

proved so successful in raising a Branch in so important a centre.

Read letter from Deputy Surgeon-General Sibthorpe, and proposed by-laws of new Branch at Burmah.

Resolved: That the Council of the British Medical Association records with much pleasure their recognition of a Branch of Burmah and approval of by-laws, and they desire to express the pleasure with which they acknowledge the zeal and successful energy which Deputy Surgeon-General Sibthorpe has again assisted in the formation of a new Branch, and their warm thanks to him and others for their efficient help in the formation of the Branch, and trust it will prove a mutual benefit.

Read letter from Dr. Robert Cuffe, of Scarborough, acknowledging on behalf of the members of Scarborough the resolution of Council of October 15th last.

Resolved: That Dr. Lauder Brunton, F.R.S., be requested to give the Address in Medicine.

Resolved: That Mr. John Chiene, of the University of Edinburgh, be requested to give the Address in Surgery.

Resolved: That Dr. Seaton be requested to give the Address in Public Medicine.

Read minutes of Arrangement Committee.

Resolved: That the minutes of the Arrangement Committee of the January 13th be received and adopted, and the recommendations contained therein be carried into effect.

Resolved: That the 118 candidates, whose names appear on the circular convening the meeting, be and they are hereby elected members of the Association.

Resolved: That the minutes of the Journal and Finance Committee of to-day's date be received and approved, and the recommendations contained therein carried into effect.

Resolved: That the minutes of the Premises and Library Committee of January 13th be received and approved, and the recommendations contained therein carried into effect.

SPECIAL CORRESPONDENCE.

BERLIN.

Discussion on Koch's Treatment at the Berlin Medical Society.—The State and Koch's Fluid.—Departure of Dr. Koch for Egypt.—A Convalescent Home for Koch Patients.

At the meeting of the Berliner Medizinische Gesellschaft on January 28th, the demonstrations in connection with Koch's remedy were resumed by Dr. A. Fraenkel, who exhibited two microscopic specimens taken from a case of tuberculosis of the tongue. One of the specimens came from the border of the ulceration, and an enormous infiltration of bacilli was to be observed. The second specimen was obtained by the excision of a miliary nodule at a distance of three-fourths of a centimetre from the ulceration. In it were giant cells, epithelioid cells, and likewise bacilli, though only in small number. Professor Virchow exhibited a great many specimens obtained *post mortem*, and took occasion to deny most emphatically the statement that had appeared in the daily papers to the effect that his views on the action of Koch's remedy had undergone any modification. Dr. Lassar exhibited a girl, aged 13, in whom a tuberculous affection of the thigh of two years' standing had been completely cured by treatment (begun in December) with Koch's remedy. Dr. Th. S. Flatau reported the further development of a case of tuberculosis of the larynx—a man, aged 30, whom he had described as steadily improving under the treatment as late as the beginning of January. The last (eighteenth) injection given was on January 20th, and since that time the patient had become alarmingly worse, both as regards local symptoms and general condition. On January 23rd, opaque miliary nodules were observed, and the larynx was to a great extent covered with miliary and submiliary nodules. In fact, the case presents a picture *in vivo* similar to that shown on the dissecting table by Professor Virchow. The discussion on Professor B. Fraenkel's address was resumed by Dr. Fürbringer, Medical Director of the Friedrichshain Hospital. He began by saying that since his last report six weeks before, he had been obliged to give up the treatment in twelve cases. None of these were in a very advanced stage

of disease, but all were marked by a certain acuteness of the tuberculous phenomena. "I do not hesitate to affirm," said Dr. Fürbringer, "that the more acutely febrile the lung tuberculosis, the more hectic the curve; in a word, the more acute the whole progress of the disease, the more unsuitable—indeed, contraindicated—is the treatment by Koch's injections. In my opinion, the hectic curve is of more weight than the duration and extent of infiltration in the lung. It is true that in isolated cases we may succeed by the injections in bringing down the curve to a subfebrile, even normal, one; but if we see no sign of such improvement in the course of the fourth week at latest, we must, I think, give up all hope of amelioration by the remedy. On the other hand, decided therapeutic effects may be obtained even where there is extensive infiltration, and the sputum is rich in bacilli—if only the strength has been tolerably maintained, and there is an absence of fever." Dr. Fürbringer proceeded to classify his cases, and was able to report one of cure ("provisional cure," as he calls it, as for the present one cannot be certain that it will not relapse), making the third case under his charge cured by the treatment. Fifteen of his cases showed "extraordinary improvement," both as to local and general symptoms, with increase of weight, etc. These were in the first and second stages of the disease. Ten cases showed little or no improvement; seven ended fatally. As regards *post-mortem* examinations, Dr. Fürbringer found extensive miliary tuberculosis in some cases, and in others none at all. He hesitates to draw the same conclusions as Virchow, though he thinks many facts speak in their favour. However, he agrees with Virchow that miliary and submiliary tubercle often remains entirely uninfluenced by Koch's remedy, and, formulating the thesis quoted above from an anatomical point of view, he said: "The more fresh tuberculous tissue is produced in a given time, the more ineffectual is Koch's remedy." In conclusion, Dr. Fürbringer strongly advised small doses and longer intervals between the injections. Dr. Paul Guttman spoke on the article published by Dr. Liebman, of Trieste, reported in the BRITISH MEDICAL JOURNAL of January 31st, in which it had been stated that tubercle bacilli had been found in the blood of patients treated with the lymph. Dr. Guttman and Professor Ehrlich had together examined blood taken from twenty-eight patients under treatment, under exactly the same conditions as described by Dr. Liebman. The preparations had been submitted to as many as four other observers, and the result was that not a single tubercle bacillus could be found. Dr. Guttman, in reporting on his cases in the Moabit Hospital, said that he, too, was decidedly of opinion that only cases in the initial stage—infiltration of the apex—should be subjected to the treatment. He gave the following statistics: of 164 cases—all under treatment for longer than three weeks, amongst which were many in an advanced stage—63 are decidedly improved—that is, 38 per cent. Of these 164 cases 51 were in the initial stage, and of these 51, 41—that is, 76 per cent.—are decidedly improved.

It is said that though the State does not intend to monopolise the manufacture of Koch's fluid, there is to be State supervision and control. The manufacture of the fluid will be freely permitted, but chemists will only be allowed to sell fluid that has been examined, found effective, and marked with a stamp by the State authorities.

Professor Koch has left Berlin for Egypt. He started on Sunday, and passed through Vienna on Monday.

A convalescent hospital is being built at Malchow, near Berlin, for the reception of Koch patients. The plan is the usual one—one-storey wings and a central building containing the offices, etc.

LIVERPOOL.

Royal Infirmary: Annual Meeting.—The Lock Hospital.—The Stanley Hospital.

THE annual meeting of the Royal Infirmary took place on January 31st. It appears from the report that the entire cost of the new infirmary was £170,000, of which £40,000 was spent in acquiring ground to enlarge the original site. The whole amount has been subscribed, so that the institution has entered on its new career free from debt. The annual in-

come from subscriptions, donations, and investments is quite inadequate to maintain the institution on the present scale. The new building, which has now been in use for some months, has been found fully to realise the expectations formed of it. The large and airy wards have been kept at a uniform warm temperature, in spite of the severe test of a winter of exceptional severity.

The Lock Hospital, which was diverted from its proper use to provide part of the temporary buildings that were used during the construction of the new infirmary, has not yet been reopened. Such a hospital is urgently required in a seafaring community such as this, and affords exceptional facility for instructing the senior students in an important class of diseases.

The Stanley Hospital, which was placed out of debt by the proceeds of the Fancy Fair held in 1889, when it also had some £1,200 placed to its credit for carrying out certain improvements urgently needed, has again relapsed into debt. This institution is situated in the north end of the city, in the neighbourhood of great docks, extensive workshops, and warehouses. The calls upon its resources have steadily increased during the twenty-four years of its existence in consequence of the rapid growth of the north end during that time. It is, moreover, the only general hospital in Liverpool that has an organised medical, surgical, and ophthalmic outpatient department. The cases that require admission greatly exceed the accommodation available, and many deserving and suitable cases have to be turned away. During the last few days a fund has been formed, which, if carried on with the same liberality with which it has been started, may effect something in the direction of placing the finances on a better footing.

MANCHESTER.

Manchester Medico-Ethical Society.—Manchester Aberdeen University Club Annual Dinner.—Death under Chloroform.

In their report presented to the members at the annual meeting of this Society the Committee stated that nine new members had been elected, four had resigned, and one had been removed by death during the year, leaving at present a total of 145 members. The most important medico-ethical questions of the day had been discussed, and practical effect given to some of the resolutions passed. The following office bearers were elected at the meeting:—*President*, Henry Ashby, M.D.; *Vice-Presidents*, W. Walter, M.D., A. M. Edge, M.D., J. F. Tatham, M.D., A. Hodgkinson, M.B.; *Treasurer*, D. Lloyd Roberts, M.D.; *Secretaries*, F. H. Collins, M.D., and F. M. Pierce, M.D.; *Committee*, A. Bailey, H. W. Boddy, M.D., J. Broadbent, A. Donald, M.D., J. Ferguson, J. Foster, A. Godson, M.D., T. Harris, M.D., C. F. Kitchen, J. A. Palanque, C. G. Skinner, M.D., F. H. Tinker.

The annual dinner of the graduates of Aberdeen University residing in or near Manchester was held on January 30th, in the Queen's Hotel, Manchester, Professor James Ross being in the chair. Over forty graduates—chiefly medical—attended the dinner, and the guest of the club on this occasion was Dr. Stephen Mackenzie, of London. Dr. Griffith resigned the office of secretary, and Dr. Wm. Milligan was appointed his successor.

The deputy city coroner held an inquest on Friday last on the body of a young woman aged 20. The young woman was suffering from some obscure affection, and it was considered advisable to administer chloroform to her in order to make a complete examination of her case. While the medical attendants were administering chloroform, and before the anæsthetic stage was reached, the pulse became weak, and the patient suddenly expired. The jury found that death resulted from the effects of chloroform administered with the object of making a necessary surgical examination.

LEEDS.

The Pollution of the River Aire.—National Registration of Plumbers.

On January 28th, a conference took place at the Bradford Town Hall between representatives of the Leeds and Bradford Corporations respecting the proposed Aire Conservancy

Board. Alderman Ward (Chairman of the Sanitary Committee) and twelve other members of the Leeds Corporation, with Sir George Morrison (Town Clerk) attended on behalf of the Leeds authorities, and the Bradford Corporation was represented by the Mayor (Mr. E. H. Hammond), Mr. R. Pratt (Chairman of the Street and Drainage Committee), and other members of the Town Council, with Mr. W. T. McGowen (the Town Clerk). The object of the conference was to take steps to induce the Local Government Board to consent to the establishment of a Conservancy Board to deal especially with the purification of the River Aire, it being desirable that a board should be formed to deal with the Aire apart from the Calder. A joint Board, it was urged, could not deal satisfactorily with the difficulties of the situation, and complications would ensue which would be disadvantageous to the authorities concerned. The conference of Aire authorities came to the conclusion that an amicable arrangement, satisfactory to all parties, could be arrived at, and that, while not desirous of in any way interfering with the arrangements of the Calder authorities, it would be advisable that each river should be under separate control. The Conference decided to take steps to secure an interview with the Local Government Board authorities, in order that their views might be clearly stated before them.

A public meeting, convened by the Leeds District Council, in connection with the movement for the national registration of plumbers was largely attended by master plumbers, journeymen, and apprentices. Mr. J. W. Connon, president, was in the chair. The annual report stated that the District Registration Committee had considered 370 applications for registration from all parts of the county, and the result had been the registration of 160 master plumbers and 171 operatives. Through the kindness of the Council of the Leeds School of Science and Technology a class has been formed for instruction in the theory and practice of plumbing. The pupils in the first session numbered 74. Of these, 45 presented themselves for examination by the City and Guild London Institution. Twenty-one were successful in passing the examination, and 4 entitled themselves to receive special prizes. The class in its second session had again 74 pupils on the register, with an average attendance of 60. In the examination of apprentices the passes were 48 per cent., the average throughout the country being only 44 per cent. Dr. Cameron, medical officer of health, mentioned that in the last fourteen weeks of 1890 the Leeds sanitary inspectors visited 443 houses in connection with scarlet fever, typhoid fever, diarrhoea, and pneumonia cases, and 334 of these houses were found to be structurally in an insanitary condition. He could not wonder that the death-rate remained what it was.

BIRMINGHAM.

Rebuilding of the General Hospital.

In connection with the scheme for rebuilding the General Hospital a large and enthusiastic meeting was held in the Town Hall on January 29th, under the presidency of the Mayor, amongst those present being Lord Leigh, Lord Lieutenant of Warwickshire; the Right Hon. Joseph Chamberlain, M.P.; Mr. P. A. Muntz, M.P.; Mr. J. C. Holder, and a large number of the clergy and representatives of the great commercial firms. Although this is the first public appeal for funds, a magnificent list of promised donations was read out, amounting in all to over £75,000, leaving only some £20,000 more to be subscribed to meet the requirements of the project. In this list were donations of £5,000 each from Mr. Holder, Mr. Jaffray, Messrs. G. and R. Tangye, and Mr. Alston Smith Ryland.

Mr. Chamberlain, in a most admirable speech, proposed the first and most important resolution, which was carried by acclamation. It was as follows:—"That the present hospital is inadequate to the requirements of the city on account of its sanitary arrangements, site, and surroundings, and that it is therefore desirable to rebuild the hospital on the site in St. Mary's Square approved of by the governors." Mr. Chamberlain reminded his audience that about thirty years ago he urged that the hospital should be rebuilt on a new site; it appeared, however, that he was rather before his time. He then alluded to the splendid example of Mr. Holder in giving his magnificent donation, and to the enthusiasm with

which, as chairman of committee, he had pressed forward this scheme of rebuilding. He pointed out that although a large sum had been promised it had been given by only 320 persons out of a population of half a million, and appealed for further help from the mass of the inhabitants, and especially from those limited liability companies which had taken the place of private firms, and which should take over the moral responsibilities and obligations of those private firms. Apart from its functions as a great charity, he reminded the meeting of the value of the hospital as a great school of medicine, where experience and practice were obtained, by which alone the high standard of the healing profession can be maintained in our midst. He said: "In that capacity it appeals to the self-interest of every one of us, be he rich or poor, because it is of the utmost importance that there should always be an opportunity for securing this experience in the widest possible form in order that we may be assured of the greatest skill whenever we had need of it." This resolution was supported by Dr. Wade and Mr. Pemberton. Amongst the other speakers were Dr. R. W. Dale, Mr. Councillor Ball, Lord Leigh, and Mr. P. A. Muntz, M.P.

CORRESPONDENCE.

OPERATIVE TREATMENT OF CHRONIC DISEASE OF THE UTERINE APPENDAGES.

SIR,—The recent discussions on the diseases of the uterine appendages at the Medical Society and elsewhere have brought this subject prominently before the profession.

Affections of the uterine appendages are nothing new; they are comprised under the name pelvic peritonitis or perimetritis; and since the writings of Bernutz in 1860-62 it has been well known, though not till lately current, that in a large number the route and sometimes the focus of infection has been the tubes.

A change in nomenclature has arisen, for words ending in "salpinx" have displaced the older and more general names. Yet further changes have arisen in practice in some quarters, in that these affections have become the objects of innumerable operations. Now perimetritis is probably the very commonest of all the serious diseases of women. It is also perfectly certain that the great majority of cases get quite well without any operation. We are far from denying that exceptional cases call for surgical procedures, or that cases of prolonged suppuration in the pelvis are properly treated by the application to them of ordinary surgical principles. But this wholesale resort to a mutilating operation, advocated by several speakers at these discussions, calls for serious consideration by the profession. We have both been in charge for many years of the obstetric and gynaecological departments of two of the great general hospitals of London, besides private practice. During that time thousands of patients have passed through our hands, and a very large number of cases of pelvic inflammation. We have on the rarest possible occasions resorted to removal of the appendages, and never unless life seemed to be threatened or the health had been greatly impaired for many months. We never have sent patients away after a course of Epsom salts, "and when this drug fails have folded our hands, and expressed the deepest sympathy with the sufferer." On the contrary, our patients have generally got well by the use of patience on their part and on ours. If, after a long course of patient treatment, it has seemed to us imperative to operate, we have been ready to do so, and have done so in rare instances. Without patience, many women, who have had matting of the pelvic organs for months, but who have perfectly recovered and have borne children, would have had their uterine appendages removed.

Statistics on matters of this kind are often given in a manner which does not bring out important points. For instance, in the discussion at the Medical Society, it would have been interesting to know (1) the total number of women seen during the period embraced by the table, and (2) the total number of cases of perimetritis or pelvic inflammation among them. Statistics without these facts may give information as to the chances of the operation; those indicated would give the chance of being operated upon.

A plea for patience is to be found in the declaration of the

operators that "the full benefits of the operation are not usually felt for months or years after." If the operator would exercise this patience before the operation there might be the less need for its exercise by the patient after the operation. To operate after a "couple of months" is in our opinion quite unjustifiable in chronic cases, or in any except those of peril to life. To remove the ovaries in cases of congenital ill-development with dysmenorrhœa and sterility and anteflexion of the uterus is a proceeding we have never seen necessary to recommend.

Death from disease of the appendages is of extreme rarity, but the mortality after the operation is considerable. It is inconceivable to us that this amount of operating is justifiable, and we beg to protest in the strongest manner against it.

This particular operation has already furnished material for legal proceedings in a well known case. It is conceivable that it might form the object of legislation. We cannot think that the good sense of the profession can fail to be roused against it. The sooner the better. There are several other questions requiring an answer, some of which have been referred to by others; for instance, what were the results in the unreported cases? what are the dates of the reported cases? what were the results in general surgery at the Waterloo Bridge Road Hospital during the time of the unreported cases? These are questions concerning the authorities of that hospital. But we prefer to keep to our point, and to repeat our protest against the removal of the appendages whenever a tumour of them is found accompanied by pain and hæmorrhage; or a dilated tube; or affections of the tubes with tender or even enlarged ovaries, after treatment has been tried for a couple of months: or when a woman suffers from pelvic pain, dysmenorrhœa, or dyspareunia, after one or more attacks of pelvic inflammation; or in cases of ill-developed ovaries with anteflexion and dysmenorrhœa: or in cases of cardiac dyspnoea; or of tubercular disease of the tubes associated with similar disease of other organs; or in neurotic women without disease of the appendages. We protest against the view that any one of the above conditions diagnosed before, or discovered during or after, an operation, is in itself a justification for the removal of the uterine appendages; and such practice is in our opinion highly injurious to women and to the profession. In no other department of surgery is inflammation of an organ considered to justify its removal.—We are, etc.,

JOHN WILLIAMS.
F. H. CHAMPNEYS.

SIR,—Owing to indisposition, I was unfortunately prevented from taking part in the discussion at the Medical Society on January 26th. I am particularly interested in the subject discussed, inasmuch as for many years I have been of opinion that a great deal too much has been done in the way of opening women's abdomens and "eviscerating" their pelvis. Judging from the number of operations for removal of the uterine appendages, exclusive of those for bleeding fibroids, which have been reported or have otherwise come to light, it would seem that disease of the ovaries and tubes must either be enormously on the increase, or else organs are frequently removed in cases which do not warrant such extreme measures.

It appears to me that the time has arrived when the profession should make some effort to lessen the number of spaying operations on women. If this unlimited mutilation of women be permitted to go on unheeded and without protest, discredit will assuredly fall on abdominal surgery and on those who practise in this particular branch. The matter rests entirely with the leaders of the profession. If they will speak out boldly and condemn such reckless and unscientific surgery, many lives will be saved and much good will ensue. But if they decline to move in the matter, not only will they be guilty of culpable negligence, but they will also be looked upon as acquiescing in what has become little short of a public scandal.—I am, etc.,

Brook Street, W.

ALBERT C. BUTLER-SMYTHE.

SIR,—In the discussion on the above subject held lately at the Medical Society of London, the account of which is published in the BRITISH MEDICAL JOURNAL of January 31st, Mr. Knowsley Thornton is reported to have said that "the diseases for which ovariectomy was performed always killed