

seconded, the following resolution: "That, in the opinion of this meeting, it will be prejudicial to the best interests of the community that the Midwives Registration Bill as it now stands should become law; and that its amendment is most desirable and necessary; and that the Parliamentary Bills representative be empowered to express this view at the next meeting of the Parliamentary Bills Committee."

The meeting then adjourned to join the conjoint meeting with the Staffordshire Branch.

BRITISH MEDICAL ASSOCIATION.

FIFTY-NINTH ANNUAL MEETING.

THE fifty-ninth Annual Meeting of the British Medical Association will be held at Bournemouth on Tuesday, Wednesday, Thursday, and Friday, July 28th, 29th, 30th, and 31st, 1891.

President: WILLOUGHBY FRANCIS WADE, B.A., M.B., F.R.C.P., J.P., Senior Physician, Birmingham General Hospital, 27, Temple Row, Birmingham.

President-elect: JOHN ROBERTS THOMSON, M.D., F.R.C.P., Consulting Physician, Royal Victoria Hospital, Bournemouth, Monkchester, Bournemouth.

President of the Council: WITHERS MOORE, M.D., F.R.C.P., Consulting Physician, Sussex County Hospital, Burgess Hill, Sussex.

Treasurer: HENRY TRENTHAM BUTLIN, F.R.C.S., Assistant-Surgeon to St. Bartholomew's Hospital.

An Address in Medicine will be delivered by THOS. LAUDER BRUNTON, M.D., F.R.S., Lecturer on Materia Medica and Therapeutics at St. Bartholomew's Hospital, London.

An Address in Surgery will be delivered by JOHN CHIENE, M.D., F.R.C.S.Ed., Professor of Surgery at the University of Edinburgh.

An Address in Public Medicine will be delivered by EDWARD COX SEATON, M.D., Lecturer on Public Health at St. Thomas's Hospital, London.

The scientific business of the meeting will be conducted in nine Sections, as follows, namely:

A. MEDICINE.—*President:* P. H. PYE-SMITH, M.D., F.R.S. *Vice-Presidents:* WILLIAM GEORGE VAWDREY LUSH, M.D.; THOMAS BARLOW, M.D. *Honorary Secretaries:* WM. FRAZER, M.D., "Elmhurst," Madeira Road, Bournemouth; H. MONTAGUE MURRAY, M.D., 27, Savile Row, W.

B. SURGERY.—*President:* JOHN WARD COUSINS, F.R.C.S. *Vice-Presidents:* J. D. G. DOUGLAS, M.D.; WM. WATSON CHEYNE, F.R.C.S. *Honorary Secretaries:* A. GUNTON TURNER, M.R.C.S., "Holmwood," Bournemouth; A. A. BOWLBY, F.R.C.S., 43, Queen Anne Street, W.

C. OBSTETRIC MEDICINE AND GYNÆCOLOGY.—*President:* W. J. SMYLY, M.D. *Vice-Presidents:* ALLAN MACLEAN, M.D.; A. H. G. DORAN, F.R.C.S. *Honorary Secretaries:* H. A. LAWTON, M.R.C.S., 74, High Street, Poole, Dorset; MONTAGU HANDFIELD-JONES, M.D., 24, Montagu Square, Hyde Park, W.

D. PUBLIC MEDICINE.—*President:* J. BURN RUSSELL, M.D. *Vice-Presidents:* H. F. PARSONS, M.D.; JOHN COMYNS LEACH, M.D. *Honorary Secretaries:* C. H. W. PARKINSON, M.R.C.S., Wimborne Minster; P. W. G. NUNN, L.R.C.P., "Maplestead," Christchurch Road, Bournemouth.

E. PSYCHOLOGY.—*President:* P. MAURY DEAS, M.B. *Vice-Presidents:* HENRY JOHN MANNING, M.R.C.S.; D. NICOLSON, M.D. *Honorary Secretaries:* P. W. MACDONALD, M.D., Dorset County Asylum, Dorchester; WILLIAM HABGOOD, M.D., Belmont, Sutton, Surrey.

F. PATHOLOGY.—*President:* W. HOWSHIP DICKINSON, M.D. *Vice-Presidents:* KINGSTON FOWLER, M.D.; W. RUSSELL, M.D. *Honorary Secretaries:* W. G. SPENCER, M.B., 94, Wimpole Street, W.; E. HYLIA GREVES, M.D., Rodney House, Poole Road, Bournemouth.

G. OPHTHALMOLOGY.—*President:* N. C. MACNAMARA, F.R.C.S. *Vice-Presidents:* ROWLAND W. CARTER, M.D.; MALCOLM M. McHARDY, F.R.C.S.Ed. *Honorary Secretaries:* J. B. LAWFORD, M.D., 55, Queen Anne Street, W.; BERNARD SCOTT, M.R.C.S., "Hartington," Poole Road, Bournemouth.

H. DISEASES OF CHILDREN.—*President:* J. F. GOODHART, M.D. *Vice-Presidents:* T. W. TREND, M.D.; T. B. SCOTT,

M.R.C.S. *Honorary Secretaries:* SIDNEY PHILLIPS, M.D., 62, Upper Berkeley Street, W.; DENNIS C. EMBLETON, L.R.C.P., "St. Wilfred's," Michael's Road, Bournemouth.

I. THERAPEUTICS.—*President:* WM. VICARY SNOW, M.D. *Vice-Presidents:* SIDNEY COUPLAND, M.D.; A. G. BARRS, M.D. *Honorary Secretaries:* CHRISTOPHER CHILDS, M.D., 2, Royal Terrace, Weymouth; JOHN ROSE BRADFORD, M.D., 52, Upper Berkeley Street, W.

Honorary Local Secretary: JAMES DAVISON, M.D., "Walderslow," Bournemouth.

PROGRAMME OF PROCEEDINGS.

TUESDAY, JULY 28TH, 1891.

9.30 A.M.—Meeting of 1890-91 Council.
11.30 A.M.—First General Meeting. Report of Council. Reports of Committees: and other business.
4 P.M.—Sermon by the Right Rev. the Lord Bishop of Winchester.
8.30 P.M.—Adjourned General Meeting from 11.30 A.M. President's Address.

WEDNESDAY, JULY 29TH, 1891.

9.30 A.M.—Meeting of 1891-92 Council.
10 A.M. to 2 P.M.—Sectional Meetings.
3 P.M.—Second General Meeting. Address in Medicine by Dr. T. LAUDER BRUNTON, F.R.S.

THURSDAY, JULY 30TH, 1891.

9.30 A.M.—Meeting of the Council.
10 A.M. to 2 P.M.—Sectional Meetings.
3 P.M.—Third General Meeting. Address in Surgery by Professor J. CHIENE.

7 P.M.—Public Dinner of the Association in the

FRIDAY, JULY 31ST, 1891.

10.30 A.M. to 1.30 P.M.—Sectional Meetings.
3 P.M.—Concluding General Meeting. Address in Public Medicine by Dr. EDWARD C. SEATON.

SATURDAY, AUGUST 1ST, 1891.

Excursions.

SPECIAL CORRESPONDENCE.

BERLIN.

Cantharidinate of Potash in Tuberculosis.

LAST week's meeting of the Berliner Medizinische Gesellschaft was of exceptional interest. Every place in the hall was filled in expectation of Professor Liebreich's address on his new remedy for tuberculosis. The following is an abstract of the address, some of the principal points being given in the Professor's own words. He began by saying that, though it was not his custom to publish a research the results of which he had not investigated in detail, he felt obliged, by the special circumstances of the case, to do so in this instance.

He gave an account of the principles that had guided him in this and similar researches. Years ago, in his first address on chloral hydrate, he had already pointed out that, in considering a substance, it is of the greatest importance to form a notion of the atomic grouping in the molecule. The observation of this principle led to the discovery of a number of efficacious remedies—for instance, salicylic acid and salicylate of soda. "How long substances can remain unemployed is shown by the example of chloral hydrate, the therapeutic qualities of which were unknown for thirty-seven years after its discovery by Justus von Liebig."

But it would be onerous to be led only by the above principle in research. An illustration of a different method is the discovery of lanolin, by which ointment therapeutics, which had sunk almost into contempt, were raised to a scientific basis. "Then again—and this we owe to Koch—disinfectants were made the objects of inquiry. From the beginning I expressed my opinion that all those substances that exercise a deleterious influence on the lowest organisms outside the body must be inefficacious when introduced into living tissue. In continuation of my former chloral researches, I was able to show, in connection with the 'dead spaces' in chemical reactions, that the reaction that takes place in the cell is very different from that which takes place outside of it."

Then, again, Pasteur's theory that bacteria are destroyed by their own products of metabolism was followed up; but the extremely toxic quality of these products has hitherto formed

a hindrance to their efficacious therapeutic action. It is to be hoped, however, that the attempts to extract efficacious bactericidal substances from the products of metabolism of the bacteria may yet be attended with success. At present treatment by attenuated bacterial cultivations is forming the subject of many experiments, but this has no direct relation to pharmaco-dynamic investigations.

Professor Liebreich then turned to his experiments with local anaesthetics, named by him *anæsthesia dolorosa*, because though they produce local anæsthesia, the injection itself is painful. In the course of investigations with these bodies, it became clear that their effect was not due to chemical action, as in the case of chloral hydrate, but to purely physical causes. It was while engaged in these researches that Professor Liebreich first saw lupus cases which were being treated by tuberculin, and at once formed the opinion that the local action must be due to a substance, whatever its origin, similar in action to those known under the name of "acria." Upon this the speaker's experiments with cantharidin (the active principle of the Spanish fly) were begun. The Spanish fly has been used occasionally in therapeutics since the time of Hippocrates; Pliny mentions it. In later times it occurs in France and Italy under the names of "pastilles galantes" and "diabolini," but its effect has always been uncertain, often dangerous, owing to the impossibility of dosing the active principle with any accuracy.

It was Robiquet who first extracted the active principle, cantharidin, as a chemically pure crystalline substance, which can be weighed and dosed with exquisite accuracy. Its toxic qualities, and especially its irritating action on the kidneys and urino-genital apparatus are well known, and have been described by Cornil, Ida Eliaschoff, and others. When cantharidin is taken internally serum is exuded from the capillaries, not only of the kidneys, but also of the lungs and of other organs, as has been proved by the experiments of the speaker. This is the characteristic action of cantharidin. According to the speaker's theory, the irritability of the capillaries varies in the different parts of the organism. He assumes that an irritated condition of the capillaries favours the process of exudation. Thus a dose of cantharidin, too small to exercise a toxic action on healthy capillaries, will produce exudation in inflamed capillaries. This exudation of serum in tissue may act in two ways (1) by nourishing the cells and bringing back to their normal condition badly nourished cells; and (2) by the disinfecting action of the serum the affected spot.

In his experiments, which he began at the Augusta Hospital, the speaker made use of a solution containing cantharidinate of potash. The maximum dose was 6 decimilligrammes, the usual dose being from 1 to 2 decimilligrammes. "If it can be proved that in cantharidin we possess a means of producing an increased secretion of serum at any one spot, we may succeed in concentrating at this spot efficacious substances, which, under ordinary circumstances, do not easily find their way there. We know substances that circulate in, and are decomposed by, the blood, but which only with difficulty pass through the capillaries. But if we know that at an affected spot the exudation from the capillaries is facilitated, we can imagine that a larger quantity of an efficacious substance may find its way to this spot, thus strengthening the otherwise feeble disinfecting power of the serum. It seems to me not unlikely that such a combination of two remedies might possibly lead to a new therapeutic method. As regards practical application, special attention should be paid to the kidneys. It is clear that this treatment should not be applied where there is disease of the kidneys. I should advise doses of 1 decimilligramme to begin with, followed by an experimental increase to 2 decimilligrammes. It is as well to let a day elapse between the injections."

On the conclusion of the address Dr. Heymann and Professor B. Fraenkel exhibited cases treated by cantharidinate of potash, which showed marked and in some cases surprising improvement.

LIVERPOOL.

The Outbreak of Typhus in Birkenhead.—The Liverpool Dispensaries.

THE outbreak of typhus fever in Birkenhead, noticed in the

BRITISH MEDICAL JOURNAL some months ago, has not yet been stamped out, a fresh case having been reported on an average about once a fortnight, and the disease has lately made its appearance in two districts that had hitherto escaped. The Town Council, acting on the recommendation of the Local Government Board, has sanctioned the erection of a hospital containing seventy-two beds on a new site, but its construction has not yet been commenced, and the old fever hospital continues to be used when fever cases require to be removed from their homes. It was supposed that since public attention was directed to the management and condition of the latter institution last autumn, considerable improvements had been effected in it, but that much remains to be done before it can be considered satisfactory is evident from the fact, which is not disputed, that lately adult male and female patients have been treated in the same ward. The proposal to construct a new hospital has met with a good deal of opposition from the ratepayers and a section of the press, and one paper has expressed the opinion that the so-called "indecency" of mixing the sexes in cases of virulent typhus was more sentimental than real, adding the irrelevant comment that in children's hospitals separation of the sexes is not attempted. It is much to be desired that the Town Council would carry out the recommendation of the Local Government Board and erect a new hospital without delay, and in the meantime place the management of the existing institution above suspicion by appointing to it a competent and responsible medical officer.

The annual report of the Liverpool Dispensaries shows that the charity is in the exceptional position of being free from pecuniary embarrassment. Judging from the statistics embodied in the report, the work accomplished by it is very large, 67,708 patients having been treated at the three dispensaries during the year, while the visits and attendances reached a total of 198,551. It is a decided anomaly that the acting medical officers are all salaried, and have no voice in the management of the institution and the disposal of its funds; and there can be no doubt that the Committee would be much strengthened if its constitution were modified in this respect so as to bring it into conformity with similar bodies elsewhere. The three dispensaries are each officered by three resident medical men. The peculiar feature of the work consists in visiting the sick poor at their own homes, and this is so vast an undertaking in a city as large as Liverpool that it might well absorb the energies of the nine medical men. But, in addition to this, each dispensary is open at all hours for the treatment of accidents, and this necessitates the constant presence of a medical officer in the house. It is not too much to say that serious accidents could be much more satisfactorily treated at the hospitals, which are so situated as to minister to the same areas as the dispensaries; and the maintaining of a medical officer constantly on duty at both institutions is a needless waste of funds and time. It is no uncommon occurrence for patients to obtain treatment first at one and then at the other institution.

BIRMINGHAM.

Amalgamation of Queen's and Mason Colleges.—Hospital Reform Committee.

FOR some years part of the teaching of the medical faculty of Queen's College has been carried out by the Professors of Mason College at that institution, and the arrangement has been of advantage to both. The time has now arrived when it seems very desirable, we might even say necessary, for this association to be made closer, and negotiations are in progress for the complete transfer of the medical faculty to Mason College, where suitable provision exists, or will be provided, to accommodate the increasing number of students, for which the present buildings occupied at Queen's College are becoming quite inadequate. The theological faculty will remain in possession of the present Queen's College building, and the Court of Chancery will be appealed to to authorise the separation of the two faculties. The details of the proposed arrangement are under the consideration of a joint committee taken from the governing bodies of the two Colleges, and so far no real obstacle has arisen to the proposed fusion. At a meeting of the professional body of Queen's College held last week, an outline of the scheme was sub-

mitted in so far as it relates to the formation of the Senate, Boards of Studies, title and constitution of Council, and was unanimously approved. The general feeling outside the two Colleges is strongly in favour of the amalgamation, which is rightly regarded as an important step in the direction of a complete provision for a university education in the Midlands.

The report of the Committee of Inquiry is now published, and will be considered at a meeting shortly to be held by the representatives of the medical charities and the medical profession, under the presidency of the mayor. The Committee recapitulate the steps which led to their appointment, and then point out the sources, written and oral, from which they obtained the evidence considered. The allegations against the existing hospital system in Birmingham are summarised under several headings, which are discussed by the Committee, as to their existence, their causes, and their possible remedies. A very important statement is made on page 10; it is to the effect that the fundamental work of the hospitals consists in the treatment of in-patients, and that before the Committee practically no complaints were made concerning the management of the in-patient departments. It is also pointed out that the Committee is purely one of investigation, and so have thought it right not only to state their conclusions, but to place the main arguments submitted to them on record, so that hospital managers and the public may form an independent judgment. From what has gone before, it is evident that the out-patient departments are those most closely requiring scrutiny, and it may be accepted without hesitation that a large number of people obtain treatment there who are unsuitable cases—a few because they can well afford to pay for treatment, some perhaps who would be better dealt with by the Poor-law authorities, and very many with trivial complaints who might by providence provide their own private medical treatment. The result is demoralisation of the patients, who lose habits of thrift, insufficient investigation of some cases of difficulty, interference with medical instruction for students, and undue strain upon the medical officer attending. The question whether a patient is a fit subject for hospital treatment or not is admitted to be a very difficult one, depending partly on pecuniary and partly on medical considerations, and the evidence seems to point to a preliminary investigation by laymen as to eligibility *quod* pecuniary means, reserving power to the medical officer to reject any case subsequently on the ground of triviality. In conclusion, the Committee recommend:—1. The formation of a General Council, representative of all the public medical institutions of the city. 2. The formation of an inquiry agency, to investigate the circumstances of applicants for treatment at the hospitals. 3. That apart from first aid and urgent cases, regulations should be framed by the hospitals to exclude trivial cases, and cases where either the patients are in a position to pay for such treatment as they may require, or which could be more properly dealt with under the Poor Law. 4. That facilities should be given for cases so excluded being dealt with by dispensaries and provident associations. 5. That any person recommended by an approved provident association, or by a qualified medical practitioner, should, as a rule, be admitted to the out-patient departments of the hospitals without further formality.

SHEFFIELD.

Reservoirs and Suicides.—Management of the Workhouse Hospital.—The Jessop Hospital.—A Centenarian.

THE body of a young lady, who had been missing for seven weeks, has recently been found in one of the reservoirs for supplying the town with water, where it had been, there seemed no doubt, since her first disappearance. These reservoirs near the town are often chosen by suicides, and the coroner's jury did well to call attention to the easiness of access to their banks, and to suggest that the authorities should adopt some means to remedy this.

That the mixed authority of master, matron, and superintendent nurse at the hospital of the Sheffield workhouse does not appear to have given satisfaction is not to be wondered at, nor is it surprising that the Chairman of the Hospital Committee is desirous of effecting some change. It is pro-

posed that the hospital matron, to the relief of the workhouse master and matron, shall have the control of the nurses and nurses' home, the control of the sick in the wards—indeed, the direction of the medical staff, and the general ordering and direction of the infirmary as far as nursing goes. To the outsider the Chairman seems to be pursuing a right course; and it is to be hoped that when the subject comes up again before the guardians they will give the proposal fair consideration.

The annual meeting of the Jessop Hospital was held on February 23rd. The report testified to the continued good work that the hospital was doing, but regretted that the expenditure had exceeded the ordinary income by something like £500. This deficit had been met by using donations and legacies which had come in during the year; but, as the Chairman pointed out, it was impossible to take into account such a precarious source of income as that derived from donations and legacies, and he appealed for increased subscriptions.

A centenarian is reported to be living at Mexboro. She is stated to have attained her 103rd year on March 2nd. Some years since her age was verified by a reference to the parish register at her native place. Her memory of events seventy or eighty years ago is said to be very clear. She is hearty and vigorous, and to "all appearances has a long lease of life before her."

CORRESPONDENCE.

THE NEW FACTORY BILLS.

SIR,—The debate on the Factories and Workshops Bill was most gratifying from the support which the certifying factory surgeons received from both sides of the House. Their position was materially strengthened in the course of the discussion, and there are now good reasons to hope that the 19th Clause of the Bill will not pass in its present form. To ensure a satisfactory modification in the clause in the interests of young workers for whom the surgeons form a most valuable protection, the Standing Committee on Trade, to whom the Bill has been referred, should be supplied with figures from different districts showing the number of young persons rejected for physical unfitness or actual disease during specified periods. Evidence of this kind ought not to be difficult to produce. I hope factory surgeons will supply such statistics to Dr. Farquharson or to myself, so that all possible steps may be taken to defend the interests of the profession, and to maintain that medical supervision which is essential to satisfactory sanitary working of any factory or workshops Act.—I am, etc.,

WALTER FOSTER.

TAPPING THE VENTRICLES.

SIR,—When reading the interesting and valuable paper of Mr. Mayo Robson on tapping the ventricles in certain cases of brain disease, I was surprised to find that he described his case as "one of the earliest, if not the first, in which the operation of trephining and tapping the ventricles has been performed."

From subsequent correspondence in the BRITISH MEDICAL JOURNAL, it appears that there are other competitors for such priority. So far as these claims relate simply to the evacuation of the ventricles by surgical operation, it seems only right, on the principle of *sum cuique*, to show that neither in the case of one or the other of three competitors can their claim be sustained. My attention was called to this question so long ago as 1841, when working on the subject of my Fothergillian essay on acute hydrocephalus, though no mention is made therein of the operations, as I was restricted to the acute disease. But at that time Dr. Conquest informed me of the success that had attended two cases of chronic hydrocephalus in which he had punctured the ventricles in the year 1830. Prior to this, Mr. Callaway, at Guy's Hospital, had performed the like operation, and about the same time Mr. Marsden and Dr. Armstrong both in London. But even earlier than this Dr. Bedor, of Troyes, in December, 1827, performed the operation with complete success on a child, aged 14 months, evacuating about a pint of clear