qualified practitioners, but give them a chance of continuing their vocation, provided that they can show a reasonable claim to be allowed to do so. I would suggest that one or more examinations of a certain standard be held for assistants, and that those who satisfy at that examination be allowed to conassistants, and that those who satisfy at that examination be allowed to continue as unqualified assistants, and to register as such, and that other unqualified men be excluded from entering the profession subsequently to the last period fixed for the examination, and registration of assistants. If some such plan as this be adopted, it will at least give unqualified men a last chance of clinging to their profession, and they will then have no occasion to complain that their livelihood has been snatched from them by arbitrary and unjust legisla-

LEAD-POISONING THROUGH HOME-MADE WINES.

MESSRS. PRICE, SONS, AND CO., Bristol, write: Our attention has been called to your article on "Lead-poisoning through Home-made Wines." It is quite true that common pans and common earthenware are glazed with compositions having lead in some form or other. But Bristol glazed stoneware, made by Powell and Sons and ourselves, and also by several potters in London, has no such drawback, and is glazed so perfectly as to withstand not only fermentation of wine or fruit, but the severest tests applied for electrical purposes, for accumulators secondary hatteries etc. mulators, secondary batteries, etc.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

THE following were the papers set at the recent examination for the Diploma of

October 15th, 1886.—Surgical Anatomy and the Francisco Muscle, and mengery.—1. Give the attachments of the Quadratus Lumborum Muscle, and mengery.—1. Resistant the several parts in relation with it. 2. Describe gery.—1. Give the attachments of the Quadratus Lumborum Muscle, and mention, in their normal positions, the several parts in relation with it. 2. Describe the operation of Excision of the Elbow-Joint, and give, in their order, the relation of the parts concerned. 3. How would you proceed to investigate a case of imperfect sight, with the object of determining in what part of the visual apparatus its cause is seated? 4. Describe the more common Ulcers of the Tongue. Give their chief differences, and their appropriate treatment. 5. Describe the symptoms of Rupture of the Urinary Bladder, and the complications which may result from it. State the various plans of treatment which have been recommended and give your reasons for the method you would adopt.

tions which may result from it. State the various plans of treatment which have been recommended, and give your reasons for the method you would adopt.

6. Give the symptoms, progress, terminations, and treatment of Caries of the Vertebre.—Candidates were required to answer at least four questions (including one of the first two), and were strongly advised to answer all six.

October 10th, 1886.—Midwifery and the Diseases of Women.—1. Describe the signs of Pregnancy at the sixth month.

2. Describe a case of Phlegmasia Dolens, from the onset of an attack to recovery. How would you treat it?

4. Describe a case of Urethral Caruncle giving it symmotoms its treatment and its behaviour a case of Urethral Caruncle, giving it symptoms, its treatment, and its behaviour under treatment.—Candidates were required to answer three of the four

questions

questions.

October 16th, 1886.—Principles and Practice of Medicine.—1. Describe the symptoms and treatment of Rheumatic Fever. Enumerate its chief complications and sequelæ. 2. What are the causes, symptoms, physical signs, and treatment of Ascites? 3. Discuss the etiology, anatomical characters, and clinical signs of Vesicular Emphysema. 4. Give an account of the action and uses of the following preparations, and mention their doses:—Carbonate of Ammonium, Tartarated Antimony, Hydrate of Chloral, Compound Pill of Soap, Compound Spirit of Ether, Tincture of Nux Vomica, Wine of Colchicum, and Copaiba.—Candidates were required to answer three of the four questions, including question No. 4. including question No. 4.

EXTRA-UTERINE FORTATION TREATED BY ELECTRICITY.

DR. W. E. STEAVENSON writes: My remarks at Brighton on the above subject, as quoted in the JOURNAL of November 27th, might be taken as being adverse to the employment of electricity in cases of extra-uterine feetation. That was not my wish; what I wanted to elicit was the best mode of applying electricity in such cases, and, if possible, by what means or in what way the electricity acted so as to destroy the feetus.

The Association had before it two successful cases of extra-uterine feetation,

each cured by electricity, and in each case the electricity was employed in an entirely different way; so that the active cause of the destruction of the fectus in one case must have been essentially distinct from that which caused its

In the case must have defined in the other.

In the face of the strong expression of Dr. Robert Newman, the great apostle in the face of the strong expression of Dr. Robert Newman, the great apostle in the face of the American In the face of the strong expression of Dr. Robert Newman, the great apostle of electrolysis in New York, at the recent annual meeting of the American Medical Association, it would be rash not to give electricity a fair trial in all cases of extra-uterine fectation. Dr. Newman is reported to have said: "And now, Mr. President, I add to the list the greatest achievement of electrolysis, the certain saving of every woman afflicted by extra-uterine pregnancy, while all perished in former times. Successful cases have been reported by A. D. Rockwell, E. G. Landis, Nathan Bozeman, Garrigues, Reeve, Lusk, and others. The modus operandi is simple. Repeated applications, one metal probe in the vagina or rectum, near and below the tumour, the positive sponge-electrode above the abdomen, will destroy and absorb the fectus. It is of great importance to the obstetrician—nay, to every practitioner—to know that he has a certain remedy obstetrician—nay, to every practitioner—to know that he has a certain remedy to save life in this troublesome anomaly of nature."

Dr. Newman has in this connection used the term electrolysis in a different sense to that in which it is understood in this country.

TINNITUS AURIUM A SYMPTOM ONLY

MR. H. BENDELACK HEWETSON (Ophthalmic and Aural Surgeon to the General Infirmary at Leeds) writes: In the British Medical Journal of December 4th, I see it reported, but shortly, that Mr. Ward Cousins read a paper entitled "Tinnitus Aurium," describing a method of treatment by "the alternate injection and evacuation of medicated air," before the meeting of the Southern Branch of the South-East Hants District. It would be interesting to learn how the air was medicated, and into what part of the ear it was injected; but I take it that timiting aurium being but a symptom only of many forms of earl disease the air was medicated, and into what part of the ear it was injected; but I take it, that tinnitus aurium, being but a symptom only of many forms of ear disease (and even when present not always symptomatic of disease of the ear), it cannot be pessible to treat successfully as a disease per se that which is looked upon as a subjective symptom of some lesion in the ear, or some disorder elsewhere. I can only conceive it possible that "tinnitus aurium" can be either temperarily or permanently relieved by this method when it depends on some error in intra-tympanic air tension. But I wish foreibly to draw attention to such a title as being entirely misleading, and I maintain that, however imperfectly reported, it is unscientific to attempt to treat a symptom of many forms of disease of the ear, and other errors of general health, by some universal plan applied to all, which the report of the paper (possibly quite unintentionally) implies.

## COMMUNICATIONS, LETTERS, etc., have been received from:

Mr. J. Alfred Wanklyn, London; Dr. Ireland, Prestonpans; Mr. F. C. Montague, London; Dr. T. L. Vanderstraeten, Colombo, Ceylon; Mr. Adams Frost, London; Mr. A. F. Keyworth, Marple; Mr. J. F. Owen Fowler, Hereford; Dr. M. P. Jones, Alfreton; Dr. D. Williams, Truro; Dr. C. Penruddocke, Winchcombe; Dr. Willoughby, London; Mr. C. Clay, Forant; Dr. Rentoul, Liverpool; Mr. A. F. Wilson, Stow-on-the-Wold; Mr. R. Fletcher, Lower Broughton, Manchester; Mr. Simeon Snell, Sheffield; Mr. W. H. Webb, Kingsbridge; Surgeon-Major Gardner, Fort William, Calcutta; Dr. S. Fitch, Halifax, Nova Scotia; Mr. J. H. Parkinson, Sacramento; Mr. Robert Hagyard, Hull; Dr. Smith, Woolston; Mr. P. Holland, London; Dr. Martin, London; Mr. E. J. Flynn, South Stockton-on-Tees; Mr. F. R. P. Darke, Salisbury; Mr. C. Douglas, Leicester; Dr. Styrap, Shrewsbury; Messrs. W. J. Bush and Co., London; The Secretary of the Hospitals Association, London; Mr. J. Brindley James, London; Mr. P. Swain, Plymouth; Messrs. Woollams and Co., London; Dr. Grant, Cairo; The Hospital, London; Dr. C. R. Illingworth, Clayton-le-Moors; Mr. R. J. Scott, Bath; Mr. A. J. Fitch, Glasgow; Messrs. Maggs and Son, Yeovil; Dr. Cullimore, London; Dr. Grimshaw, Dublin; Dr. Spender, Bath; Mr. T. Taylor, Bocking; Dr. T. Laffan, Cashel; Mr. C. B. Keetley, London; Dr. W. Duncan, London; Mr. H. Corby, Cork; Dr. Graily Hewitt, London; Mr. G. W. Collins, London; Mr. H. E. Allen, London; Mr. J. V. Fitzgerald, Birmingham; Professor McKendrick, Glasgow; The Secretary of the University of Durham, Newcastle-on-Tyne; Mr. W. Young, London; Dr. Edge, Manchester; Mr. A. Jacques, London; Dr. E. Long Fox, Clifton; Messrs. Cassell and Co., London; Dr. Geraghty, Loughrea; Mr. C. J. R. McLean, Yeadon; Mr. E. East, London; Mr. J. Lemon, Southampton; Surgeon-General C. A. Gordon, London; Dr. J. Wiglesworth, Rainhill; Mr. A. Ambrose, Buckhurst Hill; J. H. W.; Mr. C. H. Phillips, Hanley; Dr. W. Alexander, Streatham; Dr. E. M. Cosgrave, Dublin; Sir Dyce Duckworth, London; Mr. H. N. Custance, London; Mr. H. Scott, Manchester; Mr. W. B. Blackett, London; Dr. J. F. Tannahill, Borstal; The Editor of the Charity Record, London; Mr. C. Glasier, Eastbourne; Mr. T. G. Parrott, Bournemouth; Dr. J. D. Grant, London; Dr. Mickle, London; Dr. Tatham, Salford; Mr. R. S. Bryant, West Morchard; Dr. S. Hughes, Birkenhead; Dr. J. W. Hunt, London; Mr. A. Blumer, Sunderland; Mr. W. Johnson Smith, London; Our Edinburgh Correspondent; Our Liverpool Correspondent; Dr. Lloyd Francis, Northampton; Dr. Maxwell, Woolwich; Professor Pettigrew, St. Andrew's; Mr. L. M. Cordner, Aughnacloy, Tyrone; Mr. G. F. Blake, Dublin; Mr. T. Holmes, London; Our Berlin Correspondent; Dr. Zehender, Rostock; Dr. W. Hunter, Edinburgh; Dr. Ferrier, London; Mr. F.P. Maynard, Newcastle-on-Tyne; Mr. J. Macgregor, Salop; Mr. W. Watson Cheyne, London; Surgeon-Major Stephen, Lahore, etc.

## BOOKS, ETC., RECEIVED.

Text-Book of Pathological Anatomy and Pathogenesis. By Ernst Ziegler. Translated and Edited by Donald MacAlister, M.A., M.D. Sections IX-XII. London: Macmillan and Co. 1886.

Treatise on Chemistry. By Sir H. E. Roscoe, F.R.S., and C. Schorlemmer, F.R.S. Vol. III. Part III. Organic Chemistry. London: Macmillan and Co. 1886.

Transactions of the Pathological Society of London. Vol. XXXVII. 1886.

On Fevers; the History, Etiology, Diagnosis, Prognosis, and Treatment. By Alex. Collie, M.D. London: H. K. Lewis. 1886.

Gout and its Relation to Diseases of the Liver and Kidney. By Robson Roose, M.D. Third Edition. London: H. K. Lewis. 1886. Whitaker's Almanack. 1887.

The Prescriber; a Dictionary of the New Therapeutics. By J. H. Clarke, M. D. Edin. Second Edition. London: H. Kimpton. 1886.

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