s. 6d.; three passengers, *a*, £7 16s. 6d.; *b*, £5 7s. 6d.; four passengers, *a*, £9 16s.; *b*, £6 13s. 6d.; and so on in proportion up to six passengers. Cars run between Galway and Clifden, Cong and Clifden, and Clifden and Westport in connection, at moderate fixed fares.

Dublin to Cork viâ Killarney and Glengarriff. Tickets are issued at Kingsbridge for Cork, viâ Killarney by rail, thence by car to Glengarriff and Drimolage, thence by rail to Cork, viâ Cork and Bandon Railway, at the following fares: first class rail and car, £2 17s. 9d.; second class rail and car, £2 7s. 10d. These tickets are not available for return from Cork, but are good for a month from the date of issue. Similar tickets for performing the journey the reverse way—viz., Cork to Drimolage, Glengarriff, Killarney, and thence by rail to Dublin—can be procured at the Cork Terminus of the Cork and Bandon Railway.

Circular Tour, Cork to Killarney, Glengarriff, Drimolage, and Cork. Tickets, available for a week, can be obtained for the above tour at the Great Southern and Western Railway Station, Cork; or for the same tour in reverse direction, at Cork Terminus of Cork and Bandon Railway. Fares: first class rail and car, £1 14s.; second class rail and car, £1 10s.

Cork and Blackwater Circular Tour. Tickets, available for six days, are issued at Cork (Glanmire Road) for the above, viâ Mallow, Lismore, Cappoquin; thence by Blackwater steamer to Youghal and by rail to Cork (Summerhill), or *vice versa*, from Cork (Summerhill) to Youghal; thence by Blackwater steamer to Cappoquin, and by rail to Lismore, Mallow, and Cork (Glanmire). Fares: first class, 10s.; second class, 8s.

Through tourist tickets can be obtained from all the principal stations in England, the North of Ireland, and Scotland for Killarney, and the holders, if they prefer it, can travel to Cork in place of Killarney. The holders can break the journey at Dublin, Limerick Junction, and Mallow.

Special tourist arrangements in connection with different parts of England, Scotland, North of Ireland, County Wicklow, etc., have been organised by Messrs. Cook. Particulars will be found in our advertisement columns.

EXCURSIONS.

SPECIAL EXCURSIONS FROM CORK.

Killarney.—A special train will leave Cork on Saturday, August 9th, at 7.45 A.M., arriving at Killarney at 10.20 A.M. The party will be met at the train by carriages, to drive them to the Gap of Dunloe, through which they can walk or ride on ponies. Boats will meet them at the top of the Upper Lake, and they can row across to Durricunnihy Cottage, where the Reception Committee will have luncheon provided. Afterwards, they will row down through the three lakes. The return special train will leave Killarney at 7 o'clock. Excursionists can either remain, or return to Cork on the Saturday night. The return-tickets to Cork will cost 10s.; carriages, 2s. 6d. per head. Lord Kenmare has kindly lent his boats.

Blackwater Valley and Lismore Castle.—A special train will leave Cork at 7.50 A.M. on Saturday, August 9th, arriving in Youghal at about 9 A.M. The steamer will leave for Cappoquin at 9.10 A.M. The party can drive from Cappoquin to Lismore, or go by rail; also they can visit the celebrated monastery of Mount Melleray on their way. Lismore Castle and the grounds will be opened for the visitors, and the Duke of Devonshire will kindly provide luncheon at the Devonshire Arms. A train will leave Lismore at 5 P.M., arriving in Cork at 8.15 P.M. Price of circular tour tickets, 10s. The Dublin and Holyhead mail-train leaves Cork at 10.6 P.M.

River, Queenstown, Carrigaline River, Harbour, etc.—The Reception Committee will provide a steamer for a party of one hundred, to start at 10.30 A.M. on Saturday. The steamer will visit the different places of interest in the river, Haulbowline, the Forts, Camden and Carlisle; proceed up the Carrigaline River, and take the party to Ballinacurra. At 1 o'clock, luncheon will be provided for one hundred in the

ballroom of the Queen's Hotel, Queenstown. They will return to Cork about 5 P.M. The train for Killarney starts from Cork at 6.30 P.M., arriving in Killarney at 9.32 P.M.

Blarney Castle.—A party of fifty will leave Cork by cars, driving along the Lee Road, passing Carrigrohane Castle, the Valley of Woodside, and arriving in Blarney about 12 o'clock noon. Sir George Colthurst will kindly provide luncheon. St. Anne's large hydropathic establishment, close to the castle, is well worth a visit. (Mr. Barter will entertain any of the party who wish to remain to dinner.) After visiting the lake, grounds, and Rock Close, the party will return to Cork by train or car.

DONEGAL TOUR.

First Day. (Great Northern Railway, viâ Enniskillen and Bundoran Line.)—Leave Dublin at 9 A.M.; arrive at Ballyshannon at 3.20 P.M. Distance, 56½ miles.—(By cars, through Ballintra and Laghey.) Leave Ballyshannon at 3.30 P.M.; arrive at Donegal about 5.45 P.M. The ruins of the old Abbey of Donegal still possess interest for the antiquarian. A few miles to the left, on a jutting crag overlooking Donegal Bay, is Kilbarron, the ruined castle of the O'Clerys, where the celebrated *Annals of the Four Masters* were composed. The Arran Arms Hotel, at Donegal, is a comfortable one. There is an excellent spa in the town. Distance, 13½ miles.

Second Day. (By cars, through Mount Charles, Inver Dunkineely, and Bruckles.)—Leave Donegal about 8 A.M., and arrive at Killybegs about 11 A.M.; thence westwards to Carrick Hotel, where tourists will find guides to conduct them to the summit of Slieve League. Distance, 17½ miles.

Third Day. (By cars.)—From Carrick Hotel to Malinmore, Malinbeg, and Glen Columbille, and back to Carrick. The bold headlands, the eagle crags, and the wild cliffs present unrivalled scenery. Distance, about 17 miles.

Fourth Day. (By cars. If this journey be considered too much for one day, fair accommodation can be obtained at Glenties.)—From Carrick Hotel, through Glen Pesh, Ardara, Glenties, Doocharry Bridge, and on to Gweedore Hotel, a most comfortable one, with angling privileges in the rivers in the immediate vicinity. Excursions can be made from here to Mount Errigal, a conical hill, and the highest in Donegal, 2,466 feet; also to Dunlewy and Bunbeg, which are short distances from the hotel, and worth visiting. Distance, between 40 and 50 miles.

Fifth Day. (By cars, boat, and rail.)—From Gweedore Hotel, through Glenveagh, Kilmacrennan, Milford, and on to Rathmullen, crossing Lough Swilly, to Fahan, for 5.40 P.M., or 8.40 P.M., train to Derry, arriving there at 6.10 P.M., or 9.20 P.M. Distance, about 50 miles.—Or from Gweedore Hotel, viâ Falcarragh, Dunfanaghy, Creeslough, Kilmacrennan, and Letterkenny; and thence to Strabane, for 9.15 P.M. train to Derry. At Dunfanaghy, refreshments may be had at the Stewart Arms Hotel, whence an excursion should, if possible, be made to the cliffs of Horn Head, about 830 feet high. Tory Island is eight miles from the shore. Should time permit, and should the day be calm, a visit to this island will repay the tourist. Some cyclopean remains, a round tower, remains of two stone crosses, and of some ancient churches, are to be seen. Near Kilmacrennan is the rock of Doune, on which The Donnell was always inaugurated. Near Milford, is Cratlagh Wood, where the late Lord Leitrim was murdered. Distance, about 53 miles to Strabane; thence to Derry, 14¾ miles.

SPECIAL NOTICES.

All the steam-packet companies will convey goods to the Museum and for the Sanitary Exhibition free of charge.

Any persons requiring description of tours in South of Ireland can have same on application to the Honorary Local Secretary.

Intending visitors are requested to communicate with Professor Macnaughton Jones as soon as possible, stating whether they will bring ladies with them.

Reception and waiting rooms for ladies will be provided in Queen's College and in the City.

Information regarding lodgings, etc., will be given in the JOURNAL of July 19th.

FRANCIS FOWKE,

General Secretary of the British Medical Association.

161a, Strand, London, May 22nd, 1879.

METROPOLITAN COUNTIES BRANCH.

AN adjourned general meeting of this Branch will be held at the rooms of the Medical Society of London, 11, Chandos Street, Cavendish

* *a* denotes first class; *b* second class.

Square, on Wednesday, July 16th, at 8 P.M. precisely; when the discussion on Medical Education will be resumed.

ALEXANDER HENRY, M.D.
W. CHAPMAN GRIGG, M.D. } *Hon. Secs.*

57, Doughty Street, W.C., June 26th, 1879.

METROPOLITAN COUNTIES BRANCH.

THE twenty-seventh annual meeting of this Branch will be held at the Ship Hotel, Greenwich, on Friday, July 25th, 1879, at 4 P.M.

At 6 P.M., the members will dine together; JOHN WOOD, Esq., F.R.S., in the Chair. Tickets, 14s. each (inclusive of attendance, and exclusive of wine). Members intending to be present at the dinner are specially requested to give notice to the Secretaries on or before July 22nd.

ALEXANDER HENRY, M.D.,
WM. CHAPMAN GRIGG, M.D., } *Honorary Secretaries.*

57, Doughty Street, W.C., July 1st, 1879.

NORTH WALES BRANCH.

THE thirtieth annual meeting of this Branch will be held at Carnarvon, on Friday, July 18th, at 12.30 P.M.

J. LLOYD ROBERTS, *Honorary Secretary.*

Denbigh, July 10th, 1879.

ABERDEEN, BANFF, AND KINCARDINE BRANCH.

THE annual meeting of this Branch will be held in Aberdeen, on Saturday, July 19th, at half-past One o'clock.

Further particulars will be given by circular.

A. OGSTON,
J. URQUHART, } *Honorary Secretaries.*

Union Street, Aberdeen, June 26th, 1879.

BORDER COUNTIES BRANCH.

THE annual meeting of this Branch will be held at the County Hotel, Carlisle, on Friday, July 25th, at One o'clock.

Gentlemen intending to read papers are requested to give early notice thereof to one or other of the Secretaries.

RODERICK MACLAREN,
JOHN SMITH, } *Honorary Secretaries.*

Carlisle, June 24th, 1879.

WEST SOMERSET BRANCH.

THE annual meeting of this Branch will be held at the Luttrell Arms Hotel, Dunster, on Thursday, July 24th, at 5 o'clock.

Dinner at 6 o'clock: THOMAS CLARK, Esq., President.

The President invites the members of the Branch to lunch at One o'clock, and afterwards to visit with him Dunster Castle, the Church, and Minehead.

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

Taunton, July 1st, 1879.

SOUTH-EASTERN BRANCH: ANNUAL MEETING.

THE thirty-fifth annual meeting of this Branch was held at the Bathing Establishment, Folkestone, on Wednesday, June 11th. The chair was taken by the retiring President, Dr. LANCHESTER of Croydon.

Dr. LANCHESTER said that, before he left the chair, there were one or two points on which he wished to make a few remarks. The first was with regard to a question with reference to endeavouring to improve the relations existing between the Committee of Council and the general body of the Association. The Committee of Council had appointed a subcommittee to inquire into the rules of the present mode of election, and they had sent a request to the different Branches for them also to consider whether any means could be devised to increase the efficiency of the Committee. It had been suggested that the Council, instead of meeting, as at present, a short time before the general meeting, should have a different and distinct time of meeting, so that subjects might be discussed in Council, and that they should then be reported upon to the general body. There had been another suggestion. It was a question very well worth consideration whether the Council was not practically useless as at present constituted; and it had been mooted by some whether it would not be well to do away with the Council altogether, and that the Committee should be elected by the general body of the Association. He conceived himself that the Committee would then be a body who would carry more the confidence of the profession, if every member had a voice in their election. He brought

the matter forward in order that they might consider it at some future meeting. Dr. LANCHESTER concluded by cordially thanking the members for the honour which had been conferred on him by being elected to the chair, and wished his successor a very pleasant time during his term of office.

Mr. BURTON moved a vote of thanks to the ex-president, which was seconded by Mr. REID. Dr. LANCHESTER, in acknowledging the compliment, said it was a very great satisfaction to him to have filled the high office.

President's Address.—Dr. BOWLES, the new President, on taking the chair, delivered an address, the chief topic of which was the education of the general practitioner. He maintained that this should not be of too high a standard, nor too extensive, but rather practical, so as to supply ordinary medical and surgical necessities. At the same time, he admitted that, in one sense, no education could be too high for the medical profession.

Report of Council.—Dr. PARSONS, honorary secretary, read the following report.

"The report for the past year which your Council have the privilege of presenting to you to-day is of so simple a character, as to require but few words of comment and explanation from them.

"First, as regards numbers: last year, the Branch consisted of 428 members; this year, of 424 only. This falling off is apparent, however, rather than real, and is due to the migration of many members from the Branch to other and more distant parts of the kingdom; whilst a few only have retired in consequence of advancing years or advancing fortune. In this manner, twenty-three have withdrawn from the Branch. Death has removed seven, and amongst them one who for many years was a member of the Council, and a most zealous honorary secretary of the West Kent District, Dr. Frederick Brown of Rochester, a man of great ability; who did his work with such straightforward transparent honesty of purpose—which was perhaps his chief characteristic—that even those who withheld approval from some of his undertakings, could not but admire and esteem the integrity and unselfish energy of the man. It was little more than a year since he asked to be relieved of the care of his district, in consequence of failing health; and now his death has brought sadness to many old and attached friends in West Kent. Our losses (thirty) are almost made up by the addition of twenty-six new members; and we now number 424 members. Having regard to the area of the Branch, your Council cannot but feel that our numbers should be far greater, not less than 500 certainly; and that very little effort on the part of members individually is necessary to achieve such a result. They therefore earnestly request all who have the welfare of the profession at heart to use such influence as they may possess with their neighbours to induce them to join the ranks of the Association through the South-Eastern Branch.

"As regards the six Districts of the Branch, all are working well, and your best thanks are due to all the honorary secretaries for the admirable manner in which they perform the duties entrusted to them. It is especially satisfactory to record that the West Surrey District, which had almost become defunct, has already, under the auspices of the new honorary secretary, Mr. A. A. Napper, exhibited marked signs of returning vitality; and its meetings will, it is hoped, continue to attract the surrounding profession in ever-increasing numbers.

"During the past year, the Committee of Council have been considering how the relations between themselves and the Branches may be improved; a Subcommittee was appointed to investigate the matter, and report. The recommendation of this Subcommittee seemed so reasonable, that your Council had no hesitation in giving their cordial support. The Branches, however, holding similar views did not appear to the Committee of Council to be sufficiently numerous to warrant them in proceeding with the recommendations of the Subcommittee, and for the present things remain *in statu quo*. It is, however, matter for fair consideration whether the growth of the Association, and of the Branches, has not rendered the machinery of the Councils somewhat too ponderous and cumbersome for efficient working; and whether a seat on the Council ought not to be conscientiously regarded as an executive office, rather than as an honorary distinction with no definite duties attached to it.

"As regards parliamentary work, this Branch has not been idle. Upwards of twenty petitions were presented in the House of Commons from the largest and most influential towns in the Branch in favour of Mr. Mills's Medical Acts Amendment Bill (No. 2). [The Report then contained a review of the work of the Parliamentary Bills Committee of the Association.]

"As regards financial matters, the funds of the Branch were never in a more flourishing condition, as the Report which will be submitted to you presently will show. Your Council, therefore, cannot but congratulate you on the eminently satisfactory condition of the Branch at the present moment."

Mr. HOAR proposed the adoption of the report. He thought they could not but feel very great pleasure in listening to such a satisfactory report in every particular. With regard to the number of members, they ought all to put their shoulders to the wheel, and get other members to join. In Maidstone, there was not a single medical man who did not belong to the Association; while in the neighbourhood, a large proportion belonged to it.

The resolution was seconded, and carried unanimously.

Vote of Thanks to the President.—Dr. LANCHESTER proposed a vote of thanks to the President.—Mr. JAMES REID seconded, saying he felt grateful to Dr. Bowles for his able and clear address.—The resolution was carried unanimously, and acknowledged by Dr. Bowles.

Financial Report.—The Secretary read the financial report, showing the receipts to have been £144 18s. 7d., and the expenditure £64 6s. 2½d., leaving a balance in hand of £80 12s. 4½d.—Dr. BRANSBY ROBERTS moved, and Dr. HENRY LEWIS seconded, the adoption of the report, and it was carried.

Honorary Secretary.—Dr. HOLMAN proposed that Dr. Parsons should be asked to again undertake the duties of honorary secretary. No one knew better than himself what those duties were. There was no question that to the energy of Dr. Parsons the Branch owed the greatly improved position it had held of late years. They were very fortunate indeed in possessing such a man.

Dr. LANCHESTER seconded the resolution.

Dr. PARSONS said he should be most ungrateful if he were not to consent to the proposition. Perhaps nobody was more conscious of his own shortcomings of what a secretary ought to be than he was himself; but he tried to do his best; and they knew how difficult it was to attend to all the work of the Branch, which really required almost undivided attention.

Place of Meeting in 1880: Officers.—Dr. BAGSHAW proposed that the place of meeting for 1880 be Brighton; that Dr. Withers Moore be the President-elect, and Mr. W. J. Harris of Worthing, and Mr. Bos-tock of Horsham, the Vice-Presidents-elect.—Mr. B. MARSACK seconded the motion, and it was carried unanimously.

Excursions to Hythe and other places in the neighbourhood were arranged. The members also visited the Parish Church and the Sanatorium, under the guidance of the local committee.

The Dinner took place at the Pavilion Hotel in the evening, Dr. BOWLES in the chair.

METROPOLITAN COUNTIES BRANCH: NORTH LONDON DISTRICT.

THE last meeting of the session was held at the Myddelton Hall, Islington, May 28th; J. W. MASON, Esq., in the Chair.

Pond's Sphygmograph.—Dr. SANSOM showed a number of pulse-tracings effected by Pond's phonographic sphygmograph, and gave it as his opinion that it was a valuable aid in prognosis. He brought forward several cases, which looked hopeful in many respects; but the tracings taken gave evidence of failure of cardiac power, which enabled him to prognose unfavourably.—Mr. MASON exhibited Pond's new phonographic sphygmograph, and compared its easy application with the old forms of instruments.

Obstruction of the Bowels.—Mr. GEORGE BROWN read a paper on the administration of enemata in obstruction of the bowels, in which he urged the importance of the medical attendant administering the enemata himself, or at least superintending their administration, in all cases where the seat of obstruction was situated in the colon, cæcum, or small intestines. He frequently found that the first enema was returned without inducing any action of the bowels. His plan was to repeat the enema time after time, at very brief intervals, until a satisfactory evacuation had taken place. Mr. Brown gave the notes of several cases in which he had overcome most obstinate obstruction of the bowels through the persistent use of soap-and-water enemata at very frequent intervals.

HOSPITAL DISEASES.—Erysipelas of a grave character has been epidemic in the Somerset County Lunatic Asylum, and is attributed to defective draining. During the past five months, 23 cases have occurred in the infirmary for females, 2 of which proved fatal. Amongst the males, there have been 9 cases, 2 also of which have terminated fatally. Efforts to find the origin of this outbreak have led to the discovery that, owing to rats having entered through a lead pipe connected with the sewers, there had been an escape of gas.

ROYAL COLLEGE OF SURGEONS OF IRELAND.—At a meeting of the Court of Examiners held on the 26th and 27th ult., G. P. M. Woodward, M.D., Deputy Surgeon-General A.M.D. (retired), was admitted a Fellow of the College after examination.

CORRESPONDENCE.

PROXY VOTING AT THE COLLEGE OF SURGEONS.

SIR,—It being found that there were very few provincial Fellows present at the election of members of Council of the College, it was thought undesirable to hold a meeting to consider the above named subject. By an oversight, the petition, which should have been worded praying for an alteration in the charter, was made to ask for an alteration in the by-laws. I shall feel obliged if all those who have signed the petition in its present form will signify to me by postcard their willingness to have their signatures attached to a memorial containing that alteration; also, if they are willing to have their names put on a committee to organise a meeting to be held prior to the next election of members of Council. I may mention that 338 signatures have been obtained to the memorial up to the present date.—I remain, yours obediently,
G. JACKSON, F.R.C.S. Eng.

Plymouth, July 7th, 1879.

IRISH GRADUATES' ASSOCIATION.

SIR,—I have had during the last week numerous inquiries as to the membership of the above association, and I venture to ask you to permit me to say, through the medium of the JOURNAL, that the membership of this society is not confined to Irishmen practising in England. We desire to embrace all Irish graduates wherever practising, and also as Associates all Irishmen who may possess any other qualification, and not necessarily a professional degree. Our annual meeting at Cork, on Wednesday, August 6th, will, I hope, be the means of introducing many new members, who have not joined before this under the impression that we only admitted Irishmen practising in England. I presume that this idea has been caused by the beginning of the Association having been made by residents in England. I think it is desirable that it should be known that our objects are social and medico-political only, and that the discussion of modes of treatment forms no part of our programme. We desire to establish a bond of union between men holding medical qualifications from any Irish source, and also to include Irishmen who may have qualified outside the Emerald Isle. I shall have much pleasure in proposing as member or associate any gentleman, if he will kindly forward his name and address to me. I trust a goodly number will come forward to give a good reception to our president at Cork, as Mr. W. Mac Cormac, is an able representative of Irish surgery, and a well known Fellow of the London College of Surgeons, not to mention the other positions which he has had the honour to adorn.—Yours faithfully,

JAMES THOMPSON, M.D., Hon. Sec.

Leamington, July 7th, 1879.

THE NORTHERN UNIVERSITY.

SIR,—I am desired to forward you the accompanying copy of a memorial to the Privy Council.—Yours truly,

RICHARD EATON, Registrar, *pro* W. JONES.

Liverpool Royal Infirmary School of Medicine, July 4th, 1879.

"To Her Majesty's Most Honourable Privy Council.

"The humble Petition of the Council of the Liverpool Royal Infirmary School of Medicine sheweth—

"1. That your memorialists have had brought under their notice the memorial presented to your lordships by the Owens College, Manchester, praying that a charter may be granted establishing a new northern university, to be called the Victoria University, to which shall be affiliated Owens College, and such other colleges, giving instruction in arts and science, as may hereafter be founded in the north of England; such university having the power to grant degrees to its own students in the faculties of arts, science, medicine, and law.

"2. That, while your memorialists are strongly in favour of the increase and extension of facilities for higher education throughout the north of England, they consider it highly undesirable that any new university should be founded with the power to confer degrees or licences to practise medicine.

"3. That there are at the present time in the kingdom no fewer than ten universities granting academical degrees in medicine, and nine corporations granting other licences to practise in that faculty, a number which your memorialists believe is already too large in the interests both of the public and of the medical profession. This opinion is well known to be strongly entertained by the medical profession in general. Your memorialists are further of opinion that, even if a single and

uniform qualification for the practice of medicine in the United Kingdom were established by Parliament, it would still be prejudicial to the interests of medical education to increase the number of academical distinctions in the faculty of medicine.

"4. Your memorialists, therefore, pray that, if a charter be granted to the proposed Victoria University, such University shall not have the power of granting degrees in medicine."

ARMY MEDICAL DEPARTMENT.

SIR,—As Sir William Muir is now advertising an examination for entrance to the Army Medical Department, to be held in August next, do not you think it would be more satisfactory for intending candidates if he stated under what conditions successful candidates will enter the service?—whether under the last ten years' service warrant, which is still in force until cancelled, or under the conditions of a promised but as yet unpublished, warrant? If under the former, men enter the service with their eyes open, and know what to expect, but if under the latter, I should strongly advise intending candidates not to compete until the promised warrant is published.

If I recollect aright, in 1864 a number of young gentlemen were induced to enter the service, and fill up the attenuated ranks of the Army Medical Department, under the conditions of a promised warrant which was to do wonders for the department; but as soon as the required number of recruits were caught, the promised warrant was torn up, or, at least, was never published. And as sure as "history repeats itself", the same will be done again. I, therefore, warn intending candidates not to be caught with chaff.—Your obedient servant,

VERB. SAP.

July 8th, 1879.

MEDICO-PARLIAMENTARY.

HOUSE OF COMMONS.—Thursday, July 3rd.

The Northern University.—Mr. CROSS stated, in answer to Mr. Jacob Bright, that the Committee of the Privy Council had called on the promoters of the Northern University to submit a draft charter for consideration, and it was not yet known whether or not they wished for power to grant degrees to women.

The Artisans' Dwellings Act.—Mr. CROSS, replying to a question by Colonel Beresford, said the estimate of the cost of all schemes which had been presented by the Metropolitan Board of Works would be found in a paper already laid on the table. He had not yet received accurate information as to the number of persons removed or to be removed; but these works had to be done gradually, and his consent had to be obtained before any large number could be removed. The hon. member might, therefore, rely upon it that no unnecessary hardship would take place. As regarded the amount for which the Metropolitan Board of Works contemplated selling the land, it must be remembered that the Board had to buy the land covered with buildings, and had to sell the vacant land; therefore, it could not be expected that they should get back the same amount that they had had to expend. In his opinion, the Board would be wise to look for their return, not so much to selling the land at a certain price as to getting it covered with buildings, and to the consequent decrease of pauperism. He understood that there was a proposition before the Board from persons able and willing to cover the sites with buildings within three years; and, although the apparent loss might be very great, still he should use every power he had to induce the Board to assent to that proposal; and he did not think that they would be doing their duty if they did not assent to it.

Main Drainage of the Metropolis.—Mr. CROSS, in reply to Sir A. Lusk, said there was no doubt that the Metropolitan Board of Works, in devising their main drainage system, used the best of their powers for the purpose of benefiting the metropolis after taking the best advice they could obtain. Complaints had been made of overflows of sewage-matter into the houses of many inhabitants of Holloway and other parts of the metropolis during the heavy rainfalls last year. The injury complained of was principally caused by the great amount of storm water which flushed the sewers and made them flow back into the houses. In some cases, he believed, the houses were not built on the proper levels. He had had communications addressed to him on this point, and he was himself now in communication with the Metropolitan Board of Works with a view to remedy the evil. At the present time, he could say no more.

The Lunacy Commissioners.—Mr. CROSS said, in answer to Mr. Dillwyn, that he had communicated with the Lunacy Commissioners,

who stated that no time should be lost in presenting their annual report. No official interchange of annual reports had taken place between the Lunacy Departments of England and France, but he had requested the Secretary of State for Foreign Affairs to communicate with the authorities in France on that subject.

OBITUARY.

CHARLES FREDERICK MAUNDER, F.R.C.S.,

SURGEON TO THE LONDON HOSPITAL.

ANOTHER sudden death has occurred in the ranks of the medical profession. Mr. C. F. Maunder, Surgeon to the London Hospital, died suddenly on Friday, at the early age of 47.

Charles Maunder received his early training in the Royal Infirmary, Edinburgh, where he studied surgery under the late Mr. Syme; he subsequently continued his studies at Paris and Guy's Hospital; and entered the profession in 1854.

In 1857, he was admitted a Fellow of the Royal College of Surgeons; and in the same year was appointed Demonstrator of Anatomy at Guy's Hospital; and from this time devoted himself to practical surgery. During the Crimean war, he served as Assistant-Surgeon in the Renkioi Hospital.

In 1860, he was appointed Assistant-Surgeon at the London Hospital, becoming full Surgeon in 1869.

Mr. Maunder is well known as an operator, and as having contributed to the development of several important procedures in practical surgery. He was a good speaker and lecturer, and delivered the Lettsomian Lectures in 1875 on "the Surgery of the Arteries". As an author, he produced a very excellent work on *Operative Surgery*, besides various contributions on surgical diseases.

For about a year, his health had been obviously failing; and in May last, on the recommendation of his professional friends, he withdrew for awhile from his active duties at the hospital, and went into the country to recruit his health. These means, however, failed to restore health; he never rallied, and died suddenly on July 4th.

Mr. Maunder was valued by his colleagues and by all who knew him as a man of thorough truthfulness and straightforward action; he always displayed great interest in the London Hospital and Medical School; and his name will long be held in remembrance by all who worked with him.

MEDICAL NEWS.

APOTHECARIES' HALL.—The following gentlemen passed their examination in the science and practice of medicine, and received certificates to practise, on Thursday, July 3rd, 1879.

Cheesman, George Edward Alexander, Southampton
Pryce, Evan William, The Farm, Montgomery
Raine, Arthur Robert, Billericay, Essex
Walford, Robert, Harrington Street, N.W.

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

Hart, Robert Alfred Hellings, Guy's Hospital

UNIVERSITY OF DURHAM.—The following candidates, having satisfactorily undergone the necessary examination on June 16th, 17th, 18th, and 19th, 1879, had their respective degrees conferred upon them at a Convocation held on June 24th.—The Degree of M.D. Practitioners of fifteen years' standing.

Travers, William, M.R.C.P., F.R.C.S.

The Degree of M.B.

Bowman, Hugh T.
Crick, Samuel A., M.R.C.S., L.S.A.
Dodd, John Richard
Green, Charles, M.R.C.S., L.S.A.
Ryan, James M., L.R.C.S., L.A.H.
Trewman, George T., M.R.C.S., L.S.A.
Tyson, William Joseph, F.R.C.S., L.R.C.P.
Willis, Charles F., M.R.C.S., L.R.C.P.
Woodman, William E., M.R.C.S., L.S.A.

The Degree of M.S.

Bowman, Hugh T.
Crick, Samuel A., M.R.C.S., L.S.A.

Two candidates failed to satisfy the examiners.

UNIVERSITY OF DUBLIN.—At the Summer Commencements, held on Wednesday, June 25th, in the Examination Hall of Trinity College, and presided over by the University *Caput*, Dr. Hart, Pro-Vice-Chan-

celler, the Very Rev. the Provost of Trinity College, and the Rev. J. W. Barlow, Senior Master Non-Regent, the following degrees in Medicine and Surgery were conferred.

Baccalauri in Chirurgia.—Gulielmus Stewart Lecky, Benjamin Thos. M'Creery, Thomas Orde Smith, Thomas Tilly Moore, Henricus Grey-Edwards, Fredricus Carolus Berry, Johannes Battersby, Andreas Murray, Johannes Auchinleck MacMunn, Abraham Malley, Johannes Carolus Hogan, Arturus Ricardus Fredericus Exham, Fitzgerald Neptunus Blood, and Crossdaile Miller Thompson.

Baccalauri in Medicina.—Gulielmus Stewart Lecky, Josephus Dallas Pratt, Henricus Grey-Edwards, Johannes Battersby, Johannes A. De C. Williams, Andreas Murray, Johannes Auchinleck MacMunn, Johannes Singleton Darling, Johannes Carolus Hogan, Gilbert Richardson, Arturus Ricardus Fredericus Exham, Abraham Cohen, Fredericus Gulielmus Warren, Fitzgerald Neptunus Blood, and Crossdaile Miller Thompson.

Doctores in Medicina.—Carolus Rolleston Woods, Samuel Warren, Thomas Blair Worthington, Gulielmus Fetherstone H. Lambert, Gilbert Richardson, Edwardus Josephus Latham Blacker, Josephus Lister (*honoris causâ*), and Jacobus Henricus Reynolds (*honoris causâ, in absentia*).

MEDICAL VACANCIES.

Particulars of those marked with an asterisk will be found in the advertisement columns.

THE following vacancies are announced:—

*BRIGHTON AND HOVE DISPENSARY—Resident House-Surgeon at the Western Branch. Salary, £140 per annum, with furnished apartments, coals, gas, and attendance. Diplomas and testimonials to be sent to the Chairman on or before Monday, August 4th.

COTON HILL INSTITUTION FOR THE INSANE—Assistant Medical Officer. Salary, £100 per annum, with board, lodging, and washing.

DORCHESTER COUNTY ASYLUM—Second Assistant Medical Officer. Salary, £100 per annum, with board, etc. Applications to the Medical Superintendent.

DUNFANAGHY UNION—Medical Officer for Gweedore portion of the Cross Roads Dispensary District, at a salary of £100 per annum, and £10 as Sanitary Officer, with Registration and Vaccination Fees. Election on the 16th instant.

*EVELINA HOSPITAL FOR SICK CHILDREN—House-Surgeon. Salary, £70 per annum, with board, lodging, and washing. Applications on or before July 25th.

GATESHEAD DISPENSARY—Assistant Surgeon. Salary, £120 per annum. Applications not later than July 17th.

ISLE OF THANET UNION—District Medical Officer and Public Vaccinator. Salary, £95 per annum. Applications not later than July 17th.

*KING'S COLLEGE—Professor of Comparative Anatomy.—Demonstrator in Physiology. For particulars, apply to the Secretary.

*LINCOLN COUNTY HOSPITAL—House-Surgeon. Salary, £100 per annum, with board and lodging. Applications to be made on or before August 11th.

*MIDDLESEX HOSPITAL—Physician and Surgeon; Assistant-Physician and Assistant-Surgeon.

*PLYMOUTH PUBLIC DISPENSARY.—Second Honorary Physician. Applications and testimonials to be sent to the Secretary on or before July 12th.

*SALOP FORESTERS' MEDICAL AID ASSOCIATION—Surgeon. Salary, £160 per annum.

*ST. MARYLEBONE GENERAL DISPENSARY—Obstetric Physician and third Honorary Physician. Applications not later than July 21st.

*TRURO UNION—Medical Officer and Public Vaccinator for St. Agnes District. Salary, £35 per annum, exclusive of the fees as allowed by the Local Government Board.

*UNIVERSITY COLLEGE HOSPITAL—Medical Officer to the Skin Department. Applications on or before July 21st.

*VICTORIA HOSPITAL FOR CHILDREN—House-Surgeon. Salary, £50 per annum, with board and lodging. Applications on or before July 26th.

*WEST LONDON HOSPITAL—Assistant-Surgeon. Applications to be made on or before July 25th.

*WESTMINSTER HOSPITAL—Medical Registrar. Salary, £40 per annum.

*WILTS COUNTY LUNATIC ASYLUM—Assistant Medical Officer. Salary, £110 per annum, increasing £10 a year up to £150 with board (save beer), residence, attendance, and washing. Applications to Dr. Cooke, at the Asylum, on or before July 23rd.

MEDICAL APPOINTMENTS.

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

ABBOTT, C. E., M.R.C.S.Eng., appointed Medical Referee to the Braintree District of the Essex Provident Society.

DRUMMOND, David, M.A., M.D., appointed Pathologist to the Newcastle-upon-Tyne Infirmary, vice Byrom Bramwell, M.D., resigned.

HETHERINGTON, R. P., M.B., appointed Assistant Medical Officer to the Sligo District Lunatic Asylum.

HOLMES, John, L.R.C.P.Ed., appointed Resident Medical Officer to Barrington's Hospital, Limerick, vice T. Carey, M.R.C.S.Eng., resigned.

MCPHAIL, Samuel, M.B., appointed Resident Medical Officer to the Greenock Infirmary, vice David Cairns, M.D., resigned.

PRICKETT, Marmaduke, M.A., M.D., appointed Physician to the Out-patient Department of the Samaritan Hospital, vice *W. H. Day, M.D., resigned.

BIRTHS, MARRIAGES, AND DEATHS.

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

MARRIAGES.

SPARROW—ARMSTRONG.—On the 9th instant, at East Lavant Church, near Chichester, by the Rev. George Gruggen (brother-in-law of the bride), George Gordon

Sparrow, L.R.C.P., M.R.C.S., second son of the late Dr. Robert Pennington Sparrow, R.N., of Southsea, to Josephine, youngest daughter of the late Hugh Clayton Armstrong, Esq., Newcastle-on-Tyne.

SWORDER—KERSHAW.—On July 3rd, at St. Mary's, Luton, Horace Sworder, L.R.C.P.London, M.R.C.S.Eng., L.S.A., Medical Officer of Health for the Borough of Luton, second son of Thomas Sworder, Esq., of Holly House, Luton, to Caroline, eldest daughter of J. J. Kershaw, Esq., of Bedford Villa, Luton, Bedfordshire.

IN Dr. Major's report on the West Riding Pauper Lunatic Asylum the interesting fact is stated that during the last year, which has been one of distress and privation in the north, the proportion of admissions to the asylum of persons in whom the exciting cause of insanity was traced to alcoholic excess, has fallen from 17.2 per cent. on the admissions to 13.1 per cent.

PUBLIC HEALTH.—During last week, the annual death-rate in London and twenty-two other large towns of the United Kingdom was 18 in every 1,000 persons living. It was 17 in London, 18 in Edinburgh, 19 in Glasgow, and (including 27 deaths that occurred prior to the 1st of June) 26 in Dublin. In the twenty English towns, the highest rates were as follow: Plymouth 20, Bradford 20, Liverpool 21, Norwich 22, Manchester 22, and the highest rate, 27, in Newcastle-upon-Tyne. The highest zymotic death-rates were 3.9 in Manchester and 4.6 in Newcastle-upon-Tyne. In London, there were 1,208 deaths; which included 11 from small-pox, 79 from measles, 38 from scarlet fever, 11 from diphtheria, 35 from whooping-cough, 11 from different forms of fever, and 13 from diarrhoea. Altogether, 198 deaths were referred to these diseases, being 108 below the average, and giving an annual zymotic death-rate of 2.9 per 1,000. The 79 fatal cases of measles were no less than 46 above the average. The disease was especially prevalent in East London; there were 18 fatal cases in Islington, 4 in Clerkenwell, 6 in Shoreditch, and 5 in Mile End Old Town. The deaths from diseases of the respiratory organs were 197, or 29 above the average. There were eight deaths from drowning; and the death of a coachman, on the 4th instant, was referred to sun-stroke. At Greenwich, the mean temperature of the air was 56.5°, and 5.1° below the average. The general direction of the wind was south-west, and the horizontal movement of the air averaged 17.1 miles per hour, or 6.7 miles above the average. Rain fell on six days of the week to the aggregate amount of 1.73 inches. The duration of registered bright sunshine in the week was equal to 41 per cent. of its possible duration.

MR. W. BOWER writes to say that the cases of epidemic illness at Metheringham are cases of scarlet fever, and not, as reported, of typhoid fever.

THE Medical Sanitary Officers of the Ennis Union, having recently applied for expenses of attendance at Petty Sessions to give evidence in sanitary prosecutions, have been informed by the Local Government Board that it was understood that all the duties required within their districts in reference to the sanitary law would be remunerated by the fixed salaries they receive.

FORFARSHIRE MEDICAL ASSOCIATION.—The twenty-first annual meeting of this Association was held in the Queen's Hotel, Dundee, on Thursday, the 3rd instant, under the presidency of Dr. Greig, of Dundee. Twenty-seven members were present. It was arranged to hold the next annual meeting in Arbroath. The following gentlemen were elected office-bearers for the ensuing year: *President*: Dr. Crichton, Arbroath; *Vice-Presidents*: Drs. Warman, sen., Arbroath, and Arrott, Dundee; *Honorary Secretary*: Dr. Sinclair, Dundee; *Honorary Treasurer*: Dr. Macewan, Dundee; *Council*: Drs. Christie, Miller, Rorie, Duncan, Charles Moon, and McCook; *Local Secretaries*: Dr. Dewar, Arbroath, Dr. Lawrence, Montrose, Dr. Mackie, jun., Brechin, Dr. Alexander, Forfar. Dr. Arrott, of Dundee, showed two interesting cases. Dr. Rorie, of the Royal Asylum, Dundee, read a paper on Some of the more Recent Methods of Staining Sections of the Brain and Spinal Cord, which were illustrated by microscopes. Dr. Sinclair, of Dundee, read a paper on the Therapeutics of Acute Rheumatism. Dr. Christie, of Dundee, read a letter from Dr. Cameron, M.P., on the legislation proposed for habitual drunkards. The usual votes of thanks terminated the proceedings. The members afterwards dined together in the hotel. Professor Spence, of Edinburgh, Professor Struthers, of Aberdeen, Dr. Angus Macdonald, Edinburgh, and Dr. Wilson, of H.M.S. *Unicorn*, were present as guests.

THE BRITISH MEDICAL TEMPERANCE ASSOCIATION.—A meeting of the British Medical Temperance Association will be held in the rooms of the Medical Society of London, 11, Chandos Street, Cavendish Square, on Thursday, July 17th, 1879.

